
The effectiveness of interventions to improve the welfare of those experiencing and at risk of homelessness: An updated evidence and gap map

Sabina Singh and Howard White

Part 4

The effectiveness of interventions to improve the welfare of those experiencing and at risk of homelessness: An updated evidence and gap map

Sabina Singh and Howard White

Part 4

Contents

About this report	6
Acknowledgements	7
Foreword	9
Summary	12
Chapter 1 The Global Evidence Base for Effectiveness Research into Homelessness Interventions	14
• Introduction	14
• What evidence is included in this map?	15
• Methodology	16
• Systematic search of Grey Literature	17
• Screening at Title and Abstract	18
• Full-text screening	18
• Data Extraction and critical appraisal of included studies	19
• Randomised controlled trials make up almost half of studies	21
• The evidence base is predominantly from North America	21
• The number of studies published each year is increasing rapidly	22
• Details into how often intervention types are studied and how often outcomes are measured	23
• For which interventions are there gaps in our understanding of what works?	24
• We use checklists and a 'weakest link in the chain' principle to assess confidence in studies	25
• Most studies are assessed as low confidence	26

Chapter 2 The Evidence Base for Effectiveness Research in the UK	28
• Increasing numbers of studies are being published in the UK	28
• Impact evaluations have been conducted for some interventions but not others	32
• Different study designs are used to evaluate different intervention types	32
• Studies focus on subgroups of people with mental illness and substance use issues more than others	33
• Studies measured the impact of interventions on some outcomes more than others	33
Appendices.....	40
• Appendix 1 Search strings for each intervention category in the EGM	40
• Appendix 2 Organisational/institutional websites searched	47
• Appendix 3 List of hand searched journals	50
• Appendix 4 A brief analysis of new records in the homelessness effectiveness map (based on records added during 2021 update)	51
• Appendix 5 Description of Intervention and outcome categories and sub-categories	53
• Appendix 6 Characteristics of impact evaluations from the UK	67
• Appendix 7 List of Included Studies	74
• Appendix 8 List of Impact Evaluations conducted in the UK	126

About this report

The Centre for Homelessness Impact (CHI) champions the creation and use of better evidence for a world without homelessness. Our mission is to improve the lives of those experiencing homelessness by ensuring that policy, practice and funding decisions are underpinned by reliable evidence.

CHI has worked with the Campbell Collaboration, Heriot-Watt University and Queen's University Belfast to create Evidence and Gap Maps on homelessness. The Campbell Collaboration is an international research network which publishes best practice standards for systematic reviews and evidence maps. Campbell Systematic Reviews are the global repository of policy-relevant reviews and maps. All reviews and maps produced by the Centre are produced to Campbell standards and published in Campbell Systematic Reviews. Evidence and Gap Maps provide quick and efficient tools to highlight what evidence exists for specific interventions and outcomes.

About the authors

Professor Howard White is Chief Executive Officer of the Campbell Collaboration. Previously he was the founding Executive Director of the International Initiative for Impact Evaluation (3ie) and before that led the impact evaluation programme of the World Bank's Independent Evaluation Group.

Dr. Sabina Singh is Director of Research at Campbell South Asia. At Campbell, she leads and contributes to various evidence synthesis projects, specifically on the issues of people experiencing or likely to experience homelessness and women in agriculture. Dr. Singh has previously worked as an Assistant Professor, Research Associate and Independent Consultant. Her research interests include gender, poverty, and migration; women, work and health; labour and well-being in neo-liberal regimes; and qualitative research methods.

Acknowledgements

The title and abstract screening for this edition of map was done through crowdsourcing via Cochrane Crowd. We wish to acknowledge the contribution of Yuan Chi, Eleanor McKean, Vighnesh Devulapalli, Susanna Wisniewski, Anna Noel-Storr, Fionn O'Shea, Sarah BarterGodfrey, Shammass Mohammed, Cloe Ying Chee Koh, Brian Duncan, Alejandro Ceballos Sandoval, Angela Gunn, Parnian Khalili, Stephanie Manoni-Millar, Nirupa Sundaravadanan, Mariangela Castro Arteaga, Shireen Rafeeq, Dorothy Halfhide, Riccardo Guarise, Ursula Ellis, Shirley Hall, Neetu Bhadra, Jenni Hislop and Mary MacCara for screening studies on title and abstract via Cochrane Crowd. We also wish to thank John Eysers for assistance in machine learning and database searches. Thanks are due to Yashika Murly for assistance in retrieving the full-texts. Full-text screening and coding for this edition of map was done by Sabina Singh and Shweta Singh.

Foreword

Until recently there were no reliable evidence tools to help us identify what we know and what we don't about ending homelessness for good. Evidence was scattered around different databases, journals, websites, and in grey literature, and there is no way for decision makers to get a quick overview of the existing evidence base. This was a barrier to using evidence to improve outcomes.

To address this challenge we created two evidence and gap maps (EGMs) that capture what we know about what works and why things work or not on homelessness interventions in partnership with the Campbell Collaboration. By making relevant studies more accessible to end users, they facilitate evidence-informed decision making. Because they highlight areas of high policy relevance where evidence is lacking, EGMs can also help research funders target their resources to fill important evidence gaps faster, more cost-effectively, and in a more strategic and impactful way.

This report presents findings from the fourth update of the effectiveness map, that focuses on causal or 'what works' evidence (impact evaluations or systematic reviews). When we released the first map, we found just 221 relevant studies across the entire globe. Four years on the picture has changed significantly. This new edition contains 562 studies, a fifth (112 studies) of which were published in the past two years.

This demonstrates an encouraging growth in rigorous evidence demonstrating what works to tackle homelessness. In the UK there's also been a significant increase - from 12 to 56 - but UK-based research continues to account for just 10% of the global evidence base (72% are from the USA). While the UK is publishing increasing numbers of Randomised Control Trials, only five have been published since 2016.

This needs to change. International studies are useful, but differences in context may mean that approaches that worked elsewhere work less well, or better, here. It is therefore vital that local studies of promising interventions are carried out.

I urge all in the homelessness field to reflect on the findings presented in the maps and join us in our efforts to improve our understanding of what works, for whom, in what circumstances. It is only by embedding reliable evidence and data analysis deep in decision-making processes and structures that we can end homelessness for good. The Centre will continue to undertake, in collaboration with other agencies, a programme of action to fill gaps in the evidence, so that over time the maps come to be used as a standard reference for evidence creation and use.

I hope that this report and related digital tools – and its annual sequels – will continue to make a significant contribution to the dialogue and decision making on homelessness in years to come and lead to more strategic use of, and investment in, reliable evidence.



Dr Ligia Teixeira
CEO, Centre for Homelessness Impact

Summary

This report presents the fourth edition of CHI's Effectiveness Map, which focuses on systematic reviews and impact evaluations of homelessness interventions. It shows relevant evidence organised into an interactive online matrix capturing where there is evidence for different categories of intervention and how they affect a range of outcomes. This fourth edition of the Effectiveness Map includes 562 studies, 168 of which were newly identified during an updated search concluding in September 2021.

The last twenty years have seen consistent growth in the number of rigorous studies which measure the impact of homelessness interventions. More recently in the United Kingdom and the United States, the What Works movement has made evidence accessible through developing user-friendly evidence tools. While homelessness has been part of this evidence revolution, it still lags behind other fields, especially with respect to the number of non-US studies and systematic reviews. More local evidence (e.g. UK-based effectiveness research) is needed to better contextualise the impact of interventions, and improvements in evidence architecture are required to facilitate use of that evidence.

Evidence and Gap Maps (EGMs) are a first step toward building the evidence architecture necessary to tackle homelessness more effectively. The first (2018), second (2019) and the third (2020) editions of this map contained 221, 260 and 394 studies respectively. This fourth (2021) edition has 562 studies, so includes an additional 168 studies compared to the 2020 edition.

The most substantial methodological change for this version of the EGM was using the innovative Cochrane Crowd platform to screen titles and abstracts. This saved the research team the time needed to go through all papers that the search identified as potentially meeting inclusion criteria. Also key was the inclusion of intervention-specific search terms in the search string which likely resulted in a large increase in the number of identified studies.

As in the previous editions of the map, this evidence is not evenly distributed in terms of geography, quality, methodology, intervention type and outcome measurement, among other variables. This report will in part address gaps and demonstrate where insights can be synthesised.

The evidence is most heavily concentrated in (1) services and outreach interventions (256 studies) followed by (2) health and social care interventions (224 studies) and (3) accommodation and accommodation-based interventions (193 studies).

Outcomes relating to health and accommodation were by far the most commonly measured. Within intervention categories, some interventions are studied far more frequently than others. For instance, while there are many evaluations of Housing First, there are only two studies in which hostels have been evaluated. The gaps in the EGM indicate a need for more primary studies in those areas.

But even where there is evidence, critical appraisals of the research indicate that we have low confidence in study findings of the majority of studies. The critical appraisal used employs a 'weakest link in the chain' principle, meaning one critical weakness reduces the credibility of the study as a whole. This is a conservative way of assessing the quality of primary studies. The low confidence in most studies largely results from the lack of reporting power calculations and high levels of attrition amongst study participants.

The most comprehensive systematic review of the sector to date reports that many interventions are effective in improving housing stability (Munthe-Kaas, Berg and Blaasvær 2018). But not everything works, and not everything is equally effective. The Effectiveness Map shows that very few high-quality evaluations exist in the UK. The most critical gap in homelessness research is a lack of evidence of the cost-effectiveness of interventions (i.e. how much bang for our buck we get from interventions). This type of evidence is crucial for policymakers to decide how to allocate scarce resources.

Previous editions of the map demonstrated that the interventions for which most evidence existed included accommodation-based interventions (e.g. Housing First, hostels), case management and substance use interventions. CHI consequently commissioned systematic reviews on these three areas over the past two years, having published the review into accommodation-based interventions – the other two reviews will be published in 2022. CHI recently commissioned one further review into psychosocial interventions (e.g. behavioural therapies) for which there is sufficient albeit less evidence. Interventions relating to legislation, communication, finance and prevention are priority gaps in the evidence base (see Table 3).

Chapter 1 The Global Evidence Base for Effectiveness Research into Homelessness Interventions

Introduction

An Evidence and Gap Map (EGM) is a visual representation of the available and relevant evidence for a particular sector. The map shows which interventions and outcomes have been more extensively reported in research and where there are gaps in the evidence base. The EGM also shows how much confidence can be placed in reported findings.

The map exclusively contains research which evaluates the impact of homelessness interventions. CHI, in partnership with the Campbell Collaboration, has built two EGMs for homelessness assessing a) what works in the field of homelessness, which describes the effectiveness of interventions, and b) how interventions are implemented, exploring barriers and facilitators for successful implementation. The Effectiveness Map, which is the focus of this report, contains studies which evaluate how effective interventions are at improving a range of outcomes. It contains impact evaluations (i.e. quantitative research) or systematic reviews of impact evaluations. The other map, named the Implementation Map (discussed in detail in our Evidence and Gap Maps Implementation Issues Report), contains qualitative research including process evaluations which demonstrates why interventions might be effective or not. Studies with mixed methods may appear in both maps. Both Maps are updated annually.

An EGM is a table or matrix which provides a visual presentation of the evidence. In the Effectiveness Map the rows are intervention categories (e.g. prevention, employment) and the columns are outcome categories (e.g. health, housing stability). Both intervention categories and outcome categories are broken down further into sub-categories. For example, the housing stability outcome category is split into two further subcategories of 1) accommodation status and 2) satisfaction with housing.

The Effectiveness Map captures additional elements which describe a study such as study design, geographical location and population characteristics. These characteristics can be applied as 'filters' in the tool so that only studies which apply to the specific groups chosen are shown in the map.

The online versions of the map are interactive so that users may click on entries to see a list of studies for any cell in the map. Clicking on study names shows the database record for the study which includes the URL to link to the study itself.

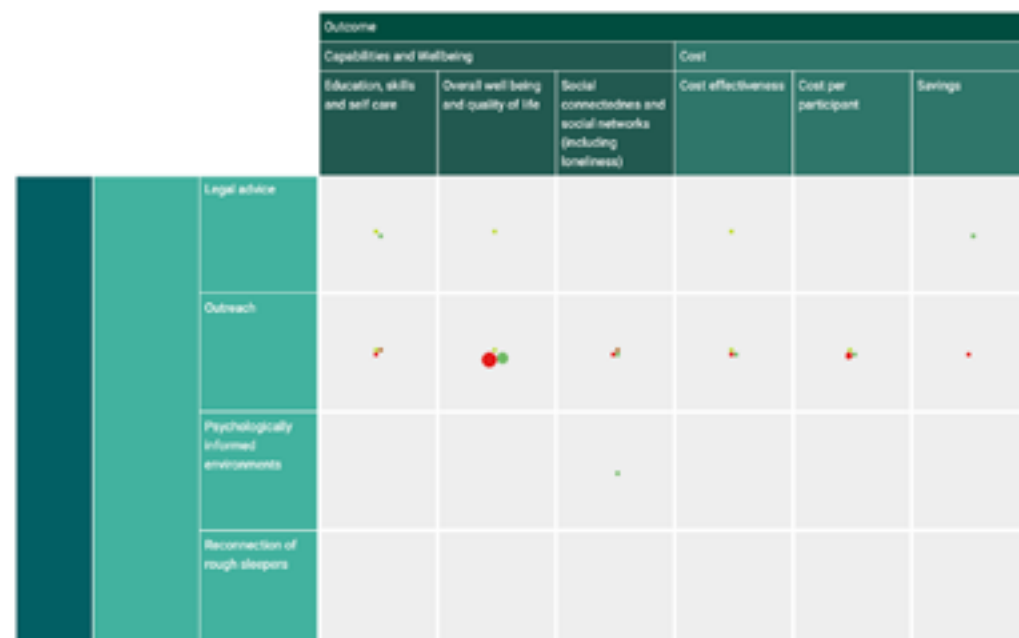
A geographical map detailing which regions, countries and cities the evidence base originate from is also available via our Evidence Finder. The Evidence Finder is built on data from the EGMs and provides a different way of looking at the evidence base.

What evidence is included in this map?

The Effectiveness Map contains all available evidence on the effectiveness of interventions in improving the lives of those who experience, or are at risk of experiencing, homelessness. The map shows both impact evaluations, and systematic reviews of impact evaluations. Impact evaluations are studies which use quantitative approaches to measure the difference an intervention made to outcomes like housing stability. Systematic reviews are studies which summarise all available relevant evidence for a particular issue or question, using a systematic approach to identify, codify, and summarise all relevant studies in a topic. Systematic reviews which summarise evidence from impact evaluations are called 'effectiveness reviews'.

The Effectiveness EGM contains only studies which employ one of the following methodologies: randomised control trials (RCTs), non-experimental designs, before vs after designs and systematic reviews. A RCT is the gold standard for impact evaluation. Where randomisation is not feasible, there are non-experimental approaches which use statistical methods to try to ensure the comparability of the comparison group. These approaches have technical names like 'propensity score matching' and 'regression discontinuity designs'. Before vs after designs are the most basic form of evaluation included in the map, whereby outcomes are measured before and after an intervention has been implemented. The Campbell evidence standards classify these different methods by the quality of evidence they provide.

Fig. 1 Snapshot of the Homelessness Map (Effectiveness)



Methodology

This is the fourth update of the Effectiveness Map. The scope of the map, as captured in the Population, Intervention, Outcome and Study Design (PIOS), remains the same as previous editions. The original protocol for the development of the map is [here](#). In the third version of the Effectiveness Map, we introduced some changes to the typology of interventions. [Download the report for the third version](#).

The database search was updated using the same search strategy as previously, supplemented by some intervention-specific search terms. The search ended in September 2021. These updated search strings are available in [Appendix 1](#). We also ran a machine learning search in EPPI Reviewer, which searches Microsoft Academic. The database search results were merged and deduplicated.

An innovation was introduced at the screening stage. For this iteration of the Effectiveness Map, we collaborated with Cochrane to use the Cochrane Crowd platform to crowdsource screening of titles and abstracts retrieved from machine learning and database searches.

The time and labour saved from the screening of title and abstracts allowed a more comprehensive manual search of websites and other grey literature that resulted in an additional set of records that would otherwise not make it to the map. Information specialists and evidence synthesis specialists often acknowledge the limitations of database searches and the need to survey grey literature for a comprehensive assessment of the body of evidence.

Systematic search of Grey Literature

Intervention-specific search terms combined with population and study design search terms resulted in a large number of newly identified studies compared to previous updates to the map. It implies that the systematic search of grey literature holds potential for identifying studies which may not be covered in academic databases.

We used Google as the starting point to identify eligible records using the intervention-specific search strings ([Appendix 1](#)) Boolean operators AND, and OR were used in the search strings. These search strings included synonyms of intervention categories combined with population and study design using the Boolean operator AND. Google Scholar was also used with relatively simple search terms such as 'Homeless "Critical Time Intervention" Evaluation' to identify eligible studies. The searches in Google were conducted by the Campbell team in India and Germany and all the screeners conducted searches in incognito mode/private window depending on the browsers used. The search dates and search engine page numbers on which the studies appeared were noted meticulously. These eligible records led us to various institutional/organisational websites dedicated to the issues of homelessness such as Family & Community Services (FACS) for various states in Australia. We recorded the domain names of websites which indicated the countries where the organisations and institutions were located and the number of records found, screened, and included for each site.

In addition to the searching and screening of websites we used snowballing to identify further relevant websites which were then searched in the same way.

In the above cases all eligible records were checked for duplicates in EPPI Reviewer and the eligible, non-duplicate studies were imported in EPPI Reviewer for full-text screening. The list of websites searched is given in the [Appendix 2](#).

We also identified some of the journals with studies on Homelessness. Hand searches (online screening) of all the issues from the past five years of the identified journals was carried out. The European Journal of Homelessness is a journal by FEANTSA and was screened while we screened FEANTSA's website. The list of journals and dates of searches are given as a table in [Appendix 3](#). Citations of selected included records were also screened to identify eligible studies.

Screening at Title and Abstract

Cochrane Crowd was used to crowdsource screening of papers at title and abstract. Through Cochrane Crowd, members of the research community and general public could screen papers, allowing us to screen at scale and pace. Potential screeners needed to pass a detailed training module which required about 30 minutes to complete. Feedback from the CHI team was sought regarding the content, and necessary revisions were done. The training module was accompanied by a practice test with 12 records to ensure the screeners were clear about the eligibility criteria for the map. The solutions/ responses to practice exercises also had a description to facilitate a better understanding of the PIOS framework used for the map. The screeners had to correctly screen a minimum of nine records (75 per cent) to be eligible to access the live task of screening on title and abstract.

A total of 3,143 records were identified from machine learning and database searches. Two duplicate records were removed before screening. The records were available for screening from June 15, 2021 on Cochrane's website and it took about a week for the crowd screeners to screen these records.

Cochrane crowd uses 'agreement algorithm' to screen. Each record gets screened by four screeners. Thus, a total of 12,788 classifications were made for 3,141 records. As many as 42 researchers from 15 countries screened these records.

A total of 2,825 records were excluded at this stage. The number of records to be screened at full-text stage was 316 (with 311 records classified as Possibly relevant and five records as unclear/Not enough information). On account of lack or clarity of information, these five records were also imported to Eppi reviewer for screening at full-text stage.

In addition, 686 records were identified through systematic searching of grey literature and other methods (hand searching journals, and citation tracking) as described earlier in the report. These records were searched in the Eppi reviewer for duplicates. After removing duplicates, 118 records were assessed for eligibility at full-text stage.

Full-text screening

All 316 records identified via database and Machine Learning searches were imported to reference management software Mendeley and it de-duplicated three records. The .ris files were then imported to EPPI Reviewer software for full-text screening of 313 records. Further, checks for duplicates were done. The database searches also had some records listed at U.S. National Library of Medicine resource 'ClinicalTrials.gov'. These trials listed at clinicaltrials.gov were screened only if the most complete and latest study resulting from these trials was not already on the map. As the existing map already had some of the studies resulting from these trials, these trials were not included for screening. e.g. the clinical trial titled 'Intervention to Improve Expression of End of Life Preferences for Homeless Persons (SELPH) with ClinicalTrials.gov Identifier: NCT00546884 already existed on the map as Song (2010). Such records were thus not included. These duplicate checks (23 studies) resulted in 278 records that were screened by two team members from Campbell who screened the studies independently. The screening decisions were compared by using comparison reports feature in EPPI

Reviewer. The disagreements were resolved by comparing notes and discussion. An arbitrator was approached in case no agreement was achieved, and the arbitrator's decision was taken as final.

Studies identified through other methods (118 studies) were also uploaded to EPPI Reviewer software for full screening, following the same procedure described above with 65 studies excluded at full-text screening. Sixty-five studies were excluded on reasons of design and mostly involved process evaluations or qualitative studies of programmes catering to those experiencing homelessness or likely to experience homelessness.

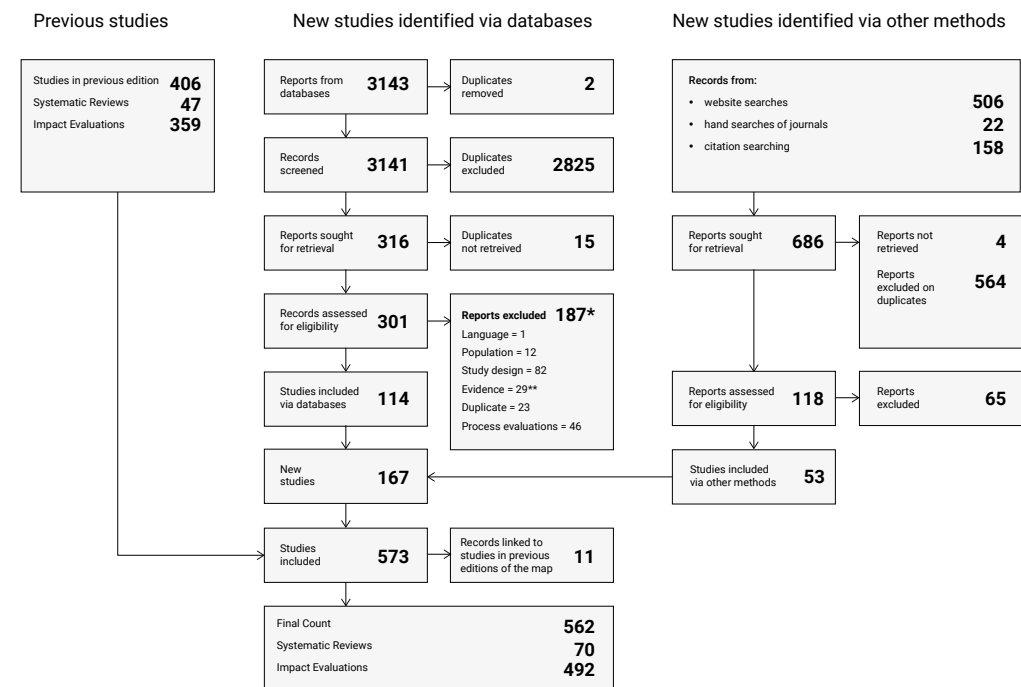
The full-text screening resulted in the inclusion of 167 studies (114 from database and Machine Learning searches, and 53 from other sources). The reasons for exclusion at full-text screening are given in the PRISMA flowchart. Data extraction for the current update was thus done from 167 studies obtained through machine learning, database searches and other studies identified from website searches, searches using Boolean operators and intervention terms in Google, hand searches/screening of journal issues of the last five years, and scanning the references of selected included records.

Data Extraction and critical appraisal of included studies

The data extraction was done by two independent researchers from the Campbell team as per the intervention-outcome framework developed for this EGM. The data extraction was compared for differences and disagreements were resolved by discussion. An arbitrator was approached in case no agreement was achieved, and the arbitrator's decision was taken as final. Separate checklists for impact evaluations and systematic reviews were used to assess the confidence in the findings of studies.

The PRISMA flowchart (Figure 2) depicts the earlier number of studies in the map and those found in the current update. Collectively, following from the previous edition, the map has 562 studies with 492 impact evaluations and 70 systematic reviews.

Figure 2: PRISMA flowchart



*six records were coded under multiple categories, meaning the sum of the subcategories is not equal to records excluded
**Exclusion on evidence implies studies that were reviews that do not qualify as systematic reviews, or reviews that are not reviews of effectiveness studies, commentaries or letters to editors etc

An overview of the Effectiveness Map

There is a substantial body of evidence on the effectiveness of interventions for people experiencing or at risk of experiencing homelessness. The latest version of the map contains 562 studies, compared to 221 studies in the first edition (2018), 260 in the second edition (2019) and 394 in the third edition. This constitutes an increase in reports of 38% compared to the previous edition. The 562 studies comprise 70 systematic reviews and 492 primary studies, but this evidence is unevenly spread by intervention category and geography.

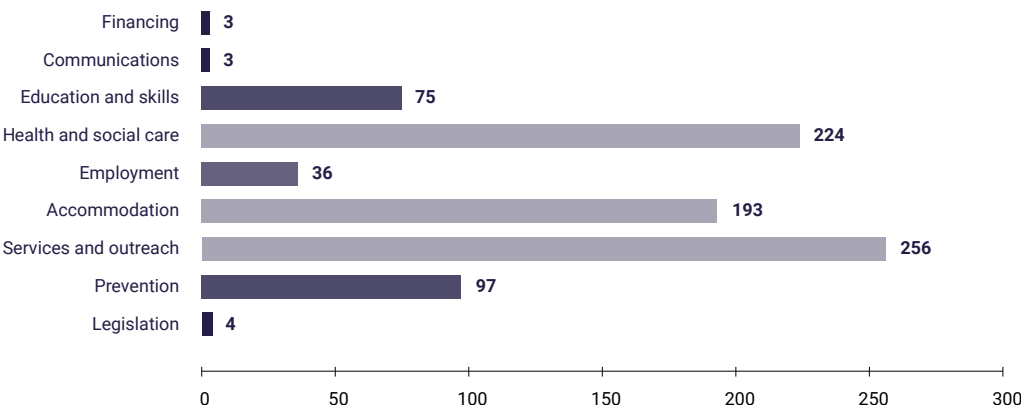
Services and outreach, health and social care and accommodation-based services are the most commonly evaluated full interventions.

We categorised the studies in nine intervention categories (Legislation, Prevention, Services and Outreach, Accommodation and accommodation-based services, Employment, Health and social care, Education and skills, Communications and Financing) and 43 sub-categories. More details on the definitions of each of these categories can be found in Appendix 4.

The largest intervention categories are 'services and outreach' and access to 'health and social care' with 256 studies and 224 studies respectively. The third largest category is 'accommodation and accommodation-based services' with 193 studies (see Figure 3). Other categories have only a few studies. For instance, Legislation has only four studies and Communication just three.

The coverage for sub-categories is also very uneven. Within accommodation and accommodation-based services, Housing First, has 89 studies, while there are very few studies for other sub-intervention categories such as hostels (2), shelters (15) and rapid rehousing (16).

Figure 3: Included studies by intervention type

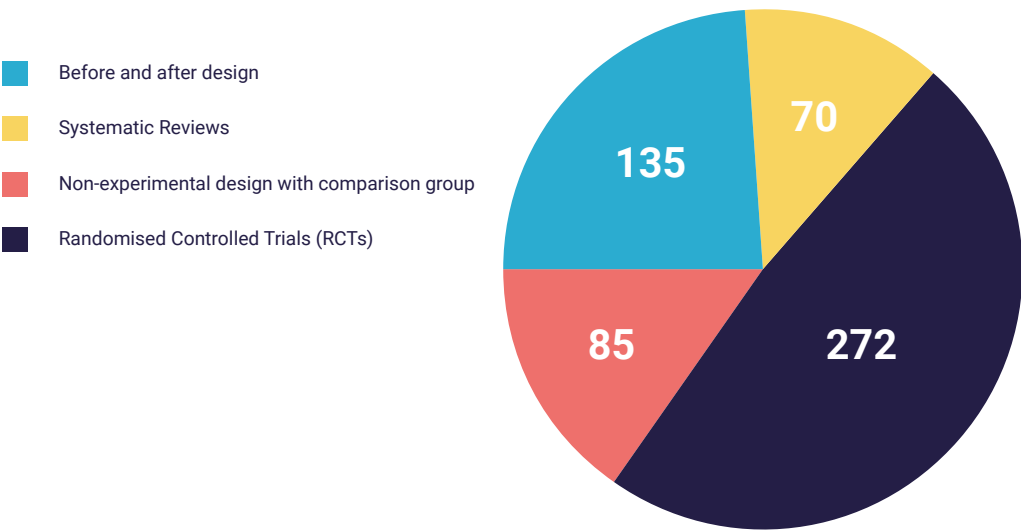


Note: These numbers do not add up as a study may have more than one intervention.

Randomised controlled trials make up almost half of studies

Of the 481 primary studies, 268 (approx. 56%) are RCTs, which demonstrate the feasibility of this evaluation method in the sector (see Figure 4). The figure also suggests that RCTs constitute about 49% of all the included studies (systematic reviews included) on the map. The proportion of systematic reviews among total included studies was 13%, while that of 'before and after' designs and non-experimental design with comparison groups represented 24% and 15%, respectively.

Fig.4: Included studies by study design



The evidence base is predominantly from North America

The evidence base is predominantly from North America. About 89 per cent of studies (504) refer to interventions in North America (Table 1), compared to a mere 31 studies from East Asia and Pacific and 87 from Europe and Central Asia. There are 56 studies from the UK included in this version of the map, 23 of which are systematic reviews and 33 are primary studies.

Table 1 Number of studies for selected countries

Country	Primary studies	Systematic review	Total	Share total studies
Australia	12	14	26	4.62%
Canada	72	27	99	17.6%
Netherlands	9	7	16	2.84%
United Kingdom	33	23	56	9.96%
United States	343	62	405	72.06%

Note: The figures add up to over 100% as studies are sometimes conducted in more than one location or refer to studies in more than one location.

Evidence-based policy and practice is not a blueprint approach. European countries, including the UK, should learn from the North American experience but not simply copy it. The map demonstrates the need for more primary studies of promising interventions in different contexts across Europe. The map also shows that rigorous impact evaluations of these programmes are possible, including RCTs.

The number of studies published each year is increasing rapidly

The number of studies published each year is increasing rapidly. Almost triple the number of studies were published between 2015-2020 than were published between 2010-2014. This is starkly illustrated by the fact that 13 studies were published in 2010, while 81 were published in 2020.

Fig 5: Included studies by year

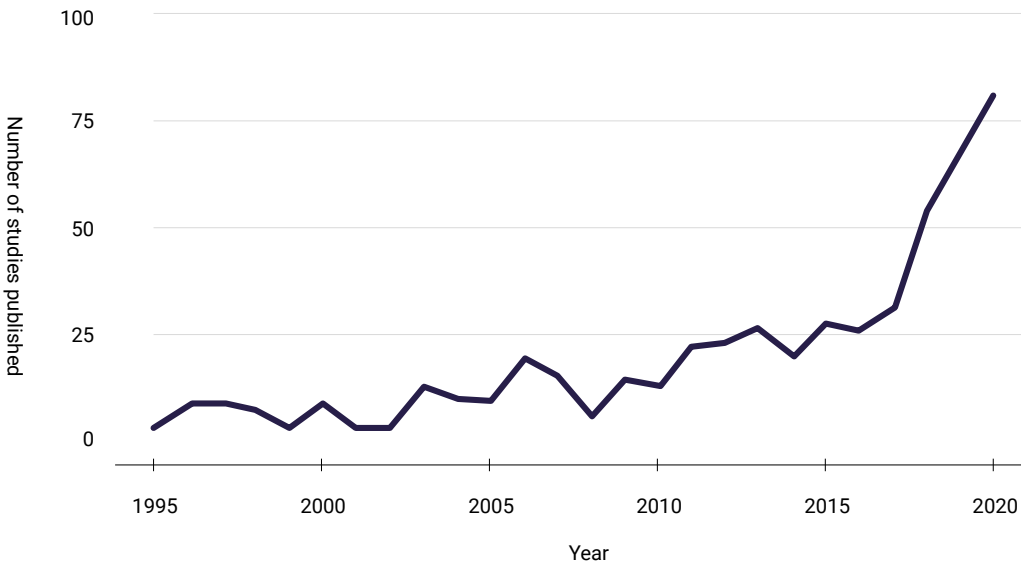


Table 2 Number of studies by time period

Period	No. of included studies
1990-94	5
1995-99	29
2000-04	37
2005-09	63
2010-14	104
2015-20	286

Details into how often intervention types are studied and how often outcomes are measured

Table 3 shows the aggregate map, showing the intervention-outcome matrix. Areas with a high level of evidence (50 or more studies) are found under health and social care, services and outreach and accommodation and accommodation-based services with the main outcomes being housing stability, health, and capabilities and well-being. Other areas of the map, notably in legislation, communication and financing are largely empty.

Table 3. Aggregate evidence and gap map

Intervention categories	Capabilities and Wellbeing	Cost	Crime and justice	Employment and income	Health	Housing stability	Public attitudes and engagement
Legislation	1	1	0	1	1	2	0
Prevention	37	17	15	26	59	65	0
Services and outreach	101	45	30	63	204	155	0
Accommodation and accommodation-based services	83	39	27	50	136	129	0
Employment	13	4	5	21	30	21	0
Health and social care	76	33	19	35	214	72	0
Education and skills	48	5	13	14	55	18	0
Communications	1	2	0	0	2	0	1
Financing	1	1	1	1	1	3	0

The sub-categories for interventions and outcomes which are the most heavily populated cells on the map are the following:

There are many studies to the effect of physical and mental health interventions on outcomes including mental health status (77 studies), substance use (63 studies), physical health and nutrition (53 studies), access to mainstream services (57 studies) and housing stability (49 studies).

There are many studies evaluating addiction support which regularly measure substance use (99 studies), mental health (49 studies) and accommodation status (44 studies).

There is also a good deal of evidence for case management interventions across a range of outcomes notably accommodation status (112 studies), mental health (93 studies), substance use (92 studies), access to mainstream health care (53 studies) and physical health and nutrition (48 studies). There is also a reasonable amount of evidence regarding impact on overall wellbeing (46 studies) and employment status (40 studies) for case management interventions.

A similar pattern is observed for Housing First studies, with papers regularly measuring housing stability (58 studies), mental health (47 studies) and substance abuse (44 studies). There are also 29 studies measuring access to mainstream health and 24 measuring physical health and nutrition, however few studies measure the impact of Housing First on employment status (10 studies).

Studies evaluating social housing measure its impact on housing stability (43 studies), mental health (31 studies), substance abuse (27 studies), mainstream health (24 studies) and physical health and nutrition (24 studies).

For which interventions are there gaps in our understanding of what works?

There are many blank cells in the map, indicating that studies have not evaluated interventions for impact for given outcomes. The largest gaps are for legislation, financing and communication. There is also a lack of evidence on prevention and employment. There are few studies related to the justice indicators, public attitudes and perception, and cost.

Another striking gap is the relative lack of systematic reviews. In health it is sometimes the case that there are more reviews on a subject than there are primary studies. But the homelessness map shows many areas in which there is a wealth of primary studies (though mainly of North American evidence) which have not been subject to detailed review.

More detailed analysis of gaps will require intervention and outcome-specific analysis. For example, there are several studies of Critical Time Interventions but nearly all these studies refer to transitions from mental health facilities or analyse mental health outcomes. There is a much smaller evidence base for those leaving prison or the military setting.

We use checklists and a 'weakest link in the chain' principle to assess confidence in studies

As mentioned in the methodology section, two different checklists were used to assess the confidence in study findings of the primary studies and systematic reviews.

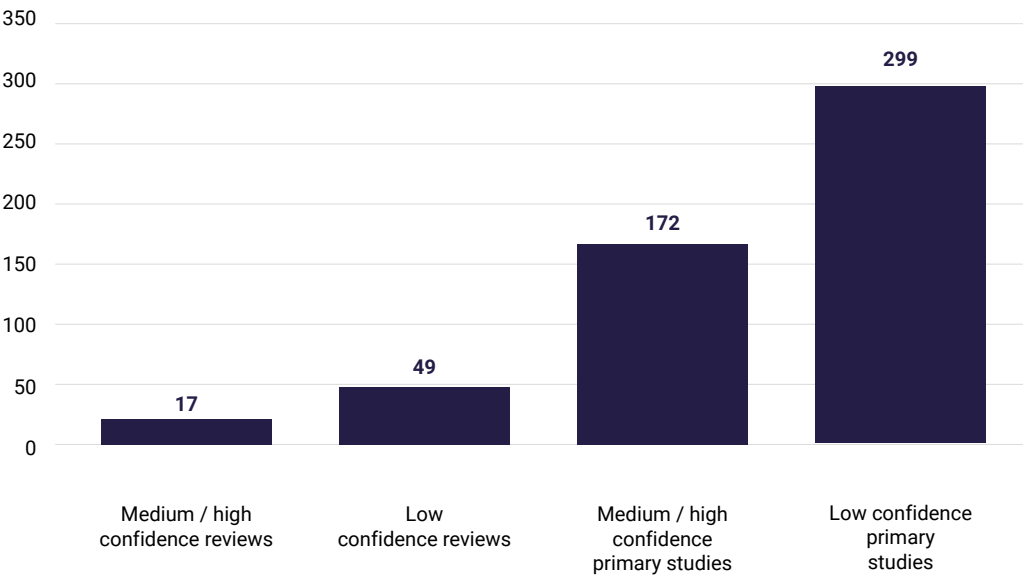
The tool for primary studies has seven items which relate to 1) study design, 2) blinding, 3) power calculations, 4) attrition, 5) description of the intervention, 6) outcome definition, and 7) baseline balance. A fuller description of these items is given in the technical appendix. Each of these seven items is rated as implying high, medium or low confidence in study findings. Overall quality is assessed using the 'weakest link in the chain' principle: our confidence in study findings can only be as high as the lowest rating given to any of the critical items (which are numbers 1, 4, 6 and 7).

For systematic reviews we use AMSTAR 2 ('Assessing the Methodological Quality of Systematic Reviews'). This checklist has 16 items which cover: 1) PICO in inclusion criteria, 2) ex ante protocol, 3) rationale for included study designs, 4) comprehensive literature search, 5) duplicate screening, 6) duplicate data extraction, 7) list of excluded studies with justification, 8) adequate description of included studies, 9) adequate risk of bias assessment, 10) report sources of funding, 11) appropriate use of meta-analysis, 12) risk of bias assessment for meta-analysis, 13) allowance for risk of bias in discussing findings, 14) analysis of heterogeneity, 15) analysis of publication bias, and 16) report conflicts of interest. AMSTAR-2 checklist also has some critical indicators (Sr. no. 2,4,7,9,11,13 and 15) that determine whether we can place a high confidence in the findings of a systematic review. As with impact evaluations we use the 'weakest link in the chain' principle meaning a single low rating in just one of these critical indicators leads to a systematic review being classified as one with low confidence.

Most studies are assessed as low confidence

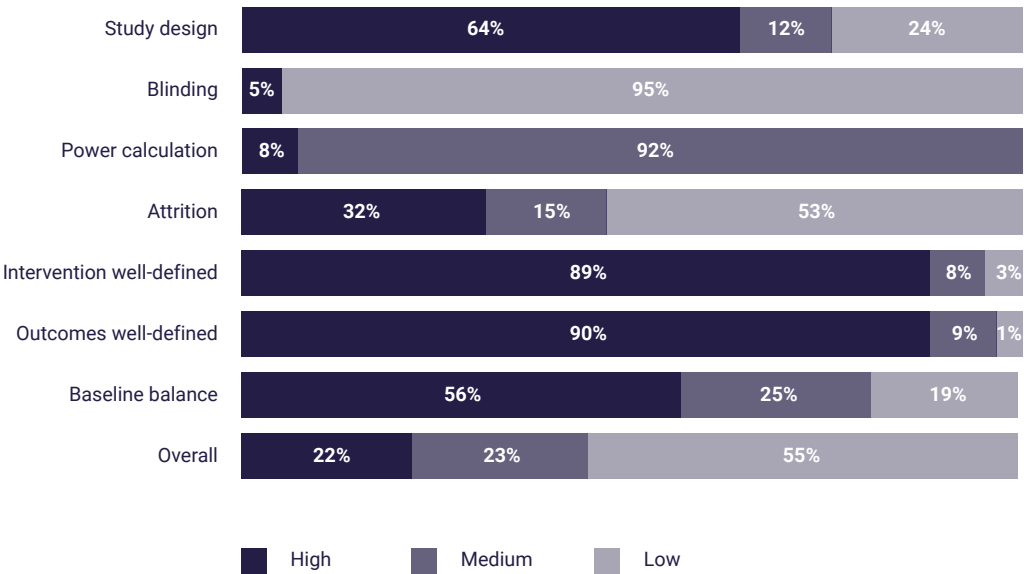
An assessment of the confidence in study findings of impact evaluations suggests that as many as 299 (61 per cent) studies were assessed to have low confidence in their findings (Figure 6).

Fig. 6: Included studies by confidence in study findings



For primary studies, attrition was the main reason for most studies to qualify as those with low confidence. Blinding was also not common in these studies and reporting of power calculations can be greatly improved. (Fig 7)

Fig 7. Confidence in primary studies, detailed



Most systematic reviews lacked on the list of excluded studies while some could not conduct meta-analysis due to heterogeneity in the findings of included studies. As assessed using AMSTAR-2, we could place low confidence in the findings of 49 systematic reviews (about 70 percent). The systematic reviews that are not completed yet and at the protocol stage are not assessed for study quality. The main reason for most studies to qualify as low confidence was due to a low score in at least one of the critical factors in the AMSTAR checklist (Q.No. 2,4,7, 9, 11, 13 and 15). For a systematic review to qualify as with high or moderate confidence in findings, not only the rating has to be high at all critical factors but also it may have none/at least one non-critical weakness and more than one non-critical weakness respectively.

Chapter 2 The Evidence Base for Effectiveness Research in the UK

This fourth edition of the EGM has a total of 56 studies conducted in the UK. Thirty-three studies are impact evaluations, of which 13 are RCTs, nine had non-experimental designs with a comparison group and 11 had a before and after design. The characteristics of all the impact evaluations conducted in the UK such as location, population, intervention, study design, outcomes and confidence in the findings of studies are given in the Appendix 6. There are 23 systematic reviews that include studies from the UK.

Increasing numbers of studies are being published in the UK

The number of effectiveness studies published in the UK has increased greatly in the past five years. Prior to 2016, a maximum of two studies had been published each year. Between 2016-2020 an average of 9 studies were published each year. Systematic reviews account for the majority of these newer publications, with 19 published in the past four years. Other study design types are also increasing in number, however the number of RCTs being published in the UK remains low: only five RCTs have been published between 2016-2020, with none being published in 2020.

Figure 8: Number of studies published by year (UK only)

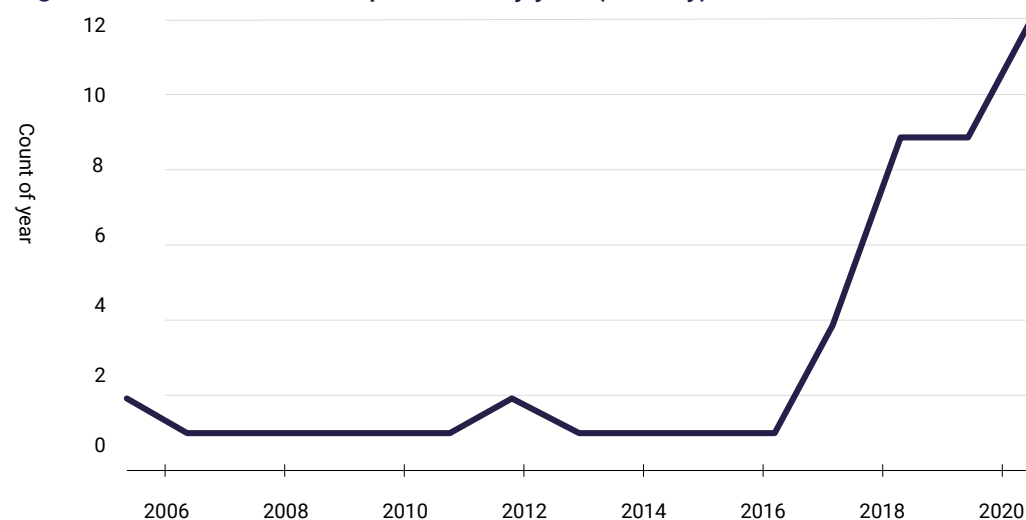
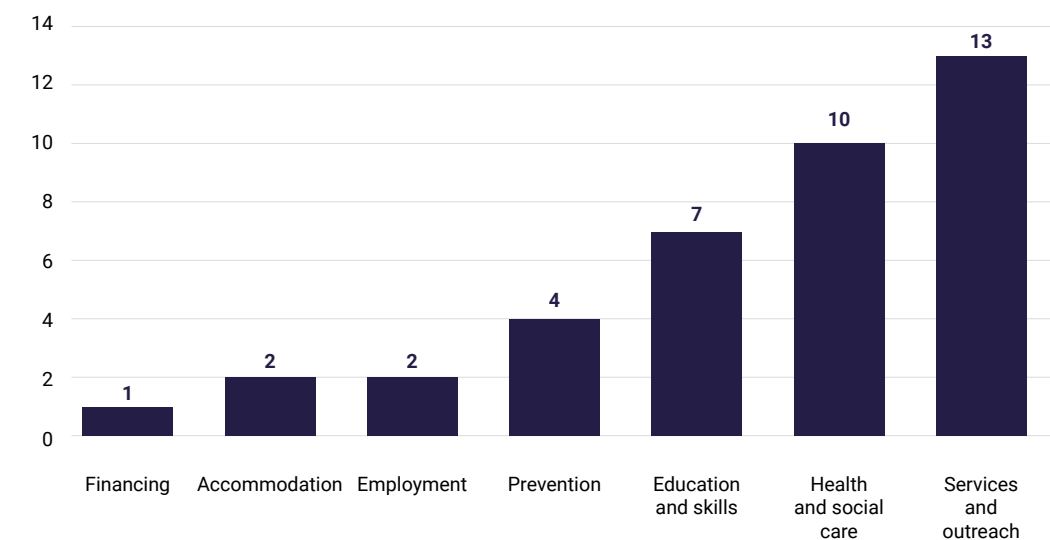


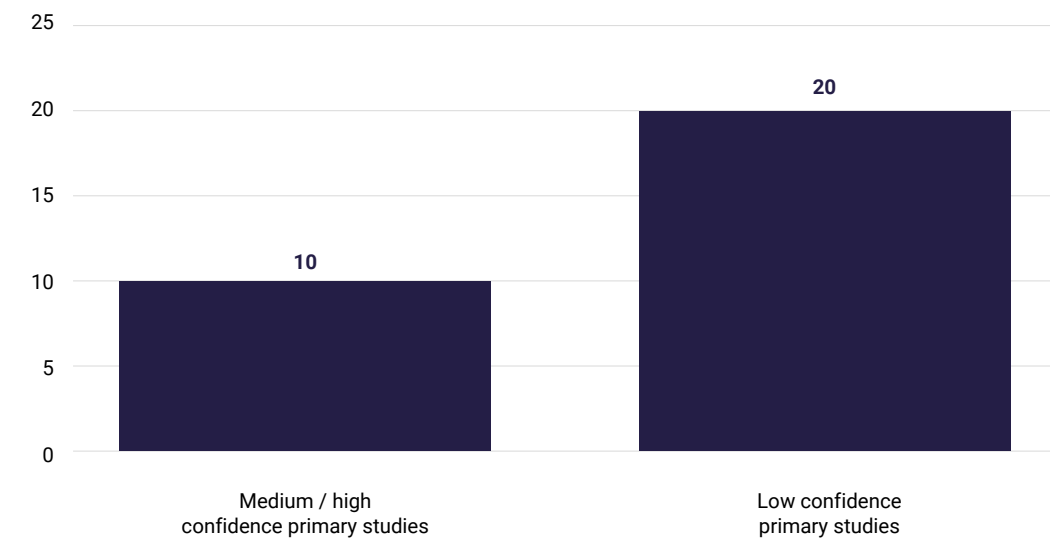
Figure 9: Number of studies by year of publication and type of study (UK only)



A third of impact evaluations conducted in the UK were assessed as medium/high confidence.

Assessment of confidence in the findings of impact evaluations suggests that there are 20 studies where we could place low confidence in their findings, while 10 impact evaluations were assessed to be of medium/high confidence. Three studies were ongoing for which no assessment was done (Fig. 10).

Fig. 10 Confidence in findings of included studies



Of the ten impact evaluations which were assessed to be of high confidence, five

were published between 2016-2021. Eight focused on people with a history of mental illness, while the remaining two focused on physical health interventions (tuberculosis and plaque management). Five studies focused on services and outreach, three of which evaluated case management interventions. Two studies focused on the transition from prison for people with mental illness, one of which evaluated Critical Time Intervention (Hopkin, 2016) and the other focused on supported housing models (McInnes, 2021).

Crucially, all studies focused on one of three intervention types: health and social care, services and outreach or accommodation-based services. This leaves large gaps in our understanding of effective interventions in a UK context. Box 1 includes brief descriptions of each of these studies.

Box 1:

Brief description of primary studies in the UK with high/medium confidence

- Marshall et al. (1995) conducted the first high/medium confidence study in the UK. They evaluated case management services for long term mental health disorders using an RCT and found no impact on any measured outcomes including number of support needs, quality of life, employment status and severity of symptoms.
- Aldridge et al. (2014) conducted a cluster randomised controlled trial that found no evidence for peer educators increasing the uptake of Mobile X-Ray Units for Tuberculosis screening when comparing it with the current practice of hostel staff encouraging this type of screening.
- Howard et al. (2010) conducted a pilot patient-preference randomised controlled trial (PP-RCT) and found that women’s crisis houses did not result in improved outcomes compared to traditional psychiatric wards for women, including no difference in symptoms, functioning, perceived coercion, quality of life and cost.
- Hopkin (2016) conducted a randomised controlled trial that found that people receiving Critical Time Intervention were significantly more likely to have had contact with any community mental health professional compared to participants in the TAU group. CTI participants were also significantly more likely to have been allocated a care coordinator and made contact with their care coordinator relative to those in the TAU group. These findings were at the six week follow up and were not maintained at six and 12 months. However, this study also observed a higher recidivism rate for participants in the short term.

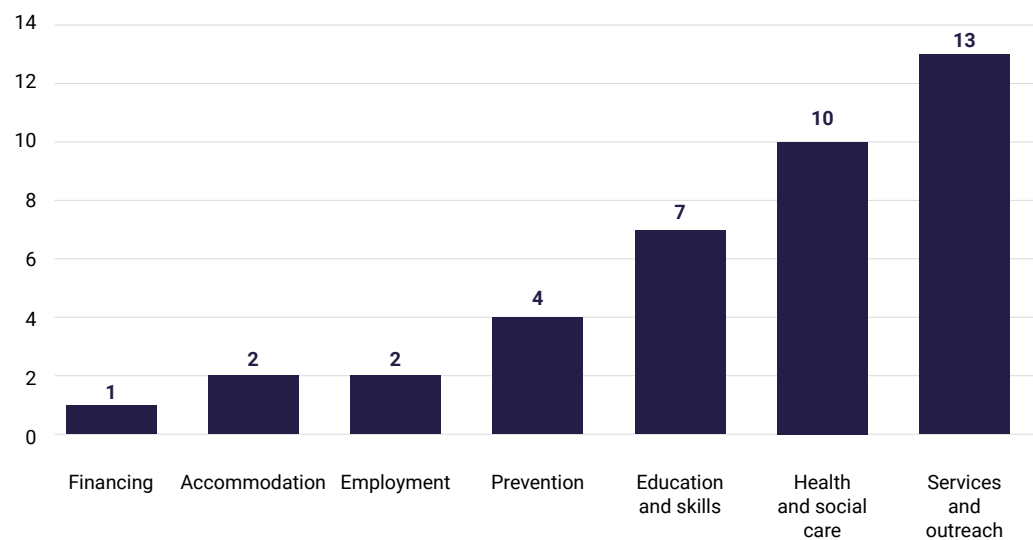
- Killaspy et al. (2019) ran a feasibility study to understand the potential of evaluating different models of mental health supported accommodation - specifically floating outreach vs supported housing. They found that it was unfeasible to conduct such a study due to an inability to recruit participants due to staff and service user preferences for certain types of supported accommodation or for specific services.
- MacInnes et al. (2021) used a prospective cohort design and found that the RESET intervention, aimed at supporting prisoners with mental health needs for 12 weeks after discharge, resulted in approximately twice as many days in secure housing as the comparison group in the short and long term.
- Murphy et al. (2020) found that the Tackling Multiple Disadvantage (TMD) project which supports people experiencing homelessness with multiple and complex needs into training or employment led to substantially better employment outcomes compared to similar projects.
- Paisi et al. (2019) used a quasi-experimental, one-group pre-test-post-test study with follow-up at one and two months and found no significant impact of peer education in managing plaque and oral hygiene.
- Craig et al (2004) ran a randomised controlled trial to test the effectiveness of specialised care for early psychosis (The Lambeth Early Onset Team). They found some evidence that shows that a team delivering specialised care for patients with early psychosis is superior to standard care for maintaining contact with professionals and for reducing readmissions to hospitals.
- Tempier et al (2012) built on the sample used by Craig et al (2004) to run a randomised controlled trial offering Assertive Community Treatment which is often used to improve recovery and housing outcomes. They found that patients receiving specialized care reported having more extensive social networks and achieved superior clinical outcomes at 18 months, and these outcomes were associated with network size.

More details about these interventions are offered in Table 4. All the studies from the UK are described in Appendix 6.

Impact evaluations have been conducted for some interventions but not others

As can be shown by the descriptions above, the highest number of impact evaluations in the UK are for services and outreach interventions, followed by health and social care, and education and skills interventions. The number of impact evaluations for employment, financing and accommodation-based interventions is very low. It may, however, be noted that a single study is sometimes coded under two intervention categories.

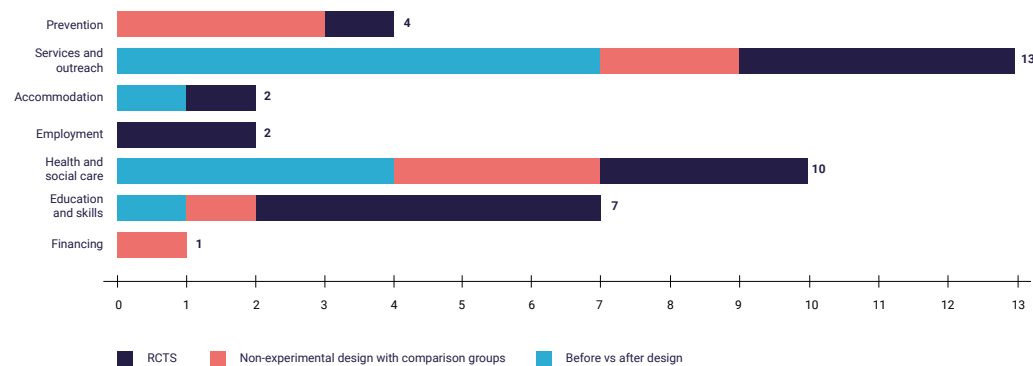
Fig. 11: Impact evaluations by intervention in the UK



Different study designs are used to evaluate different intervention types

The distribution of included studies by intervention and study design suggests that the effectiveness of services and outreach interventions has mostly been assessed using RCTs. There are no RCTs for certain categories of interventions such as prevention, employment and financing. The EGM does not have any studies on legislation and communication interventions in the UK and thus indicates a gap area. The effectiveness of education and skills interventions in the UK included in this map are mostly assessed using before and after study designs and only one RCT is in progress.

Fig. 12 Impact evaluations by intervention in the UK

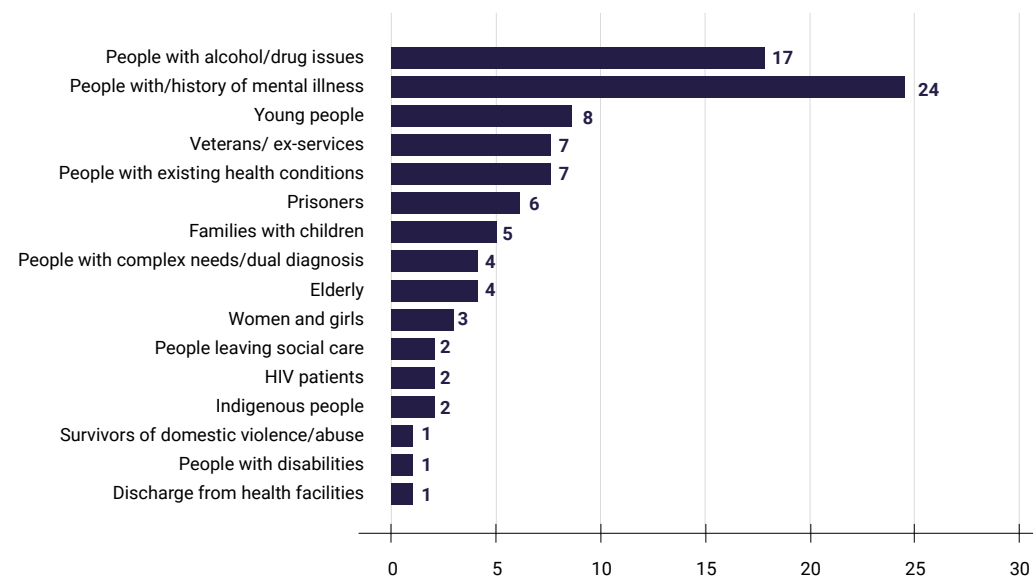


Studies focus on subgroups of people with mental illness and substance use issues more than others

Studies focus principally on some subgroups of populations experiencing homelessness more than other subgroups. For example, there are not many studies focusing on families with children, veterans/ex-services, elderly, women and girls, young people (under the age of 18 years). It appears that relatively more studies from the UK are on those suffering from mental illness and those with problematic substance use (Fig.13).

The distribution of studies by intervention categories and population sub-groups suggests that the highest number of included studies in the map are service and outreach interventions for people with, or have a history of, mental illness. An equal number of studies focus on people with alcohol or drug issues for both services and outreach, and health and social care interventions.

Fig. 13 Included UK studies by population sub-groups



Studies measured the impact of interventions on some outcomes more than others

The distribution of included studies by intervention and outcome categories suggests that included studies in the map had outcomes related to health and capabilities and well-being corresponding to services and outreach interventions. The outcomes related to capabilities and well-being were also observed for health and social care, education and skills, accommodation and accommodation-based services and financing interventions. Similarly, housing stability was another outcome category for prevention, services and outreach, health and social care and financing intervention categories. Only one study had crime and justice outcomes corresponding to services and outreach intervention (Fig.14).

Fig. 14: Included studies by intervention and outcome categories

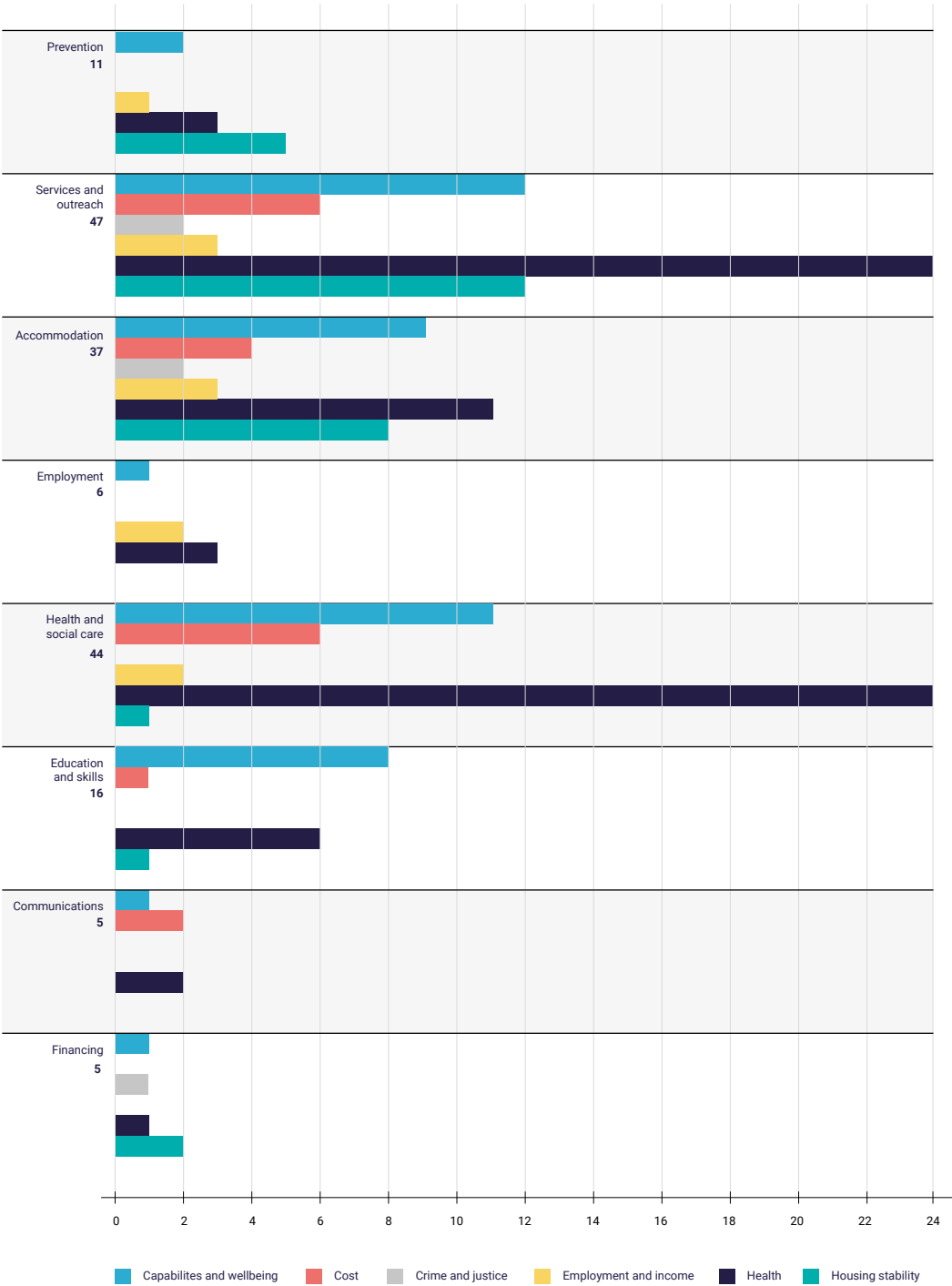


Table 4. Medium and High-Confidence Impact evaluations conducted in the United Kingdom

Author	Title	Population		Intervention	Outcome	City
Aldridge (2014)	Impact of peer educators on uptake of mobile x-ray tuberculosis screening at homeless hostels: a cluster randomised controlled trial	<ul style="list-style-type: none"> • Other 		Health and social care <ul style="list-style-type: none"> • Health services (physical and mental) 	Health <ul style="list-style-type: none"> • Physical health and nutrition status 	London (England)
Craig (2004)	The Lambeth Early Onset (LEO) Team: randomised controlled trial of the effectiveness of specialised care for early psychosis	<ul style="list-style-type: none"> • People with/history of mental illness 		Services and outreach <ul style="list-style-type: none"> • Outreach 	Health <ul style="list-style-type: none"> • Access to mainstream health care • Mental health status 	London (England)
Hopkin (2016)	The Impact of the Critical Time for People with Severe Mental Illness in the Transition from Prison to the Community	<ul style="list-style-type: none"> • Ex-prisoners • People with/history of mental illness 		Services and outreach <ul style="list-style-type: none"> • Case management (inc. Critical Time) 	Health <ul style="list-style-type: none"> • Access to mainstream health care 	London (England)
Howard (2010)	Effectiveness and cost-effectiveness of admissions to women’s crisis houses compared with traditional psychiatric wards: pilot patient-preference randomised controlled trial	<ul style="list-style-type: none"> • People with/history of mental illness • Women and girls 		Health and social care <ul style="list-style-type: none"> • Health services (physical and mental) 	Capabilities and Wellbeing <ul style="list-style-type: none"> • Overall well being and quality of life Cost <ul style="list-style-type: none"> • Cost effectiveness • Cost per participant Health <ul style="list-style-type: none"> • Mental health status 	London (England)
Killaspy (2019)	Feasibility randomised trial comparing two forms of mental health supported accommodation (supported housing and floating outreach); a component of the QuEST (Quality and Effectiveness of Supported Tenancies) Study	<ul style="list-style-type: none"> • People with/history of mental illness 		Accommodation and accommodation-based services <ul style="list-style-type: none"> • Private Rental Sector (with and without support) • Social housing with or without support 	Capabilities and Wellbeing <ul style="list-style-type: none"> • Overall well being and quality of life Health <ul style="list-style-type: none"> • Mental health status 	London and Cheltenham (England)
Marshall (1995)	Social services case-management for long-term mental disorders: a randomised controlled trial	<ul style="list-style-type: none"> • People with/history of mental illness 		Services and outreach <ul style="list-style-type: none"> • Case management (inc. Critical Time) 	Capabilities and Wellbeing <ul style="list-style-type: none"> • Education, skills and self care • Overall well being and quality of life • Social connectedness and social networks (including loneliness) Health <ul style="list-style-type: none"> • Mental health status 	London (England)

Author	Title	Population		Intervention	Outcome	City
MacInnes (2021)	Supporting prisoners with mental health needs in the transition to RESETtle in the community: the RESET study	<ul style="list-style-type: none">• Ex-prisoners• People with/history of mental illness		<div>Prevention<ul style="list-style-type: none">• Discharges</div> <div>Accommodation and accommodation-based services</div> <div><ul style="list-style-type: none">• Social housing with or without support</div>	<div>Housing stability<ul style="list-style-type: none">• Accommodation status</div>	Kent and London (England)
Murphy (2017)	Tackling Multiple Disadvantage: Year 1 Interim Report	<ul style="list-style-type: none">• People with complex needs/dual diagnosis		<div>Prevention<ul style="list-style-type: none">• Welfare and Housing support</div> <div>Employment<ul style="list-style-type: none">• Mentoring, coaching and in-work support</div>	<div>Capabilities and Wellbeing<ul style="list-style-type: none">• Education, skills and self care</div> <div>Employment and income<ul style="list-style-type: none">• Employment status</div> <div>Health<ul style="list-style-type: none">• Mental health status</div>	London (England)
Paisi (2019)	Management of plaque in people experiencing homelessness using 'peer education': a pilot study	<div>Other</div> <ul style="list-style-type: none">• [Info] Homeless		<div>Services and outreach<ul style="list-style-type: none">• In-kind support (exc. food)</div> <div>Health and social care<ul style="list-style-type: none">• Health services (physical and mental)</div> <div>Education and skills<ul style="list-style-type: none">• Life and social skills training</div>	<div>Capabilities and Wellbeing<ul style="list-style-type: none">• Education, skills and self care</div> <div>Health<ul style="list-style-type: none">• Physical health and nutrition status</div>	Plymouth (England)
Tempier (2012)	Does Assertive Community Outreach Improve Social Support? Results From the Lambeth Study of Early-Episode Psychosis	<ul style="list-style-type: none">• People with/history of mental illness		<div>Services and outreach<ul style="list-style-type: none">• Outreach</div>	<div>Capabilities and Wellbeing<ul style="list-style-type: none">• Social connectedness and social networks (including loneliness)</div> <div>Health<ul style="list-style-type: none">• Mental health status</div>	London (England)

Appendices

Appendix 1 Search strings for each intervention category in the EGM

1. Legislation

Housing/Homelessness Legislation

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Housing/Homelessness Legislation)

1.2 Welfare benefits

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Welfare benefits OR Rent subsidies OR housing vouchers OR legal assistance)

1.3 Health and social care legislation

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Health and social care legislation OR Medicaid OR Medicare)

2. Prevention

2.1 Welfare and Housing Support

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Housing OR Housing Schemes OR Homelessness Prevention OR Welfare schemes OR welfare benefits OR Rent subsidies OR housing vouchers OR disability benefits OR rental assistance OR housing options OR rent supplements)

2.2 Housing supply

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Housing OR Housing Schemes OR Housing Programmes)

2.3 Family mediation and conciliation

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Family mediation and conciliation OR Family based therapy OR ecologically based family therapy OR motivational enhancement therapy OR community reinforcement approach OR family resilience programme OR Relationship-based intervention OR family contact)

2.4 Landlord-tenant mediation

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Landlord-tenant mediation OR Neighbour mediation)

2.5 Discharge interventions

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Discharge interventions OR Reentry OR prisoner re-entry OR transitional programme OR transitional supportive housing OR reintegration programme OR independent living OR independent housing OR community housing OR respite care OR medical respite OR homeless patient aligned care OR community follow up OR progressive independence model OR community care OR reintegration OR transitional programmes OR progressive independence model)

3. Services and Outreach

3.1 and 3.3

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Houseless OR Homeless OR Roofless OR Rough sleep*) AND (AND (Direct feeding OR Soup Runs OR Malnutrition interventions OR Day Centre intervention))

3.2

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (in-kind support interventions OR Non-Food items support OR Hygiene products OR Clothing or Household items supply) AND (Homeless OR Houseless OR Roofless OR People experiencing homelessness OR Rough sleepers)

3.4 (Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND

(Outreach access and recover OR assertive outreach OR street team OR multidisciplinary street team OR intensive outreach OR community prevention)

3.5 and 3.7 Reconnection and CTI done (no need to run again)

3.6 (Effectiveness OR impact evaluation OR Implementation OR Barriers and

facilitators OR Process Evaluation OR Evaluation) AND

(Assets-based programmes OR strength-based programmes OR Assets-based interventions OR strength-based interventions OR psychologically informed environments)

OR strength profiling)

3.8 (Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (residential treatment OR non residential treatment OR specialist integrated care OR coordination of care OR intergovernmental OR integrated housing services)

3.9 (Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Veterinary services for pets of homeless OR Interventions for pets of homeless OR pet care interventions) AND (Homeless OR houseless OR Rough sleepers OR pets of Rough sleepers)

3.10 (Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Legal advice OR legal assistance OR limited legal assistance OR unbundled legal assistance OR legal interventions) AND (Homeless Or Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

4. Accommodation and accommodation-based services

4.1-4.4

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Accommodation and accommodation-based services OR Shelters OR Hostels OR Temporary Accommodation OR Host Homes OR Housing Placement OR Housing support) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

4.5 Rapid Rehousing

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Rapid rehousing) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

4.6 Housing First

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Housing First) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

4.7 Social Housing (with or without support)

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Social Housing OR

Supportive housing OR Scattered-site housing OR permanent supportive housing OR abstinence contingent housing OR parallel housing services OR chronic care model OR community housing OR Residential treatment OR Rocking chair therapy OR congregate housing OR group home placements OR personalised housing OR onsite care)

4.8 Private rental sector (with or without support)

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Independent housing OR apartment living OR independent housing OR independent living OR community housing) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

4.9 Continuum of care

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Continuum of care OR continuity of care) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

5. Employment

5.1 Mentoring, coaching and in-work support

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Employment interventions OR Mentoring OR Coaching OR In-Work Support OR Individual Placement and Support OR Lifestyle coaching, OR employment pilot) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

5.2 Flexible employment

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Employment interventions OR Flexible employment) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

5.3 Vocational training and unpaid work experiences

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Employment interventions OR Vocational training OR unpaid work experiences OR

Work therapy OR therapeutic workplace OR Work skills training OR vocational rehabilitation OR housing and work support OR work support OR Pro-bono work) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers)

5.4 Paid work experiences

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Employment interventions OR Paid work experiences OR Paid internship)

AND (Homeless OR Houseless or Roofless OR People experiencing homelessness

OR Rough sleeper)

6. Health and Social care

6.1 Physical and mental health

6.1.1

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Health and Social care interventions OR Physical Health Services OR sexual health OR sexual risk behaviors OR HIV treatment OR tuberculosis OR hepatitis OR influenza OR cancer screening OR smoking cessation OR risk detection OR medical respite OR consultation model OR adherence to medication OR onsite care OR referral primary medical care)

6.1.2

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Mental Health Services OR Hospital-based rehabilitation OR psychiatric rehabilitation OR dialectical behavioral treatment OR nurse-led, motivational intervention OR motivational intervention OR Contingency management OR cognitive behavior* therapy OR behavior* day treatment OR motivational enhancement therapy OR mindfulness OR community-based counselling OR stepped care)

6.2 End of life care

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (End of life care interventions OR End of life planning OR Palliative care OR respite care OR Hospital care)

6.3 Addiction support

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Addiction support interventions OR Therapeutic communities OR harm-reduction OR methadone OR opioid substitution therapy OR faith-based addiction treatment OR abstinence contingent housing OR overdose training OR managed alcohol programme OR smoking cessation OR alcohol abuse OR comprehensive approach to rehabilitation OR harm reduction treatment for alcohol OR methamphetamine treatment OR community health OR naloxone Or supervised consumption facilities)

7. Education and Skills

7.1 Life and social skills training

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND education and skills interventions OR life skills training Or Social skills training OR emotional skills training OR financial literacy OR money management training Or tenancy management)

7.2 Mainstream education

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND education interventions OR classroom interventions)

7.3 Homelessness awareness programmes in schools

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Homelessness awareness programmes in schools OR Awareness Campaigns OR Homelessness awareness interventions)

7.4 Recreational and creative activities

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Recreational OR Social OR creative activities OR social clubs OR Theatre)

8. Communication

8.1 Advocacy Campaign

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Advocacy Campaign OR Rights of homeless campaign)

8.2 Public information campaigns

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Public information campaigns OR government-run campaigns)

8.3 Service availability

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Service availability communication interventions OR Service availability information interventions)

9. Financing

9.1 Social Impact Bonds

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Social Impact Bonds)

9.2 Direct financial support from public

(Effectiveness OR impact evaluation OR Implementation OR Barriers and facilitators OR Process Evaluation OR Evaluation) AND (Homeless OR Houseless or Roofless OR People experiencing homelessness OR Rough sleepers) AND (Financial assistance OR emergency financial assistance OR cash transfers OR personalised budgets OR hardship payments OR financial incentives)

Appendix 2 Organisational/institutional websites searched

Country/Region (with dates searched in parentheses)	Websites searched (Organisation/ Institution name and URL)
Australia (17th September, 2021)	FACS New South Wales https://bit.ly/3p5MqxE
	Mission Australia www.missionaustralia.com.au
	The Deck thedeck.org.au
	FACS Victoria https://bit.ly/3lcJ978
	FACS Western Australia https://bit.ly/36pM6TH
	Queensland https://bit.ly/3vcdsHh
	Australian Institute of Family Studies https://aifs.gov.au/publications/search?f%5B0%5D=sm_vid_Tags%3AHousing%20and%20homelessness
	APO apo.org.au

Country/Region (with dates searched in parentheses)	Websites searched (Organisation/ Institution name and URL)
Canada (14th September 2021)	<p>Homeless Hub (Journal articles) https://www.homelesshub.ca/search-library?keywords=evaluation&publication_date=1970-01-01%2000%3A00%3A00&f%5B0%5D=field_resource_type%3A253</p> <p>Homeless Hub (Reports) https://www.homelesshub.ca/search-library?keywords=evaluation&publication_date=1970-01-01%2000%3A00%3A00&f%5B0%5D=field_resource_type%3A259</p> <p>Homeless Hub (Dissertations) https://www.homelesshub.ca/search-library?keywords=evaluation&publication_date=1970-01-01%2000%3A00%3A00&f%5B0%5D=field_resource_type%3A262</p> <p>Inn from the cold https://innfromthecold.org/</p> <p>University of Ottawa https://uniweb.uottawa.ca/#lpsychology/themes/999:246/publications</p>
Europe (14th September, 2021)	FEANTSA https://www.feantsa.org/en

Country/Region (with dates searched in parentheses)	Websites searched (Organisation/ Institution name and URL)
UK (13th and 14th September, 2021)	<p>Centre for Housing Policy, York https://www.york.ac.uk/chp/</p> <p>Crisis https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/</p> <p>Homeless Link https://homeless.org.uk/</p> <p>i-sphere https://i-sphere.site.hw.ac.uk/</p> <p>Joseph Rowntree Foundation jrf.org.uk</p> <p>Shelter shelter.org.uk</p> <p>Social Care Institute for Excellence https://www.scie-socialcareonline.org.uk/</p> <p>St. Mungos mungos.org</p> <p>The National Lottery Community Fund https://www.tnlcommunityfund.org.uk/</p>
USA (17th September, 2021)	<p>HUD Program Evaluation Division https://www.huduser.gov/portal/research/eval.html</p> <p>https://www.huduser.gov/portal/index.php?qbing=evaluation&q=search.html&x=0&y=0</p> <p>https://www.huduser.gov/portal/publications/pdr_studies.html</p> <p>Department of labour Search term: Homeless evaluation https://search.usa.gov/search?utf8=%E2%9C%93&affiliate=www.dol.gov&query=homeless+evaluation</p>

Appendix 3

List of hand searched journals

Name of the Journal	URL	Dates searched
Health & Social Care in the Community	https://onlinelibrary.wiley.com/loi/13652524	17th September, 2021
Housing Care and Support	https://www.emerald.com/insight/publication/issn/1460-8790	21st September, 2021
Housing Policy Debate	https://www.tandfonline.com/loi/rhpd20	21st August, 2021
Housing Studies	https://www.tandfonline.com/loi/chos20	21st August, 2021
International Journal of Housing Policy	https://www.tandfonline.com/loi/reuj20	21st September, 2021
Journal of Social Distress and the Homeless	https://www.tandfonline.com/loi/ysdh20	17th September, 2021
Parity	https://search.informit.org/journal/par	21st September, 2021

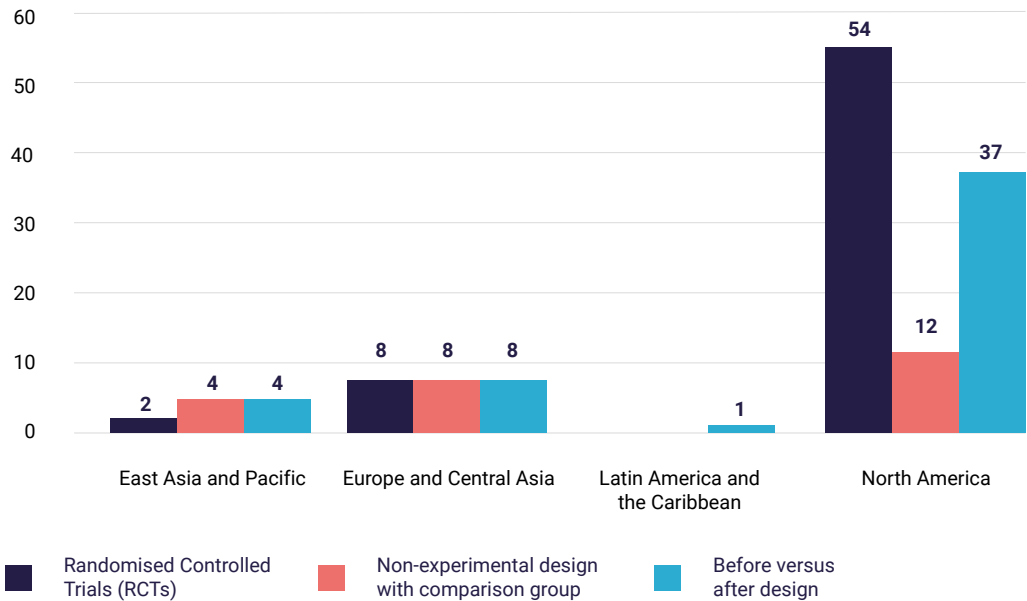
Appendix 4

A brief analysis of new records in the homelessness effectiveness map (based on records added during 2021 update)

Study Design and Regional distribution

This iteration of EGM added 25 systematic reviews and 138 impact evaluations. As many as 64 studies among the impact evaluation are randomised controlled trials (46 per cent). As high as 85% of all the RCTs are from North America alone. A total of 37 and 17 RCTs are from the US and Canada respectively.

Fig. a: Impact evaluations by region



Included Records by Intervention and Study design

The distribution of included studies by intervention categories and study design suggests that RCTs have mostly been conducted for intervention categories: prevention and outreach, accommodation and accommodation based services and health and social care. A similar trend can be observed across all other study designs. The figure clearly shows preponderance of studies under certain intervention categories and a visible lack of studies in legislation, communication and financing interventions.

Fig. b: Included records by intervention categories and study design

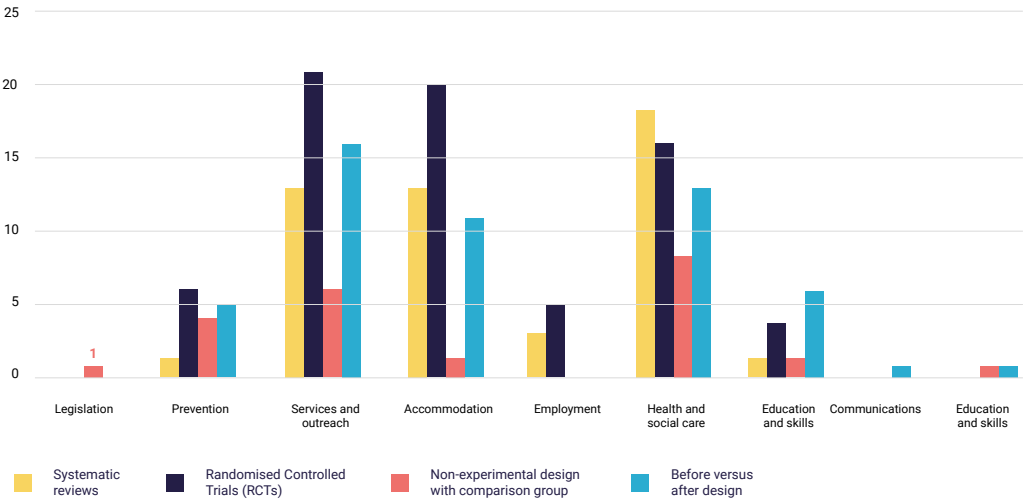


Table (i) Aggregate map of included records by intervention and outcome categories

Intervention categories	Capabilities and Wellbeing	Cost	Crime and justice	Employment and income	Health	Housing stability	Public attitudes and engagement
Legislation	1	1	0	1	1	2	0
Prevention	37	17	15	26	59	65	0
Services and outreach	101	45	30	63	204	155	0
Accommodation and accommodation-based services	83	39	27	50	136	129	0
Employment	13	4	5	21	30	21	0
Health and social care	76	33	19	35	214	72	0
Education and skills	48	5	13	14	55	18	0
Communications	1	2	0	0	2	0	1
Financing	1	1	1	1	1	3	0

Appendix 5 Description of Intervention and outcome categories and sub-categories

Intervention categories and sub-categories

Intervention	Intervention sub-category	Definition
Legislation		Marked if any sub-category in this category is marked.
	Housing/ Homelessness Legislation	Legislation pertaining to availability of/ access to housing, or the rights of those experiencing homelessness.
	Welfare Benefits	Legislation for welfare programmes to help people experiencing homelessness, or to help prevent people who are at risk of becoming homeless from losing their home.
	Health and social care legislation	Legislation for access to health and social care to help people experiencing homelessness, or to help people who are at risk of becoming homeless.
Prevention		Marked if any sub-category in this category is marked.
	Welfare and Housing Support	State contribution towards housing costs and other welfare payments and services, whether directly made to tenants or indirectly paid to service providers (e.g. landlords - examples in the UK: Local Housing Alliance, Universal Credit, etc; US: vouchers) from the state or non-state actors. This includes other welfare benefits such as childcare if studied in the context of homelessness.

	Housing supply	Policies promoting the development of new housing supply that is affordable and accessible (whether for social or private purposes) - this includes the construction, conversion of homes, and repurposing. Interventions comprise changes to legislation, financing mechanisms and other support for developers and those conditioning units for these purposes.
	Family mediation and conciliation	Counselling and mediation of conflicts, usually between young people and their family so they may avoid becoming homeless or reduce other risky behaviours. (Landlord-tenant mediation is a separate category)
	Landlord-tenant mediation	Mediation between landlords and tenants to encourage landlords to accept tenants with history of homelessness, substance abuse etc and to address conflicts. This may include, but is not limited to mediation around arrears, noise and substance abuse, damage to property, eviction, etc. Mediation with neighbours is also included here.
	Discharge interventions	Provision of services, including accommodation, to people being discharged from institutions (care, hospitals, prison, armed forces) to avoid people being discharged into homelessness. This may include coordination between agencies, accommodation, and other services tailored to their needs. It refers to both interventions whilst in the institution and community-based interventions focused on recently discharged persons.

Services and outreach		Marked if any sub-category in this category is marked.
	Direct feeding (e.g. soup runs)	Provision of food in street and day centre settings to people experiencing homelessness.
	In-kind support (exc. food)	Provision of clothing, hygiene products, household items etc., but excluding food.
	Day centres	Centres open only during the day to provide food and services for people experiencing homelessness. This code is used if the day centre itself is being evaluated in the study rather than being the setting for the intervention.
	Outreach	Outreach refers to work with people sleeping rough or in temporary or unstable accommodation. Outreach workers go out, including late at night and in the early hours of the morning, to locate people who are rough sleeping or work with day centres, shelters etc. The role of outreach teams varies but usually outreach workers seek to engage with people and check their immediate health and wellbeing, collect basic information about their situation, facilitate access to emergency accommodation or other accommodation (such as hostels or Housing First), and inform them about day centres and other services they might have available. Outreach models vary and may include enforcement (e.g. police officials) to remove people from the streets or enforce specific behaviours.

	Reconnection of people experiencing street homelessness	Reconnecting people experiencing homelessness (rough sleepers) or at risk of homelessness (e.g. dischargees) to their 'home' location (usually another city, state or country where they have networks, access to services, etc) by providing the cost of transport for relocation.
	Psychologically informed environments	Psychologically informed environments are interventions designed to take into account the psychological profile of the client. Community Reinforcement Approach (CRA) is included here.
	Case management (inc. Critical Time Intervention)	Individual-level approach to ensure coordination of services. The case worker (can be a social worker or dedicated case worker from another agency) works directly with the client to ensure that the client has access to all applicable services e.g. health, training and social activities. A specific application of the case work approach is critical time intervention (CTI) which provides a person (or family) in transition between types of accommodation and at risk of homelessness with a period of intensive support from a caseworker. The caseworker will have established a relationship with the client before the transition – for example, before discharge from hospital or prison. Critical time intervention involves three stages: (1) direct support to the client and assessing what resources exist to support them, (2) trying out and adjusting the systems of support as necessary, and (3) completing the transfer of care to existing community resources.

	Service coordination, co-location or embedded in mainstream services	System-based approaches to ensuring coordination of service delivery. Coordination may refer to ensuring communication between relevant services. Coordination also includes providing services in the same location or adjacent to mainstream services. Co-location refers to multiple services being available in the same physical location (e.g. housing and job search services in the same location). Embedded refers to services being integrated in the same place (e.g. housing and other services within a hospital context). A specific example is coordinated assessment. Refers to case workers making broad assessments of people at risk as homelessness on different factors that affect their risk. Try to ensure different services employ the same assessment tools to standardise practice.
	Veterinary services	Access to veterinary services for pets of people experiencing homelessness.
	Legal advice	Legal assistance and advice delivered away from primary service/office to the homeless population.
Accommodation and accommodation-based services	Shelters	Homeless shelters are a basic form of temporary accommodation where a bed is provided in a shared space overnight. One of the key features of a homeless shelter is that it is transitional and an option for those homeless who are not yet eligible for more stable accommodation. Shelters are not usually seen as stable forms of accommodation as the individual must vacate the space during daytime hours with their belongings. One of the key differences with hostels is the need to vacate the premises during the day.

	Hostels	Hostels for homeless people are designed to provide short-term accommodation, usually for up to two years depending on available move-on accommodation. Typically shared accommodation projects with individual rooms and shared facilities including bathrooms and kitchens. Hostels have staff on site 24 hours a day and during the daytime provide support to residents on issues including welfare benefits and planning their move from the hostel into more medium to long-term accommodation.
	Temporary accommodation	Temporary accommodation includes a range of housing options which are more stable than shelters or hostels, such as transitional housing and residential programmes.
	Host homes	Emergency Host homes are emergency short-term placements in volunteers' own homes in the community for people who are homeless or at risk of homelessness. Hosting services are often aimed at young people with low support needs, but exist for other groups too, such as people who have been refused asylum.
	Rapid Rehousing	Rapid rehousing places those who are experiencing homelessness into accommodation as soon as possible. The intervention provides assistance in finding accommodation, and limited duration case work to connect the client to other services.
	Housing First	Housing First offers accommodation to homeless people with multiple and complex needs with minimal obligations or conditions being placed upon the participant. Housing First provides safe and stable housing to all individuals, regardless of criminal background, mental instability, substance abuse, or income.

	Social housing (with or without support)	Housing that is provided in the social sector. It may sometimes be provided alongside support services, this may be temporary or permanent. Examples of support that may be provided are health and money management (excluding Housing First and Rapid Rehousing). This is based on an institutional setting.
	Private Rental Sector (with and without support)	Housing that is provided in the private rental market where the tenant is fully responsible. This may or may not include additional support services as the focus is on the type of tenancy agreement (private).
	Continuum of Care	An approach to accommodation whereby people experiencing homelessness move through different forms of transitional accommodation until they are deemed 'housing ready' (e.g. stopped substance abuse) and allocated independent settled housing.
Employment	Mentoring, coaching and in-work support	Mentoring and coaching to support job search including activities like practice interviews, review CVs, etc and on the job support for work performance.
	Flexible employment	Employment which can accommodate needs for the person experiencing homelessness.
	Vocational training and unpaid work experiences	Unpaid job placement or vocational training to provide work experience for people experiencing, or at risk of, homelessness.
	Paid work experiences	Paid job placement to provide work experience for people experiencing, or at risk of, homelessness.
Health and social care	Health services (physical and mental)	Providing direct access to, or facilitating access to, physical and mental health services for people experiencing homelessness.
	End of life care	End of life care for people experiencing or at risk of homelessness.
	Addiction support	Services for people experiencing, or at risk of, homelessness who have issues with substance use (including alcohol and other substances).

Education and skills	Life and social skills training	Life and social skill training including socio-emotional skills, financial literacy (money management), tenancy management, and how to deal with ones home; for people experiencing or at risk of homelessness.
	Mainstream education	General education at all levels for people experiencing, or at risk of, homelessness including children in families at risk of or experiencing homelessness.
	Homelessness awareness programmes in schools	School-based programmes to raise awareness of homelessness [Not interventions to help school aged children attend school; these are under mainstream education).
	Recreational and creative activities	Recreational, social (e.g. social clubs) and creative (e.g. theatre) activities for people experiencing homelessness.
Communication	Advocacy campaigns	Campaigns by third sector organisations which aim to improve awareness of the general public of homelessness, its causes, and its solutions, and promote rights of the homeless.
	Public information campaigns	Campaigns by government organisations which aim to improve awareness of the general public of homelessness, its causes, and its solutions, and promote rights of the homeless.
	Service availability	General communication activities to raise awareness amongst people at risk of, or experiencing, homelessness of the services available to them. Does not include case management, discharge etc which provides information or connects individuals to services.

Financing	Social Impact Bonds	Performance-based financing for organisations commissioned to provide services to people experiencing homelessness. These are not interventions in themselves, but payment mechanisms for service deliverers.
	Direct financial support from public	Money given directly by individuals to those experiencing or at risk of homelessness

Outcome categories and sub-categories		
Outcomes	Outcome sub-category	Definitions
Capabilities and Wellbeing	Social connectedness and social networks (including loneliness)	Community engagement and social connectedness e.g. social networks and loneliness.
	Education, skills and self care	Improved skill and self care including all life skills.
	Overall Wellbeing and Quality of Life	Overall wellbeing or quality of life including happiness.
Cost		Cost related outcomes/ indicators. This includes cost effectiveness, cost per participant and saving.
	Cost Effectiveness	Cost effectiveness as cost per outcome in absolute or relative terms.
	Cost per Participant	Cost per participant.
	Saving	Cost savings from interventions (e.g. "this policy would reduce the number of ambulance/ police incidents and save the government money").
Crime and justice		Crime and justice outcomes/ indicators. This includes arrest and imprisonment, recidivism and victims of crime.
	Offending, arrest and imprisonment	Any measure or record of any recognized crime (violent/non-violent/any other offence), arrest, conviction and imprisonment.
	Anti-social behaviour and delinquency	Non-criminal anti-social and disruptive behaviour, such as public drunkenness. Delinquency refers to non-criminal anti-social behaviour by youth.
	Recidivism	Tendency of a convicted criminal to reoffend.
	Victims of crime	Outcomes/indicators about those experiencing and at risk of homelessness being victims of crime.

Employment and income		Employment and income outcomes/indicators. This includes access to welfare benefits, earned income, employment status, forced labour and sex work.
	Access to Welfare Benefits	Access to welfare benefits as outcomes/indicators.
	Earned Income	Earned income (e.g. salary or wages).
	Employment Status	Employment status (e.g. employed full time, self-employed, unemployed, etc).
	Forced Labour and Sex Work	Forced labour and sex work (e.g. slavery or prostitution).
Health		Health outcomes/indicators. This includes abstinence from substance abuse, access to mainstream health care, harm reduction, mental health status and physical health and nutrition status.
	Substance Abuse	Abstinence from substance abuse including both alcohol and tobacco (e.g. 12 months without alcohol or drugs).
	Access to Mainstream Health Care	Access to and utilisation of mainstream health care as outcomes/indicators (e.g. registered with a local general practice doctor).
	Mental Health Status	Mental health status (e.g. diagnosed with conditions such as depression, anxiety, psychosis, personality disorder, etc).
	Physical Health and Nutrition Status	Physical health or nutrition (e.g. life expectancy, dietary intake, anthropometric indicators).
	Risky behaviour	Risky behaviour as outcomes/ indicators (e.g. early onset of sexual activity or unsafe sexual practices, risky driving, antisocial behaviour etc).

Housing Stability		Housing stability outcomes/ indicators. This includes accommodation status and satisfaction with housing.
	Accommodation Status	Accommodation status or quality of housing as outcomes/indicators (e.g. living independently, living in temporary accommodation, sleeping on the streets).
	Satisfaction with Housing	Satisfaction with housing (subjective, objective measures are in accommodation status).
Public attitudes and engagement		Public attitudes and engagement. This includes fundraising, public understanding, support for intervention, and engagement in homelessness related activities.
	Fundraising and direct giving	Charity fundraising.
	Public Understanding	Public understanding as outcomes/indicators (e.g. hostility or empathy towards homeless people).
	Engagement in Homelessness Related Activities	Public engagement in homeless related activities as outcomes/ indicators (e.g. number of volunteer applicants).

Appendix 6 Characteristics of impact evaluations from the UK

Author	Title	Location	Population sub-groups	Study Design	Intervention	Outcome	Confidence in study findings
Aldridge (2014)	Impact of peer educators on uptake of mobile x-ray tuberculosis screening at homeless hostels: a cluster randomised controlled trial	London (England)	Other	Randomised Controlled Trials (RCTs)	Health and social care	Health	Medium/high confidence
Aldridge (2019)	Impact evaluation of the Rough Sleeping Initiative 2018	(England)	Other	Non-experimental design with comparison group	Services and outreach	Housing stability	Low confidence
Bäumker (2008)	Costs and s of an extra care housing scheme in Bradford	Bradford (England)	Elderly People with/history of mental illness	Before versus after design	Accommodation and accommodation-based services	Cost Health	Low confidence
Bradley (2020)	'Every day is hard, being outside, but you have to do it for your child': mixed-methods formative evaluation of a peer-led parenting intervention for homeless families	London (England)	Families with children	Before versus after design	Education and skills	Capabilities and Wellbeing	Low confidence
Burke (2018)	'Mobile Me': An evaluation of a sport intervention in sheltered housing and care homes	Norfolk (England)	Elderly People leaving social care	Non-experimental design with comparison group	Education and skills	Capabilities and Wellbeing Health	Low confidence
Cooley (2019)	The experiences of homeless youth when using strengths profiling to identify their character strengths	Midlands (England)	Young people	Before versus after design	Education and skills	Capabilities and Wellbeing	Low confidence
Cox (2018)	Exploring the use and uptake of e-cigarettes for homeless smokers	England and Scotland	People with alcohol/drug issues People with complex needs/dual diagnosis	Randomised Controlled Trials (RCTs)	Health and social care	Cost Health	Low confidence
Craig (2004)	The Lambeth Early Onset (LEO) Team: randomised controlled trial of the effectiveness of specialised care for early psychosis	London (England)	People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Health	Medium/high confidence
Dawkins (2020)	A cluster feasibility trial to explore the uptake and use of e-cigarettes versus usual care offered to smokers attending homeless centres in Great Britain	London, Northampton and Edinburgh (England and Scotland)	People with alcohol/drug issues	Non-experimental design with comparison group	Health and social care	Capabilities and Wellbeing Health	Low confidence

Author	Title	Location	Population sub-groups	Study Design	Intervention	Outcome	Confidence in study findings
Department for Communities and Local Government (2017)	The impact evaluation of the London Homelessness Social Impact Bond	London (England)	Other	Non-experimental design with comparison group	Financing	Capabilities and Wellbeing Housing stability	Low confidence
Dunn (2019)	Military veteran transition into employment and civilian engagement: a walking with the wounded evaluation	Not reported	Veterans/Ex-services	Before versus after design	Employment Health and social care	Employment and income Health	Low confidence
Garety (2006)	Specialised care for early psychosis: symptoms, social functioning and patient satisfaction: randomised controlled trial.	London (England)	People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Health and social care	Capabilities and Wellbeing Health Housing stability	Low confidence
Hickman (2017)	The impact of the direct payment of housing benefit: evidence from Great Britain	England Scotland Wales	Other Social housing tenants	Non-experimental design with comparison group □ PSM, p.10	Prevention	Housing stability	Low confidence
Hopkin (2016)	The Impact of the Critical Time Intervention for People with Severe Mental Illness in the Transition from Prison to the Community	London (England)	Ex-prisoners People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Health	Medium/ high confidence
Hough (2020)	Adopting a Critical Time Intervention model through Fulfilling Lives Newcastle Gateshead: An evaluation	Newcastle and Gateshead (England)	People with complex needs/ dual diagnosis	Before versus after design	Services and outreach	Capabilities and Wellbeing Crime and justice Health	Low confidence
Howard (2010)	Effectiveness and cost-effectiveness of admissions to women's crisis houses compared with traditional psychiatric wards: pilot patient-preference randomised controlled trial	London (England)	People with/ history of mental illness Women and girls	Randomised Controlled Trials (RCTs)	Health and social care	Capabilities and Wellbeing Cost Health	Medium/ high confidence
Jarrett (2012)	Continuity of care for recently released prisoners with mental illness: a pilot randomised controlled trial testing the feasibility of a Critical Time Intervention	London (England)	Ex-prisoners People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Employment and income Health Housing stability	Low confidence

Author	Title	Location		Population sub-groups	Study Design	Intervention	Outcome	Confidence in study findings
Khan (2020)	Impact on the use and cost of other services following intervention by an inpatient pathway homelessness team in an acute mental health hospital	London (England)		People with/ history of mental illness	Before versus after design	Services and outreach	Cost Health	Low confidence
Killaspy (2004)	Treating the homeless mentally ill: does a designated inpatient facility improve ?	London (England)		People with/ history of mental illness	Non-experimental design with comparison group	Prevention Health and social care	Health Housing stability	Low confidence
Killaspy (2006)	The REACT study: randomised evaluation of assertive community treatment in north London	London (England)		People with alcohol/drug issues People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Capabilities and Wellbeing Health	Low confidence
Killaspy (2019)	Feasibility randomised trial comparing two forms of mental health supported accommodation (supported housing and floating outreach); a component of the QuEST (Quality and Effectiveness of Supported Tenancies) Study	London and Cheltenham (England)		People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Accommodation and accommodation-based services	Capabilities and Wellbeing Health	Medium/ high confidence
Lowrie (2021)	Pharmacist led homeless outreach engagement and non-medical independent prescribing (Rx) (PHOENix) intervention for people experiencing homelessness: a non- randomised feasibility study	Glasgow (Scotland)		People with existing health conditions (excluding HIV)	Non-experimental design with comparison group	Health and social care	Health	Low confidence
MacInnes (2021)	Supporting prisoners with mental health needs in the transition to RESETtle in the community: the RESET study	Kent and London (England)		Ex-prisoners People with/ history of mental illness	Non-experimental design with comparison group	Prevention	Housing stability	Medium/ high confidence
Marshall (1995)	Social services case-management for long-term mental disorders: a randomised controlled trial.	Not reported		People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Capabilities and Wellbeing Health	Medium/ high confidence
Murphy (2017)	Tackling Multiple Disadvantage: Year 1 Interim Report	London (England)		People with complex needs/ dual diagnosis	Before versus after design	Prevention Employment	Capabilities and Wellbeing Employment and income Health	Medium/ high confidence

Author	Title	Location		Population sub-groups	Study Design	Intervention	Outcome	Confidence in study findings
Paisi (2019)	Management of plaque in people experiencing homelessness using 'peer education': a pilot study	Plymouth (England)		Other □ Homeless	Before versus after design	Services and outreach Health and social care Education and skills	Capabilities and Wellbeing Health	Medium/ high confidence
Parkes (2019)	Supporting Harm Reduction through Peer Support (SHARPS): testing the feasibility and acceptability of a peer-delivered, relational intervention for people with problem substance use who are homeless, to improve health s, quality of life and social functioning and reduce harms: study protocol. Pilot and feasibility studies	Not reported		People with alcohol/drug issues	Before versus after design	Services and outreach Health and social care	Health Housing stability	Ongoing
Quinton (2021)	An evaluation of My Strengths Training for Life (TM) for improving resilience and well-being of young people experiencing homelessness	England		Young people	Before versus after design	Education and skills	Capabilities and Wellbeing	Low confidence
Rathod (2021)	Peer advocacy and access to healthcare for people who are homeless in London, UK: a mixed method impact, economic and process evaluation protocol	London (England)		People with alcohol/drug issues People with existing health conditions (excluding HIV) People with/ history of mental illness	Non-experimental design with comparison group	Services and outreach	Cost Health	Ongoing
Shaw (2017)	Critical time Intervention for Severely mentally ill Prisoners (CrISP): a randomised controlled trial	London (England)		Ex-prisoners People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Capabilities and Wellbeing	Low confidence
Stringer (2019)	Promoting physical activity in vulnerable adults at risk' of homelessness: a randomised controlled trial protocol	London (England)		Elderly	Randomised Controlled Trials (RCTs)	Education and skills	Health	Ongoing
Sundin (2020)	Feasibility and acceptability of an intervention for enhancing reintegration in adults with experience of homelessness	England		Other □ Above 18 years (18-63)	Before versus after design	Education and skills	Housing stability	Low confidence
Tempier (2012)	Does Assertive Community Outreach Improve Social Support? Results From the Lambeth Study of Early-Episode Psychosis	London (England)		People with/ history of mental illness	Randomised Controlled Trials (RCTs)	Services and outreach	Capabilities and Wellbeing Health	Medium/ high confidence

Appendix 7 List of Included Studies

Abell M L, Davey T L, Clark P, & Perkins N H. (2009). Community Case Management Intervention for Hard-to-Place Homeless Families Leaving Emergency Shelter. *Journal of Social Distress and Homelessness*, 19(1–2), 121–147. <https://doi.org/10.1179/105307809805365109>

Adams-Guppy J R & Guppy A. (2015). A systematic review of interventions for homeless alcohol-abusing adults. *Drugs: Education, Prevention & Policy*, 23(1), 15–30. <https://doi.org/10.3109/09687637.2015.1044499>

Adamus C, Jager M, Richter D, & Motteli S. (2020). Independent Housing and Support for non-homeless individuals with severe mental illness: Randomised controlled trial vs. Observational study—Study protocol. *BMC Psychiatry*, 20, 319–319. <https://doi.org/10.1186/s12888-020-02712-y>

Aldridge R, Yates S, Hemming S, Possas L, Ferenando G, Garber E, Hayward A, McHugh T, Lipman M, & Story A. (2014). Impact of peer educators on uptake of mobile x-ray tuberculosis screening at homeless hostels: A cluster randomised controlled trial. *Thorax*, 69(12), A44–A45. <https://doi.org/10.1136/thoraxjnl-2014-206260.86>

Aldridge S. (2019). Impact evaluation of the Rough Sleeping Initiative 2018. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/831133/RSI_Impact_Evaluation.pdf

Altena A M, Brilleslijper-Kater S N, & Wolf J R. (2010). Effective Interventions for Homeless Youth: A systematic review. *American Journal of Preventive Medicine*, 38(6), 637–645. <https://doi.org/10.1016/j.amepre.2010.02.017>

Appel P W, Tsemberis S, Joseph H, Stefancic A, & Lambert-Wacey D. (2012). Housing First for Severely Mentally Ill Homeless Methadone Patients. *Journal of Addictive Diseases*, 31(3), 270–277. <https://doi.org/10.1080/10550887.2012.694602>

Aquin J P, Roos L E, Distasio J, Katz L Y, Bourque J, Bolton J M, Bolton S L, Wong J Y, Chateau D, Somers J M, & Enns M W. (2017). Effect of Housing First on Suicidal Behaviour: A Randomised Controlled Trial of Homeless Adults with Mental Disorders. *Canadian Journal of Psychiatry*, 62(7), 473–481. <https://doi.org/10.1177/0706743717694836>

Arnold E M, Swendeman D, Harris D, Fournier J, Kozina L, Abdalian S, & Rotheram M J. (2019). The Stepped Care Intervention to Suppress Viral Load in Youth Living With HIV: Protocol for a Randomized Controlled Trial. *JMIR Research Protocols*, 8(2), e10791. <https://doi.org/10.2196/10791>

Ashwood J S, Patel K, Kravitz D, & Adamson D M. (2019). Evaluation of the Homeless Multidisciplinary Street Team for the City of Santa Monica. *RAND*. <https://doi.org/10.7249/RR2848>

Aubry T, Bourque J, Goering P, Crouse S, Veldhuizen S, LeBlanc S, Cherner R, Bourque P É, Pakzad S, & Bradshaw C. (2019). A randomized controlled trial of the

effectiveness of Housing First in a small Canadian City. *BMC Public Health*, 19, 1154. <https://doi.org/10.1186/s12889-019-7492-8>

Aubry T Brcic V, Saad A, Magwood O, Abdalla T, Alkhateeb Q, Xie E, Mathew C, Hannigan T, Costello C, Thavorn K, Stergiopoulos V, Tugwell P, Pottie K, & Bloch G. (2020). Effectiveness of permanent supportive housing and income assistance interventions for homeless individuals in high-income countries: A systematic review. *The Lancet. Public Health*, 5(6), e342–e360. [https://doi.org/10.1016/S2468-2667\(20\)30055-4](https://doi.org/10.1016/S2468-2667(20)30055-4)

Aubry T, Goering P, Veldhuizen S, Adair C E, Bourque J, Distasio J, Latimer E, Stergiopoulos V, Somers J, Streiner D L, & Tsemberis S. (2016). A Multiple-City RCT of Housing First With Assertive Community Treatment for Homeless Canadians With Serious Mental Illness. *Psychiatric Services (Washington, D.C.)*, 67(3), 275–281. <https://doi.org/10.1176/appi.ps.201400587>

Aubry T, Nelson G, & Tsemberis S. (2015). Housing first for people with severe mental illness who are homeless: A review of the research and findings from the At Home-Chez soi demonstration project. *The Canadian Journal of Psychiatry / La Revue Canadienne de Psychiatrie*, 60(11), 467–474. <https://doi.org/10.1177/070674371506001102>

Aubry T, Tsemberis S, Adair C E, Veldhuizen S, Streiner D, Latimer E, Sareen J, Patterson M, McGarvey K, Kopp B, & Hume C. (2015). One-year outcomes of a randomized controlled trial of housing first with ACT in five Canadian cities. *Psychiatric Services (Washington, D.C.)*, 66(5), 463–469. <https://doi.org/10.1176/appi.ps.201400167>

Baer J S, Garrett S B, Beadnell B, Wells E A, & Peterson P L. (2007). Brief Motivational Intervention With Homeless Adolescents: Evaluating Effects on Substance Use and Service Utilization. *Psychology of Addictive Behaviors*, 21(4), 582–586. <https://doi.org/10.1037/0893-164X.21.4.582>

Baggett T P. (2020). Lung Cancer Screening Navigation for Homeless People. *National Library of Medicine*. <https://clinicaltrials.gov/ct2/show/NCT04308226>

Baggett T P, Chang Y, Yaqubi A, McGlave C, Higgins S T, & Rigotti N A. (2017). Financial incentives for smoking abstinence in homeless smokers: A randomized controlled trial. *Journal of General Internal Medicine*. Conference: 40th Annual Meeting of the Society of General Internal Medicine, SGIM 2017. United States, 32, S193-s194. <https://doi.org/10.1093/ntr/ntx178>

Baggett T P, McGlave C, Kruse G R, Yaqubi A, Chang Y, & Rigotti N A. (2019). SmokefreeTXT for Homeless Smokers: Pilot Randomized Controlled Trial. *Jmir Mhealth and Uhealth*, 7(6), e13162. <https://doi.org/10.2196/13162>

Baggett T P, Yaqubi A, Berkowitz S A, Kalkhoran S M, McGlave C, Chang Y, Campbell E G, & Rigotti N A. (2018). Subsistence difficulties are associated with more barriers to quitting and worse abstinence outcomes among homeless smokers: Evidence from two studies in Boston, Massachusetts. *BMC Public Health*, 18, 463. <https://doi.org/10.1186/s12889-018-5375-z>

Baggett TP, Chang Y, Yaqubi A, McGlave C, Higgins ST, & Rigotti NA. (2018). Financial incentives for smoking abstinence in homeless smokers: A pilot

randomized controlled trial. *Nicotine & Tobacco Research*, 20, 1442–1450. <https://doi.org/10.1093/ntr/ntx178>

Bahrami S, Alvarez K S, Lutek K, Nguyen S, Hegde A, & Chang C. (2020). Pharmacist impact on health outcomes in a homeless population. *Journal of the American Pharmacists Association*, 60, 485–490. <https://doi.org/10.1016/j.japh.2019.11.013>

Baker J, Travers J, Buschman P, & Merrill J A. (2018). An Efficient Nurse Practitioner-Led Community-Based Service Model for Delivering Coordinated Care to Persons With Serious Mental Illness at Risk for Homelessness. *Journal of the American Psychiatric Nurses Association*, 24(2), 101–108. <https://doi.org/10.1177/1078390317704044>

Ballard C A. (2003). Counseling outcome research: The use of the Addiction Severity Index in a homeless population. In *Dissertation Abstracts International Section A: Humanities and Social Sciences* (Vol. 63).

Bani-Fatemi A, Noble A, Wang W, Rajakulendran T, Kahan D, Stergiopoulos V, & Malta M. (2020). Supporting Female Survivors of Gender-Based Violence Experiencing Homelessness: Outcomes of a Health Promotion Psychoeducation Group Intervention. *Frontiers in Psychiatry*, 11. <https://doi.org/10.3389/fpsyt.2020.601540>

Barger M K, Weinrich S, Bormann J E, Bouvier M, & Hardin S B. (2015). Mantram Repetition Program Decreases Insomnia Among Homeless Women: A Pilot Study. *Journal of Psychosocial Nursing & Mental Health Services*, 53(6), 44–49. <https://doi.org/10.3928/02793695-20150526-03>

Barker S L and Maguire, N. (2017). Experts by Experience: Peer Support and its Use with the Homeless. *Community Mental Health Journal*, 53(5), 598–612. <https://doi.org/10.1007/s10597-017-0102-2>

Barker S. (2019). Peer Support and Homelessness. University of Southampton. <https://doi.org/10.5258/SOTON/D0649>

Bartle-Haring S, Slesnick N, Collins J, Erdem G, & Buettner C. (2012). The utility of mentoring homeless adolescents: A pilot study. *American Journal of Drug & Alcohol Abuse*, 38(4), 350–358. <https://doi.org/10.3109/00952990.2011.643985>

Bassuk E L, DeCandia C J, Tsertsvadze A, & Richard M K. (2014). The effectiveness of housing interventions and housing and service interventions on ending family homelessness: A systematic review. *American Journal of Orthopsychiatry*, 84(5), 457–474. <https://doi.org/10.1037/ort0000020>

Basu A, Kee R, Buchanan D, & Sadowski L. (2012). Comparative cost analysis of housing and case management program for chronically ill homeless adults compared to usual care. *Health Services Research*, 47(1pt2), 523–543. <https://doi.org/10.1111/j.1475-6773.2011.01350.x>

Bäumker T, Netten A, & Darton R. (2008). Costs and outcomes of an extra care housing scheme in Bradford. York: Joseph Rowntree Foundation. <https://www.jrf.org.uk/file/37811/download?token=lvRExLOJ&filetype=full-report>

Baxter A J, Tweed E J, Katikireddi S V, & Thomson H. (2019). Effects of Housing

First approaches on health and well-being of adults who are homeless or at risk of homelessness: Systematic review and meta-analysis of randomised controlled trials. *Journal of Epidemiology and Community Health*, 73, A66–A66. <https://doi.org/10.1136/jech-2018-210981>

Beal SJ, Nause K, Lutz N, & Greiner MV. (2020). The Impact of Health Care Education on Utilization Among Adolescents Preparing for Emancipation From Foster Care. *Journal of Adolescent Health*, 66(6), 740–746. <https://doi.org/10.1016/j.jadohealth.2019.12.009>

Bean K F, Shafer M S, & Glennon M. (2013). The impact of housing first and peer support on people who are medically vulnerable and homeless. *Psychiatric Rehabilitation Journal*, 36(1), 48–50. <https://doi.org/10.1037/h0094748>

Beattie K, McCay E, Aiello A, Howes C, Donald F, Hughes J, MacLaurin B, & Organ H. (2019). Who benefits most? A preliminary secondary analysis of stages of change among street-involved youth. *Archives of Psychiatric Nursing*, 33, 143–148. <https://doi.org/10.1016/j.apnu.2018.11.011>

Beggs A E & Karst A C. (2016). Effectiveness of Pharmacy Student-Led Health Education in Adults Experiencing Homelessness. *Journal of Health Care for the Poor & Underserved*, 27(3), 954–960. <https://doi.org/10.1353/hpu.2016.0125>

Beieler A, Magaret A, Zhou Y, Schleyer A, Wald A, & Dhanireddy S. (2019). Outpatient Parenteral Antimicrobial Therapy in Vulnerable Populations—People Who Inject Drugs and the Homeless. *Journal of Hospital Medicine*, 14, 105–109. <https://doi.org/10.12788/jhm.3138>

Beiser M E, Smith K, Ingemi M, Mulligan E, & Baggett T P. (2019). Hepatitis C treatment outcomes among homeless-experienced individuals at a community health centre in Boston. *International Journal of Drug Policy*, 72, 129–137. <https://doi.org/10.1016/j.drugpo.2019.03.017>

Beker J, DeAngelis T, & Rivera N. (2020). Life-Skill Development and Its Impact on Perceived Stress and Employment Pursuits: A Study of Young Adults With a History of Homelessness and Trauma...2020 American Occupational Therapy Association Annual Conference & Expo. *American Journal of Occupational Therapy*, 74, 1–1. <https://doi.org/10.5014/ajot.2020.74S1-PO7119>

Bell J F, Krupski A, Joesch J M, West I I, Atkins D C, Court B, Mancuso D, & Roy-Byrne P. (2015). A randomized controlled trial of intensive care management for disabled Medicaid beneficiaries with high health care costs. *Health Services Research*, 50(3), 663–689. <https://doi.org/10.1111/1475-6773.12258>

Bell S & Shinn M. (2013). Family options study: Interim report. US Department of Housing and Urban Development. Washington. https://www.huduser.gov/publications/pdf/HUD_503_Family_Options_Study_Interim_Report_v2.pdf

Bender K A, DePrince A, Begun S, Hathaway, Haffeejee B, & Schau N. (2018). Enhancing risk detection among homeless youth: A randomized clinical trial of a promising pilot intervention. *Journal of Interpersonal Violence*, 33(19), 2945–2967.

Bender K, Begun S, DePrince A, Haffeejee B, Brown S, Hathaway J, & Schau N.

- (2015). Mindfulness intervention with homeless youth. *Journal of the Society for Social Work and Research*, 6(4), 491–513. <https://doi.org/10.1086/684107>
- Benkouiten S, Drali R, Badiaga S, Veracx A, Giorgi R, Raoult D, & Brouqui P. (2014). Effect of Permethrin-Impregnated Underwear on Body Lice in Sheltered Homeless Persons: A Randomized Controlled Trial. *PubMed*, 150(3), 273–279.
- Benston E A. (2015). Housing Programs for Homeless Individuals With Mental Illness: Effects on Housing and Mental Health Outcomes. *Psychiatric Services*, 66(8), 806–816. <https://doi.org/10.1176/appi.ps.201400294>
- Bianco C.L., Pratt, S.I., Ferro, J.C., & Brunette, M. F. (2019). Electronic Cigarette Use During a Randomized Trial of Interventions for Smoking Cessation Among Medicaid Beneficiaries with Mental Illness. *Journal of Dual Diagnosis*, 15(3), 184–191. <https://doi.org/10.1080/15504263.2019.1620400>
- Biederman D J, Gamble J, Wilson S, Douglas C, & Feigal J. (2019). Health care utilization following a homeless medical respite pilot program. *Public Health Nursing*, 36(3), 296–302. <https://doi.org/10.1111/phn.12589>
- Birnie S. (2009). A comprehensive costing analysis of intensive case management for individuals with severe mental illness and a history of homelessness, including cost-effectiveness as compared to standard care [University of Ottawa]. <https://doi.org/10.20381/ruor-19896>
- Bitter N A, Roeg D P, Nieuwenhuizen C V, & Weeghel J V. (2015). Effectiveness of the Comprehensive Approach to Rehabilitation (CARE) methodology: Design of a cluster randomized controlled trial. *BMC Psychiatry*, 15(1), 165. <https://doi.org/10.1186/s12888-015-0564-0>
- Bond G R, Witheridge T F, Dincin J, Wasmer D, Webb J, & De Graaf-Kaser R. (1990). Assertive Community Treatment for Frequent Users of Psychiatric Hospitals in a Large City: A Controlled Study. *American Journal of Community Psychology*, 18(6), 865–891. <https://doi.org/10.1007/BF00938068>
- Bovell-Ammon A, Mansilla C, Poblacion A, Rateau L, Heeren T, Cook JT, Zhang T, de Cuba SE, & Sandel MT. (2020). Housing Intervention For Medically Complex Families Associated With Improved Family Health: Pilot Randomized Trial. *Health Affairs*, 39, 613–621. <https://doi.org/10.1377/hlthaff.2019.01569>
- Bradford D W, Gaynes B N, Kim M M, Kaufman J S, & Weinberger M. (2005). Can shelter-based interventions improve treatment engagement in homeless individuals with psychiatric and/or substance misuse disorders?: A randomized controlled trial. *Medical Care*, 43(8), 763–768. <https://doi.org/10.1097/01.mlr.0000170402.35730.ea>
- Bradley C, Penney C, Michelson D, & Day C. (2020). “Every day is hard, being outside, but you have to do it for your child”: Mixed-methods formative evaluation of a peer-led parenting intervention for homeless families. *PubMed*, 25, 860–876. <https://doi.org/10.1177/1359104520926247>
- Braucht G N, Reichardt C S, Geissler L J, Bormann C A, Kwiatkowski C F, & Kirby Jr M W. (1996). Effective services for homeless substance abusers. *Journal of Addictive Diseases*, 14(4), 87–109. https://doi.org/10.1300/J069v14n04_06

- Brewer T A. (2019). Building bridges: A trauma-informed relational intervention for parents experiencing homelessness. *Dissertation Abstracts International Section A: Humanities and Social Sciences*, 81, No-Specified.
- Bring C, Ankarfeldt M Z, Brunes N, Pedersen M, Petersen J, Andersen O, & Kruse M. (2020). Post-hospital medical respite care for homeless people in Denmark: A randomized controlled trial and cost-utility analysis. *BMC Health Services Research*, 20, 508–508.
- Brown M M, Jason L A, Malone D K, Srebnik D, & Sylla L. (2016). Housing first as an effective model for community stabilization among vulnerable individuals with chronic and nonchronic homelessness histories. *Journal of Community Psychology*, 44(3), 384–390. <https://doi.org/10.1002/jcop.21763>
- Brown M, Rowe M, Cunningham A, & Ponce A N. (2018). Evaluation of a Comprehensive SAMHSA Service Program for Individuals Experiencing Chronic Homelessness. *Journal of Behavioral Health Services & Research*, 45, 605–613. <https://doi.org/10.1007/s11414-018-9589-8>
- Brown R T, Miao Y, Mitchell S L, Bharel M, Patel M, Ard K L, Grande L J, Blazey-Martin D, Floru D, & Steinman M A. (2015). Health outcomes of obtaining housing among older homeless adults. *American Journal of Public Health*, 105(7), 1482–1488. <https://doi.org/10.2105/AJPH.2014.302539>
- Brown S & Wilderson D. (2010). Homelessness prevention for former foster youth: Utilization of transitional housing programs. *Children and Youth Services Review*, 32(10), 1464–1472. <https://doi.org/10.1016/j.childyouth.2010.07.002>
- Buchanan D, Doblin B, Sai T, & Garcia P. (2006). The Effects of Respite Care for Homeless Patients: A Cohort Study. *American Journal of Public Health*, 96(7), 1278–1281. <https://doi.org/10.2105/AJPH.2005.067850>
- Buchanan D, Kee R, Sadowski L S, & Garcia D. (2009). The health impact of supportive housing for HIV-positive homeless patients: A randomized controlled trial. *Am J Public Health*, 99(S3), S675–S680. <https://doi.org/10.2105/AJPH.2008.137810>
- Buenaventura M. (2018). Treatment Not Custody: Process and Impact Evaluation of the Santa Monica Homeless Community Court. <https://doi.org/10.7249/RGSD418>
- Burke A, Hughes R, Jones A & Ames S. (2018). “Mobile Me”: An evaluation of a sport intervention in sheltered housing and care homes. *Journal of Physical Activity & Health*, 15, S81–S81. <https://www.activenorfolk.org/uploads/mobile-me-final-report.pdf>
- Burnam M A, Morton S C, McGlynn E A, Petersen L P, Stecher B M, Hayes C, & Vaccaro J V. (1996). An experimental evaluation of residential and nonresidential treatment for dually diagnosed homeless adults. *Journal of Addictive Diseases*, 14(4), 111–134.
- Burt M R. (2007). Evaluation of LA’s HOPE: Ending Chronic Homelessness through Employment and Housing Final Report. Urban Institute. urban.org/sites/default/files/publication/31556/411631-Evaluation-of-LA-s-HOPE.PDF

Burt M R. (2012). Impact of Housing and Work Supports on Outcomes for Chronically Homeless Adults With Mental Illness: LA's HOPE. *Psychiatric Services*, 63, 209–215. <https://doi.org/10.1176/appi.ps.201100100>

Byrne T, Nelson R E, Tsai J, & Huang M. (2021). Rapid rehousing for persons experiencing homelessness: A systematic review of the evidence. *Housing Studies*, 1–27. <https://doi.org/10.1080/02673037.2021.1900547>

Calsyn R J, Morse G A, Klinkenberg W D, Trusty M L, & Allen G. (1998). The Impact of Assertive Community Treatment on the Social Relationships of People Who Are Homeless and Mentally Ill. *Community Mental Health Journal*, 34(6), 579–593.

Calvo F & Carbonell X. (2018). Using Facebook for Improving the Psychological Well-Being of Individuals Experiencing Homelessness: Experimental and Longitudinal Study. *JMIR Mental Health*, 5, e59.

Campbell D J, Campbell R B, Ziegler C, McBrien K A, Hwang S W, & Booth G L. (2019). Interventions for improved diabetes control and self-management among those experiencing homelessness: Protocol for a mixed methods scoping review. *Systematic Reviews*, 8, 100. <https://doi.org/10.1186/s13643-019-1020-x>

Carpenter V L, Hertzberg J S, Kirby A C, Calhoun P S, Moore S D, Dennis M F, Dennis P A, Dedert E A, Hair L P, & Beckham J C. (2015). Multi-component smoking cessation treatment including mobile contingency management for smoking cessation in homeless veteran smokers. *The Journal of Clinical Psychiatry*, 76(7), 959. <https://doi.org/10.4088/JCP.14m09053>

Castillo E G, Shaner R, Tang L, Chung B, Jones F, Whittington Y, Miranda J, & Wells K B. (2018). Improving Depression Care for Adults With Serious Mental Illness in Underresourced Areas: Community Coalitions Versus Technical Support. *Psychiatric Services*, 69, 195–203. <https://doi.org/10.1176/appi.ps.201600514>

Centre for Homelessness Impact. (2021). Improving access to health and social care services for individuals experiencing or at risk of experiencing homelessness: A systematic review of quantitative and qualitative evidence. London: Centre for Homelessness Impact.

Chambers D, Cantrell A, Preston L, Peasgood T, Paisley S, & Clowes M. (2018, April). A systematic review of the evidence on housing interventions for 'housing-vulnerable' adults and its relationship to wellbeing. National Institute for Health Research. http://www.crd.york.ac.uk/prospetro/display_record.php?RecordID=58370&VersionID=1145609

Chan B, Edwards S T, Devoe M, Gil R, Mitchell M, Englander H, Nicolaidis C, Kansagara D, Saha S, & Korthuis P T. (2018). The SUMMIT ambulatory-ICU primary care model for medically and socially complex patients in an urban federally qualified health center: Study design and rationale. *Addiction Science & Clinical Practice*, 13, 27. <https://doi.org/10.1186/s13722-018-0128-y>

Chan B L. (2016). Ambulatory ICU Study for Medically and Socially Complex Patients. *Clinical Trials.Gov*. <https://clinicaltrials.gov/show/NCT03224858>

Chapleau A, Seroczynski A D, Meyers S, Lamb K, & Buchino S. (2012). The Effectiveness of a Consultation Model in Community Mental Health. *Occupational*

Therapy In Mental Health, 28(4), 379–395. <https://doi.org/10.1080/0164212X.2012.708609>

Chavez L J, Slesnick N, Holowacz E, Luthy E, Moore L, Ford J, & Kelleher K. (2020). Virtual Reality Meditation Among Youth Experiencing Homelessness: Pilot Randomized Controlled Trial of Feasibility. *JMIR Mental Health*, 7(9), e18244–e18244.

Cheng A L, Lin H, Kaspro W, & Rosenhec R A. (2007). Impact of Supported Housing on Clinical Outcomes Analysis of a Randomized Trial Using Multiple Imputation Technique. *The Journal of Nervous and Mental Disease*, 195(1), 83–88. <https://doi.org/10.1097/01.nmd.0000252313.49043.f2>

Chetty R, Hendren N, & Katz L F. (2016). The effects of exposure to better neighborhoods on children: New evidence from the Moving to Opportunity experiment. *American Economic Review*, 106(4), 855–902. <https://doi.org/10.1257/aer.20150572>

Chinman M J, Rosenheck R, Lam J A, & Davidson L. (2000). Comparing Consumer and Nonconsumer Provided Case Management Services for Homeless Persons with Serious Mental Illness. *The Journal of Nervous and Mental Disease*, 188(7), 446–53.

Chiu Y C J, Eissenstat S J, Misrok M, & Conyers L M. (2020). Foundations for Living: Evaluation of an Integrated Employment and Housing Program for People Living With HIV. *Rehabilitation Counseling Bulletin*. <https://doi.org/10.1177/0034355220962175>

Chu H. (2019, November). Test-and-treat for Influenza in Homeless Shelters. National Library of Medicine; Clinical Trials. Gov. <https://clinicaltrials.gov/ct2/show/NCT04141917>

Chum A, Wang R, Nisenbaum R, O'Campo P, Stergiopoulos V, & Hwang S. (2020). Effect of a Housing Intervention on Selected Cardiovascular Risk Factors Among Homeless Adults With Mental Illness: 24-Month Follow-Up of a Randomized Controlled Trial. *Journal of the American Heart Association*, 9(19), e016896–e016896. <https://doi.org/10.1161/JAHA.119.016896>

Chung T E, Gozdzik A, Lazgare P L I, To M J, Aubry T, Frankish J, Hwang S W, & Stergiopoulos V. (2017). Housing first for older homeless adults with mental illness: A subgroup analysis of the at home/Chez Soi randomized controlled trial. *International Journal of Geriatric Psychiatry*, 33(1), 85–95. <https://doi.org/10.1002/gps.4682>

Clark R E, Weinreb L, Flahive J M, & Seifert R W. (2018). Health Care Utilization and Expenditures of Homeless Family Members Before and After Emergency Housing. *American Journal of Public Health*, 108, 808–814. <https://doi.org/10.2105/ajph.2018.304370>

Clarke G N, Herinckx H A, Kinney R F, Paulson R I, Cutler D L, Lewis K, & Oxman E. (2000). Psychiatric hospitalizations, arrests, emergency room visits, and homelessness of clients with serious and persistent mental illness: Findings from a randomized trial of two ACT programs vs. Usual care. *Mental Health Services Research*, 2(3), 155–164.

Clifasefi S L & Collins S E. (2019). The life-enhancing alcohol-management program: Results from a 6-month nonrandomized controlled pilot study assessing a community based participatory research program in housing first. *Journal of Community Psychology*, 48, 763–776. <https://doi.org/10.1002/jcop.22291>

Coldwell C M & Bender W S. (2007). The effectiveness of assertive community treatment for homeless populations with severe mental illness: A meta-analysis. *American Journal of Psychiatry*, 164, 393–399. <https://doi.org/10.1176/appi.ajp.164.3.393>

Collins C C, Fischer R, Crampton D, Lalich N, Liu C, Chan T, & Bai R. (2020). Housing instability and child welfare: Examining the delivery of innovative services in the context of a randomized controlled trial. *Children and Youth Services Review*, 108, 104578–104578. <https://doi.org/10.1016/j.childyouth.2019.104578>

Collins J M, Onwubiko U, & Holland D P. (2019). QuantiFERON-TB Gold Versus Tuberculin Screening and Care Retention Among Persons Experiencing Homelessness: Georgia, 2015–2017. *American Journal of Public Health*, 109, 1028–1033. <https://doi.org/10.2105/AJPH.2019.305069>

Collins S E, Saxon A J, Taylor E M, Mayberry N, Merrill J O, Hoffmann G E, Clifasefi S L, Ries R K, & Duncan M H. (2021). Combining behavioral harm-reduction treatment and extended-release naltrexone for people experiencing homelessness and alcohol use disorder in the USA: a randomised clinical trial. *The Lancet. Psychiatry*, 8(4), 287–300. [https://doi.org/10.1016/S2215-0366\(20\)30489-2](https://doi.org/10.1016/S2215-0366(20)30489-2)

Collins S E, Clifasefi S L, Nelson L A, Stanton J, Goldstein S C, Taylor E M, Hoffmann G, King V L, Hatsukami A S, Cunningham Z L, & Taylor E. (2018). Randomized controlled trial of harm reduction treatment for alcohol (HART-A) for people experiencing homelessness and alcohol use disorder. *Alcoholism-Clinical and Experimental Research*, 42, 199A-199A. <https://doi.org/10.1016/j.drugpo.2019.01.002>

Collins S E, Saxon A J, Duncan M H, Smart B F, Merrill J O, Malone D K, Jackson T R, Clifasefi S L, Joesch J, & Ries R K. (2014). Harm reduction with pharmacotherapy for homeless people with alcohol dependence: Protocol for a randomized controlled trial. *Contemporary Clinical Trials*, 38, 221–234. <https://doi.org/10.1016/j.cct.2014.05.008>

Collins S E, Suprasert B, Doerr S A M, Gliane J, Song C, Orfaly V E, Moodliar R, Taylor E M, Hoffmann G, & Goldstein S C. (2021). Jail and Emergency Department Utilization in the Context of Harm Reduction Treatment for People Experiencing Homelessness and Alcohol Use Disorder. *Journal of Urban Health-Bulletin of the New York Academy of Medicine*, 98, 83–90. <https://doi.org/10.1007/s11524-020-00452-8>

Conrad K J, Hultman C I, Pope A R, Lyons J S, Baxter W C, Daghestani A N, Lisiecki Jr JP, Elbaum P L, McCarthy Jr M, & Manheim L M. (1998). Case Managed Residential Care for Homeless Addicted Veterans. *Medical Care*, 36(1), 40–53. <https://doi.org/10.1097/00005650-199801000-00006>

Constance J & Lusher J M. (2020). Diabetes management interventions for homeless adults: A systematic review. *International Journal of Public Health, No-Specified*.

Conway K, Studebaker S, Richardson S, & Severin K. (2020). Interprofessional collaboration and housing resource groups increase access to care for homeless veterans. *Journal of Interprofessional Education and Practice*, 22. <https://doi.org/10.1016/j.xjep.2020.100401>

Cooley S J, Quinton M L, Holland M J, Parry B J, & Cumming J. (2019). The experiences of homeless youth when using strengths profiling to identify their character strengths. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.02036>

Coren E, Hossain R, Pardo J P, Veras M M, Chakraborty K, Harris H, & Martin A J. (2015). Interventions for promoting reintegration and reducing harmful behaviour and lifestyles in street-connected children and young people (Project record). *Health Technology Assessment Database*, 8(4), 1140–1272. <https://doi.org/10.1002/ebch.1923>

Corinth K. (2017). The impact of permanent supportive housing on homeless populations. *Journal of Housing Economics*, 35, 69–84. <https://doi.org/10.1016/j.jhe.2017.01.006>

Cornes M, Aldridge R, Byng R, Clark M, Foster G, Fuller J, Hayward A, Hewett N, Kilmister A, Manthorpe J, Neale J, Tinelli M, & Whiteford M. (2018). Improving Hospital Discharge Arrangements for People who are Homeless: The Role of Specialist Integrated Care. *International Journal of Integrated Care (IJIC)*, 18, 1–2. <https://doi.org/10.5334/ijic.s2018>

Cox G B, Walker R D, Freng S A, Short B A, Meijer L, & Gilchrist L. (1998). Outcome of a Controlled Trial of the Effectiveness of Intensive Case Management for Chronic Public Inebriates. *Journal of Studies on Alcohol*, 59(5), 523–532. <https://doi.org/10.15288/jsa.1998.59.523>

Cox S. (2018). Exploring the use and uptake of e-cigarettes for homeless smokers. <http://www.who.int/trialssearch/Trial2.aspx?TrialID=ISRCTN14140672>. <https://www.cochranelibrary.com/central/doi/10.1002/central/CN-01949373/full>

Craig T K, Garety P, Power P, Rahaman N, Colbert S, Fornells-Ambrojo M, & Dunn G. (2004). The Lambeth Early Onset (LEO) Team: Randomised controlled trial of the effectiveness of specialised care for early psychosis. *BMJ*, 329, 1067. <https://doi.org/10.1136/bmj.38246.594873.7C>

Crisanti A S, Duran D, Greene RN, Reno J, Luna-Anderson C, & Altschul DB. (2017). A longitudinal analysis of peer-delivered permanent supportive housing: Impact of housing on mental and overall health in an ethnically diverse population. *Psychological Services*, 14(2), 141–141.

Cross R L, White J, Engelsher J, & O'Connor S S. (2018). Implementation of Rocking Chair Therapy for Veterans in Residential Substance Use Disorder Treatment. *Journal of the American Psychiatric Nurses Association*, 24, 190–198. <https://doi.org/10.1177/1078390317746726>

Cruwys T, Dingle G A, Hornsey M J, Jetten J, Oei P, & Walter Z C. (2014). Social isolation schema responds to positive social experiences: Longitudinal evidence from vulnerable populations. *British Journal of Clinical Psychology*, 53(3), 265–280. <https://doi.org/10.1111/bjc.12042/abstract>

- Cunningham M, Burt MR, Biess J, & Emam D. (2013). Veterans Homelessness Prevention Demonstration Evaluation: Final report. <https://www.huduser.gov/portal/sites/default/files/pdf/veterans-homelessness-prevention-report.pdf>
- Cunningham M, Gillespie S, & Anderson J. (2015). Rapid re-housing: What the research says (Washington, DC: The Urban Institute). Urban Institute. <http://www.urban.org/sites/default/files/publication/54201/2000265-Rapid-Re-housing-What-the-Research-Says.pdf?l=ri>
- Currie L B, Moniruzzaman A, Patterson M L, & Somers J M. (2014). At home/chez soi project: Vancouver site final report (Mental Health Commission of Canada). <https://acdresearch.med.ubc.ca/projects/at-homechez-soi-study/>
- Currie L B, Patterson M L, Moniruzzaman A, McCandless L C, & Somers J M. (2018). Continuity of Care among People Experiencing Homelessness and Mental Illness: Does Community Follow-up Reduce Rehospitalization? *Health Services Research*, 53, 3400–3415. <https://doi.org/10.1111/1475-6773.12992>
- Dalton-Locke C, McPherson P, Killaspy H, & Marston L. (2021). The Effectiveness of Mental Health Rehabilitation Services: A Systematic Review and Narrative Synthesis. *Frontiers in Psychiatry*, 11. <https://doi.org/10.3389/fpsy.2020.607933>
- Danielle V, Brown M, Adenuga P, Scartozzi A, & Watson D P. (2018). Permanent Housing Placement and Reentry to Services Among Family Recipients of Homelessness Prevention and Rapid Re-Housing Program (HPRP) Assistance. *The Journal of Primary Prevention*, 39(6), 591–609. <https://doi.org/10.1007/s10935-018-0529-4>
- Dasinger L K & Speiglman R. (2007). Homelessness Prevention: The Effect of a Shallow Rent Subsidy Program on Housing Outcomes among People with HIV or AIDS. *AIDS and Behavior*, 11(2), 128–139. <https://doi.org/10.1007/s10461-007-9250-7>
- Dawkins L, Bauld L, Ford A, Robson D, Hajek P, Parrott S, Best C, Li J, Tyler A, Uny I, & Cox S. (2020). A cluster feasibility trial to explore the uptake and use of e-cigarettes versus usual care offered to smokers attending homeless centres in Great Britain. *PloS One*, 15(10), e0240968–e0240968.
- Deborah D, Margaret L, William CH, & Kristin LS. (2011). Helping adults who are homeless gain disability benefits: The SSI/SSDI Outreach, Access, and Recovery (SOAR) program. *Psychiatric Services*, 62(11), 1373–1376. https://doi.org/10.1176/ps.62.11.pss6211_1373
- Department for Communities and Local Government. (2017). The impact evaluation of the London Homelessness Social Impact Bond. Department for Communities and Local Government. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/658881/SIB_Impact_evaluation_report.pdf
- Detlaff A J, McCoy H, Holzman J, Fulambarker A, Repp A, & Ibrahima A. (2017). Outcomes of interventions for youth experiencing homelessness in stable housing, permanent connections, education, employment, and well-being: A systematic review. *Jane Addams College of Social Work, University of Illinois at Chicago*. <https://www.340blueprintproject.com/wp-content/uploads/2017/09/>

Systematic-Review-of-Interventions_10.pdf

- Dionisi T Di, Sario G, Tarli C, Antonelli M, Sestito L, D’Addio S, Tosoni A, Ferrarese D, Iasilli G, Vassallo G A, Mirijello A, Gialloreti L E, Di Giuda D, Gasbarrini A, Addolorato G, & Mosoni C. (2020). Make mission impossible feasible: The experience of a multidisciplinary team providing treatment for alcohol use disorder to homeless individuals. *Alcohol and Alcoholism*, 55, 547–553. <https://doi.org/10.1093/alcalc/agaa052>
- Donkoh C, Underhill K, & Montgomery P. (2006). Independent living programmes for improving outcomes for young people leaving the care system. *Cochrane Database of Systematic Reviews*, 3. <https://doi.org/10.1002/14651858.CD005558.pub2>
- Drake RE, McHugo G J, Clark R E, Teague G B, Xie H, Miles K, & Ackerson T H. (1998). Assertive community treatment for patients with co-occurring severe mental illness and substance use disorder: A clinical trial. *American Journal of Orthopsychiatry*, 68(2), 201–215.
- Dunn R J. (2019). Military veteran transition into employment and civilian engagement: A walking with the wounded evaluation [King’s College London]. <https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.797782>
- Duwe G. (2013a). A randomized experiment of a prisoner reentry program: Updated results from an evaluation of the Minnesota Comprehensive Offender Reentry Plan (MCORP). *Justice Quarterly* : JQ, 29, 347.
- Duwe G. (2013b). An Evaluation of the Minnesota Comprehensive Offender Reentry Plan (MCORP) Pilot Project: Final Report. Minnesota Department of Corrections. <https://www.leg.state.mn.us/docs/2014/other/140531.pdf>
- Edalati H Schutz C G, Somers J M, Distasio J, Aubry T, Crocker A G, & Nicholls T L. (2020). Examining the Relationships between Cumulative Childhood Adversity and the Risk of Criminal Justice Involvement and Victimization among Homeless Adults with Mental Illnesses after Receiving Housing First Intervention. *PubMed*, 65(6), 409–417. <https://doi.org/10.1177/0706743720902616>
- Edie A H & Carmody K A. (2018, May). Collaboration to Promote Early Childhood Well Being in Families Experiencing Homelessness. *Clinical Trials. Gov; National Library of Medicine*. <https://clinicaltrials.gov/ct2/show/NCT03530137>
- Elbogen E B, Hamer R M, Swanson J W, and Swartz M S. (2016). Improving Money Management Skills for Veterans With Psychiatric Disabilities. *Psychiatric Services*, 67(10), 1142-1145.
- Ellison M L, Yuan L H, Mitchell-Miland C, Glickman M E, McCarthy S, Smelson D, Schultz M R, Chinman M, & Schutt R K. (2020). Impact of Peer Specialist Services on Residential Stability and Behavioral Health Status Among Formerly Homeless Veterans With Cooccurring Mental Health and Substance Use Conditions. *Medical Care*, 58, 307–313. <https://doi.org/10.1097/MLR.0000000000001284>
- Essali A, Tarboush M, & Awad M. (2012). Specialist interventions for homeless people with severe mental illness (Protocol). *The Cochrane Library*, 12. <https://doi.org/10.1002/14651858.CD010170>

Essock S M, Mueser K T, Drake R E, Covell N H, McHugo G J, Frisman L K, Kontos N J, Jackson C T, Townsend F, & Swain K. (2006). Comparison of ACT and Standard Case Management for Delivering Integrated Treatment for Co-occurring Disorders. *Psychiatric Services*, 57(2), 185-96. <https://doi.org/10.1176/appi.ps.57.2.185>

Evans WN, Sullivan JX, & Wallskog M. (2016). The impact of homelessness prevention programs on homelessness. *Science*, 353(6300), 694–699.

Felton C J, Stastny P, Shern D L, Blanch A, Donahue S A, Knight E, & Brown C. (1995). Consumers as peer specialists on intensive case management teams: Impact on client outcomes. *Psychiatric Services*, 46(10), 1037–1044. <https://doi.org/10.1176/ps.46.10.1037>

Felton J W, Ingram K M, Doran K, Yi R, & Collado A. (2019). Improvement of Working Memory is a Mechanism for Reductions in Delay Discounting Among Mid-Age Individuals in an Urban Medically Underserved Area. *Annals of Behavioral Medicine*, 53, 988–998. <https://doi.org/10.1093/abm/kaz010>

Ferguson K M. (2018). Nonvocational outcomes from a randomized controlled trial of two employment interventions for homeless youth. *Research on Social Work Practice*, 28(5), 603–618.

Ficke RC & Berkowitz SG. (2000). Evaluation of the HOPE for Elderly Independence Demonstration Program and the New Congregate Housing Services Program. <https://www.huduser.gov/portal/Publications/pdf/HUD%20-%2011053.pdf>

Finkel M, Henry M, Matthews N, Spellman B, & Culhane D. (2016). Rapid Re-Housing for Homeless Families Demonstration Programs Evaluation Report Part II: Demonstration Findings—Outcomes Evaluation. <https://www.huduser.gov/portal/sites/default/files/pdf/RRHD-PartII-Outcomes.pdf>

Fletcher J B & Reback C J. (2013). Antisocial personality disorder predicts methamphetamine treatment outcomes in homeless, substance-dependent men who have sex with men. *Journal of Substance Abuse Treatment*, 45, 266–272. <https://doi.org/10.1016/j.jsat.2013.03.002>

Forchuk C, Kingston-MacClure S, Van B M, Smith C, Csiernik R, Hoch J S, & Jensen E. (2011). An intervention to prevent homelessness among individuals discharged from psychiatric wards to shelters and “no fixed address.” *Homelessness, Housing, and Mental Health: Finding Truths, Creating Change*, 179–179.

Formosa EA, Kishimoto V, Orchanian-Cheff A, & Hayman K. (2021). Emergency department interventions for homelessness: A systematic review. *Canadian Journal of Emergency Medicine*, 23(1), 111–122. <https://doi.org/10.1007/s43678-020-00008-4>

Fowler P J & Chavira D. (2014). Family Unification Program: Housing Services for Homeless Child Welfare-Involved Families. *Housing Policy Debate*, 24(4), 802. <https://doi.org/10.1080/10511482.2014.881902>

Fraser E R, Jett J, Beck R, Oluwoye O, Kriegel L S, Alcover K C, McPherson S, Cabassa L J, Javors M, McDonell M G, & Hill-Kapturczak N. (2021). Mixed-methods trial of a phosphatidylethanol-based contingency management intervention to initiate and maintain alcohol abstinence in formerly homeless

adults with alcohol use disorders. *Contemporary Clinical Trials Communications*, 22. <https://doi.org/10.1016/j.conctc.2021.100757>

Frisman L K, Mueser K T, Covell N H, Lin H J, Crocker A, Drake R E, & Essock S M. (2009). Use of integrated dual disorder treatment via assertive community treatment versus clinical case management for persons with co-occurring disorders and antisocial personality disorder. *J Nerv Ment Dis*, 197(11), 822–828. <https://doi.org/10.1097/NMD.0b013e3181beac52>

Garety P A, Craig T K, Dunn G, Fornells-Ambrojo M, Colbert S, Rahaman N, Reed J, & Power P. (2006). Specialised care for early psychosis: Symptoms, social functioning and patient satisfaction: Randomised controlled trial. *British Journal Of Psychiatry*, 188(1), 37–45.

Gerod H, Sarah W, Hannah G, & Sungwoo L. (2018). Housing versus treatment first for supportive housing participants with substance use disorders: A comparison of housing and public service use outcomes. *Substance Abuse*, 41(1), 70–76. <https://doi.org/10.1080/08897077.2018.1449049>

Gesmond T. (2017). The impact of Housing First on financial poverty and the take-up of income support: Evidence from a French randomized controlled trial. *Paris School of Economics*.

Getty C A, Morande A, Lynskey M, Weaver T, & Metrebian N. (2019). Mobile telephone-delivered contingency management interventions promoting behaviour change in individuals with substance use disorders: A meta-analysis: (Alcoholism and Drug Addiction). *Addiction*, 114, 1915–1925. <https://doi.org/10.1111/add.14725>

Glendening Z S, Brown S R, Cleveland K C, Cunningham M K, Pergamit M R, & Shinn M. (2020). Supportive housing for precariously housed families in the child welfare system: Who benefits most? *ResearchGate*, 116, 105206–105206. <https://doi.org/10.1016/j.childyouth.2020.105206>

Goeman D, Howard J, & Ogrin R. (2019). Implementation and refinement of a community health nurse model of support for people experiencing homelessness in Australia: A collaborative approach. *BMJ Open*, 9, e030982.

Goering P, Veldhuizen S, Watson A, Adair C, Kopp B, Latimer E, & Aubry T. (2014). National at home/chez soi final report (Calgary, AB: Mental Health Commission of Canada). https://www.mentalhealthcommission.ca/sites/default/files/mhcc_at_home_report_national_cross-site_eng_2_0.pdf

Goering P, Wasylenki D, Lindsay S, Lemire D, & Rhodes A. (1997). Process and outcome in a hostel outreach program for homeless clients with severe mental illness. *PubMed*, 67(4), 607–617. <https://doi.org/10.1037/h0080258>

Goldfinger S M, Schutt R K, Tolomiczenko G S, Seidman L, Penk W E, Turner W, & Caplan B. (1999). Housing placement and subsequent days homeless among formerly homeless adults with mental illness. *Psychiatric Services*, 50(5), 674–679. <https://doi.org/10.1176/ps.50.5.674>

Golembiewski E H. (2020). Health care and policy interventions to improve the health of patients experiencing homelessness. *Dissertation Abstracts*

International: Section B: The Sciences and Engineering, 81, No-Specified.

Goodman S, Messeri P, & O'Flaherty B. (2016). Homelessness prevention in New York City: On average, it works. *Journal of Housing Economics*, 31, 14–34. <https://doi.org/10.1016/j.jhe.2015.12.001>

Grace M & Gill P R. (2014). Improving Outcomes for Unemployed and Homeless Young People: Findings of the YP Clinical Controlled Trial of Joined Up Case Management. *Australian Social Work*, 67(3), 419–437. <https://doi.org/10.1080/0312407X.2014.911926>

Grajo L C, Gelb H, Langan K, Marx K, Paciello D, Santana C, Sg, urra A, Teng K, & Gutman S A. (2019). Effectiveness of a functional literacy program for sheltered homeless adults. *OTJR: Occupation, Participation and Health*, 40(1), 17–26. <https://doi.org/10.1177/1539449219850126>

Grajo L C, Gutman S A, Gelb H, Langan K, Marx K, Paciello D, Santana C, Sgandurra A, & Teng K. (2018, September). Effectiveness of a Functional Literacy Program for Formerly Homeless Adults. *National Library of Medicine; Clinical Trials. Gov.* <https://clinicaltrials.gov/ct2/show/NCT03580915>

Greenwood R M, Schaefer-McDaniel N J, Winkel G, & Tsemberis S J. (2005). Decreasing Psychiatric Symptoms by Increasing Choice in Services for Adults with Histories of Homelessness. *American Journal of Community Psychology*, 36(3–4), 223–238.

Greenwood RM, Manning RM, O'Shaughnessy BR, Cross O, Vargas-Moniz MJ, Auquier P, Santinello M, Wolf JR, Boksaczanin A, Bernad R, & Källmén H. (2020). Comparison of Housing First and Traditional Homeless Service Users in Eight European Countries: Protocol for a Mixed Methods, Multi-Site Study. *JMIR Research Protocols*, 9(2). <https://academic.microsoft.com/paper/2981673849>

Greiner D J, Pattanayak C W, & Hennessy J. (2012). The limits of unbundled legal assistance: A randomized study in a Massachusetts district court and prospects for the future. *Harvard Law Review*, 126, 901.

Greiner D J, Pattanayak C W, & Hennessy J P. (2012). How effective are limited legal assistance programs? A randomized experiment in a Massachusetts housing court. A Randomized Experiment in a Massachusetts Housing Court (September 1, 2012). <https://homelinemn.org/wp-content/uploads/1-Greiner-Housing-Court-Article.pdf>

Grelotti D J, Hammer GP, Dilley JW, Karasic DH, Sorensen JL, Bangsberg DR, & Tsai AC. (2017). Does substance use compromise depression treatment in persons with HIV? Findings from a randomized controlled trial. *PMC*, 29(3), 273–279. <https://doi.org/10.1080/09540121.2016.1226479>

GResnick S & Rosenheck R A. (2008). Integrating peer-provided services: A quasi-experimental study of recovery orientation, confidence, and empowerment. *Psychiatric Services*, 59(11), 1307–1314.

Gubits D. (2018). Understanding Rapid Re-housing: Systematic Review of Rapid Re-housing Outcomes Literature. <https://www.huduser.gov/portal/sites/default/files/pdf/Systematic-Review-of-Rapid-Re-housing.pdf>

Gubits D, Shinn M, Bell S, Wood M, Dastrup S R, Solari C, Brown S, Brown S, Dunton L, Lin W, & McInnis D. (2015). Family options study: Short-term impacts of housing and services interventions for homeless families (US Department of Housing and Urban Development, Office of Policy Development and Research, p. 308). https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3055272

Gubits D, Shinn M, Wood M, Bell S, Dastrup S, Solar D C, Brown R S, McInnis D, McCall T, & Katte U. (2016). The Family Options Study. <https://www.huduser.gov/portal/sites/default/files/pdf/Family-Options-Study-Full-Report.pdf>

Gubits D, Shinn M, Wood M, Bell S, Dastrup S, Solari C, Brown S, McInnis D, McCall T, & Kattel U. (2016). Family options study: 3-year impacts of housing and services interventions for homeless families (Available at SSRN 3055295, p. 275). https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3055295

Gubits D, Shinn M, Wood M, Bell S, Dastrup S, Solari C, Brown S, McInnis D, McCall T, & Kattel U. (2018). What interventions work best for families who experience homelessness? Impact estimates from the family options study. *Journal of Policy Analysis and Management*, 37(4), 835–866. <https://doi.org/10.1002/pam.22071>

Gulcur L, Stefancic A, Shinn M, Tsemberis S, & Fischer S N. (2003). Housing, hospitalization, and cost outcomes for homeless individuals with psychiatric disabilities participating in continuum of care and housing first programmes. *Journal of Community & Applied Social Psychology*, 13(2), 171–186. <https://doi.org/10.1002/casp.723>

Guo X, Slesnick N, & Feng X. (2014). Reductions in depressive symptoms among substance-abusing runaway adolescents and their primary caretakers: A randomized clinical trial. *Journal of Family Psychology*, 28(1), 98–105.

Gutman S A, Raphael-Greenfield E I, Berg J, Agnese A, Gross S, Ashmi S, Ogunye O, Shin C, & Weiss D. (2018). Feasibility and Satisfaction of an Apartment Living Program for Homeless Adults With Mental Illness and Substance Use Disorder. *Psychiatry*, 81, 228–239. <https://doi.org/10.1080/00332747.2018.1502555>

Hadenfeldt C, Knezevich E, & Black S. (2019). Diabetes Risk Assessment, A1C Measurement, and Goal Achievement of Standards of Care in Adults Experiencing Homelessness. *Diabetes Educator*, 45, 295–301. <https://doi.org/10.1177/0145721719843680>

Hamilton K, Tolfree R, & Mytton J. (2018). A systematic review of active case-finding strategies for tuberculosis in homeless populations. *International Journal of Tuberculosis & Lung Disease*, 22, 1135–1144. <https://doi.org/10.5588/ijtld.17.0784>

Hanratty J, Miller S, Hamilton J, Keenan C, and Coughlan C. 2020. Discharge programmes for individuals experiencing or at risk of experiencing homelessness: A systematic review. London: Centre for Homelessness Impact.

Hanratty J, Miller S, Keenan C, Cowman J, Hamilton J, & Mackie P. (2020). Protocol: Discharge programmes for individuals experiencing, or at risk of experiencing, homelessness: A systematic review. *Campbell Systematic Reviews*, 16(3), e1109.

Hanratty M. (2011). Impacts of Heading Home Hennepin's Housing First programs for long-term homeless adults. *Housing Policy Debate*, 21(3), 405–419. <https://doi.org/10.1080/10511482.2011.594076>

Harpaz-Rotem I, Rosenheck R A, & Desai R. (2011). Residential treatment for homeless female veterans with psychiatric and substance use disorders: Effect on 1-year clinical outcomes. *Journal of Rehabilitation Research & Development*, 48(8), 891–899. <https://doi.org/10.1682/JRRD.2010.10.0195>

Hatcher S. (2019, February). Narrative Exposure Therapy Study for PTSD Among the Homeless Population. National Library of Medicine; Clinical Trials. Gov. <https://clinicaltrials.gov/ct2/show/NCT03781297>

Hawk M, Maulsby C, Enobun B, & Kinsky S. (2019). HIV Treatment Cascade by Housing Status at Enrollment: Results from a Retention in Care Cohort. *AIDS & Behavior*, 23, 765–775. <https://doi.org/10.1007/s10461-018-2295-y>

Heerde J A, Hemphill S A, & Scholes-Balog K E. (2018). The impact of transitional programmes on post-transition outcomes for youth leaving out-of-home care: A meta-analysis. *Health & Social Care in the Community*, 26, e15–e30. <https://doi.org/10.1111/hsc.12348>

Helfrich C A, Chan D V, & Sabol P. (2011). Cognitive Predictors of Life Skill Intervention Outcomes for Adults With Mental Illness at Risk for Homelessness. *The American Journal of Occupational Therapy*, 65(3), 277–286. <https://doi.org/10.5014/ajot.2011.001321>

Hennein L & Campomanes A G D. (2021). Association of a Health Coaching and Transportation Assistance Intervention at a Free Ophthalmology Homeless Shelter Clinic With Follow-up Rates. *JAMA Ophthalmology*, 139(3), 311–316. <https://doi.org/10.1001/jamaophthalmol.2020.6373>

Herbers J E, Cutuli JJ, Fugo PB, Nordeen ER, & Hartman MJ. (2020). Promoting parent–infant responsiveness in families experiencing homelessness. *Infant Mental Health Journal*, 41(6), 811–820. <https://doi.org/10.1002/imhj.21868>

Herman D B, Conover S, Gorroochurn P, Hinterland K, Hoepner L, & Susser E S. (2011a). A Randomized Trial of Critical Time Intervention to Prevent Homelessness in Persons with Severe Mental Illness following Institutional Discharge. *Psychiatric Services*, 62(7), 713–719. https://doi.org/10.1176/ps.62.7.pss6207_0713

Herman D B, Conover S, Gorroochurn P, Hinterland K, Hoepner L, & Susser E S. (2011b). Randomized trial of critical time intervention to prevent homelessness after hospital discharge. *Psychiatric Services*, 62(7), 713–719.

Heuvelings C C, Greve P F, Vries S G, Visser B J, Bélard S, Janssen S, Cremers A L, Spijker R, Shaw E, Hill R A, & Zumla A. (2018). Effectiveness of service models and organisational structures supporting tuberculosis identification and management in hard-to-reach populations in countries of low and medium tuberculosis incidence: A systematic review. *BMJ Open*, 8, e019642. <https://doi.org/10.1136/bmjopen-2017-019642>

Hickman P, Kemp PA, Reeve K, & Wilson I. (2017). The impact of the direct

payment of housing benefit: Evidence from Great Britain. *Housing Studies*, 32(8), 1105–1126. <https://doi.org/10.1080/02673037.2017.1301401>

Holtgrave D R, Wolitski R J, Pals S L, Aidala A, Kidder D P, Vos D, Royal S, Iruka N, Briddell K, Stall R, & Bendixen A V. (2013). Cost-Utility Analysis of the Housing and Health Intervention for Homeless and Unstably Housed Person Living with HIV. *AIDS and Behavior*, 17(5), 1626–1631. <https://doi.org/10.1007/s10461-012-0204-3>

Holubowich C & Betsch E J. (2016). Interventions to improve access to primary care for people who are homeless: A systematic review (Structured abstract). *Health Technology Assessment Database*, 16(9), 1–50.

Hopkin G D. (2016). The Impact of the Critical Time Intervention for People with Severe Mental Illness in the Transition from Prison to the Community. https://kclpure.kcl.ac.uk/portal/files/83196371/2017_Hopkin_Gareth_1312060_ethesis.pdf

Hough J. (2020). Adopting a Critical Time Intervention model through Fulfilling Lives Newcastle Gateshead: An evaluation. <http://www.fulfillinglives-ng.org.uk/wp-content/uploads/2020/06/FLNG-CTI-Final-Evaluation.pdf>

Howard L, Flach C, Leese M, Byford S, Killaspy H, Cole L, Lawlor C, Betts J, Sharac J, Cutting P, & McNicholas S. (2011). Effectiveness and cost-effectiveness of admissions to women's crisis houses compared with traditional psychiatric wards: Pilot patient-preference randomised controlled trial. *The British Journal of Psychiatry*, S01(S06_1_TP), 32–40. <https://doi.org/10.1055/s-0031-1277763>

Hunter S B & Scherling A. (2019). Los Angeles County Office of Diversion and Reentry's Supportive Housing Program (Objective Analysis. Effective Solutions., p. 6). RAND. <https://doi.org/10.7249/RR3232>

Hunter S B, Scherling A, Felician M, Baxi S M, & Cefalu M. (2020). Breaking Barriers: A Rapid Rehousing and Employment Pilot Program for Adults on Probation in Los Angeles County (p. 85). RAND. <https://doi.org/10.7249/RR4316>

Hurlburt M S, Hough R L, & Wood P A. (1996). Effects of substance abuse on housing stability of homeless mentally ill persons in supported housing. *Psychiatric Services*, 24(3), 291–310. <https://doi.org/10.1176/ps.47.7.731>

Hurlburt M S, Wood P A, & Hough R L. (1996). Providing Independent Housing for the Homeless Mentally Ill. *Journal of Community Psychology*, 24(3), 291–310. [https://doi.org/10.1002/\(SICI\)1520-6629\(199607\)24:3<291::AID-JCOP8>3.0.CO;2-#](https://doi.org/10.1002/(SICI)1520-6629(199607)24:3<291::AID-JCOP8>3.0.CO;2-#)

Hwang S W, Gogosis E, Chambers C, Dunn J R, Hoch J S, & Aubry T. (2011). Health status, quality of life, residential stability, substance use, and health care utilization among adults applying to a supportive housing program. *Journal of Urban Health: Bulletin of the New York Academy of Medicine*, 88(6), 1076–1090. <https://doi.org/10.1007/s11524-011-9592-3>

Hwang S W, Stergiopoulos V, O'Campo P, & Gozdzik A. (2012). Ending homelessness among people with mental illness: The At Home/Chez Soi randomized trial of a Housing First intervention in Toronto. *BMC Public Health*,

12(1), 787. <https://doi.org/10.1186/1471-2458-12-787>

Hyun M, Noh D, & Bae S H. (2019). Systematic review and meta-analyses of randomized control trials of the effectiveness of psychosocial interventions for homeless adults. *Journal of Advanced Nursing*, 76(3), 773–786. <https://doi.org/10.1111/jan.14275>

Hyun M S, Chung H I C, & Lee Y J. (2005). The effect of cognitive–behavioral group therapy on the self-esteem, depression, and self-efficacy of runaway adolescents in a shelter in South Korea. *Applied Nursing Research*, 18(3), 160–166. <https://doi.org/10.1016/j.apnr.2004.07.006>

Ijadi-Maghsoodi R. (2020, February). Helping Families Pilot of a Family Resilience Program for Families Experiencing Homelessness and Parental Substance Use. National Library of Medicine; Clinical Trials. Gov. <https://clinicaltrials.gov/ct2/show/NCT04273126>

Ijaz S, Thorley H, Porter K, Fleming C, Jones T, Kesten J, Mamluk L, Richards A, Marques E M, & Savović J. (2018). Interventions for preventing or treating malnutrition in homeless problem-drinkers: A systematic review. *International Journal for Equity in Health*, 17(1), 16. <https://doi.org/10.1186/s12939-018-0722-3>

Jacob B A & Ludwig J. (2012). The Effects of Housing Assistance on Labor Supply: Evidence from a Voucher Lottery. *American Economic Review*, 102(1), 272–304. <https://doi.org/10.1257/aer.102.1.272>

Jadidzadeh A Dutton D J & Falvo N. (2020). Cost Savings of Housing First in a Non Experimental Setting. *Canadian Public Policy-Analyse de Politiques*, 46(1), 23–36. <https://doi.org/10.3138/cpp.2019-017>

Jarrett M, Thornicroft G, Forrester A, Harty M, Senior J, King C, Huckle S, Parrott J, Dunn G, & Shaw J. (2012). Continuity of care for recently released prisoners with mental illness: A pilot randomised controlled trial testing the feasibility of a Critical Time Intervention. *Epidemiology and Psychiatric Sciences*, 21(2), 187–193. <https://doi.org/10.1017/S2045796011000783>

Jennings Mayo-Wilson Coleman J, Timbo F, Ssewamala F M, Linnemayr S, Yi G T, Kang B A, Johnson M W, Yenokyan G, Dodge B, Glass N E, & L. (2020). Microenterprise Intervention to Reduce Sexual Risk Behaviors and Increase Employment and HIV Preventive Practices Among Economically-Vulnerable African-American Young Adults (EMERGE): A Feasibility Randomized Clinical Trial. *AIDS and Behavior*, 24, 3545–3561.

Jones A L, Thomas R, Hedayati D O, Saba S K, Conley J, & Gordon A J. (2018). Patient predictors and utilization of health services within a medical home for homeless persons. *Substance Abuse*, 39, 354–360. <https://doi.org/10.1080/08897077.2018.1437500>

Jones K, Colson P W, Holter M C, Lin S, Valencia E, Susser E, & Wyatt R J. (2003). Cost-effectiveness of critical time intervention to reduce homelessness among persons with mental illness. *Psychiatric Services*, 54(6), 884–890. <https://doi.org/10.1176/appi.ps.54.6.884>

Jonker I E, Sijbrandij M, Van Luijelaar M J, Cuijpers P, & Wolf J R. (2015). The

effectiveness of interventions during and after residence in women's shelters: A meta-analysis. *European Journal of Public Health*, 25(1), 15–19. <https://doi.org/10.1093/eurpub/cku092>

Kadoura W E. (2015). The brighter future for homeless families and their preschoolers' program in salt lake city, Utah [Department of Health Promotion and Education, University of Utah, 2014]. In *Dissertation Abstracts International Section A: Humanities and Social Sciences* (Vol. 75). <https://search.proquest.com/openview/1fa9ed283811ccb8de516a244364a5f3/1?pq-origsite=gscholar&cbl=18750&diss=y>

Kalousova L & Evangelist M. (2019). Rent assistance and health: Findings from Detroit. *Housing Studies*, 34(1), 111–141. <https://doi.org/10.1080/02673037.2018.1441977>

Karper L, Kaufmann M, Millspaugh G, Vega E, Stern G, Stern G, Ezrow DJ, Giansante S, & Lynch M. (2008). Coordination of care for homeless individuals with comorbid severe mental disorders and substance-related disorders. *Journal of Dual Diagnosis*, 4(2), 142–157. <https://doi.org/10.1080/15504260802066950>

Kashner T M, Rosenheck R, Campinell A B, Suris A, Crandall R, Garfield N J, Lapuc P, Pyrcz K, Soyka T, & Wicker A. (2002). Impact of work therapy on health status among homeless, substance-dependent veterans: A randomized controlled trial. *Archives of General Psychiatry*, 59(10), 938–945. <https://doi.org/10.1001/archpsyc.59.10.938>

Kaspro W J & Rosenheck R A. (2007). Outcomes of critical time intervention case management of homeless veterans after psychiatric hospitalization. *Psychiatric Services*, 58, 929–935. <https://doi.org/10.1176/ps.2007.58.7.929>

Kaspro W J, Rosenheck R A, Frisman L, & DiLella D. (2000). Referral and housing processes in a long-term supported housing program for homeless veterans. *Psychiatric Services*, 51(8), 1017–1023. <https://doi.org/10.1176/appi.ps.51.8.1017>

Keenan C, Miller S, Hanratty J, Pigott T D, Mackie P, Cowman J, Coughlan C, Hamilton J, & Fitzpatrick S. (2021). Accommodation-based interventions for individuals experiencing, or at risk of experiencing, homelessness. *Campbell Systematic Reviews*, 17(2), e1165–e1165. <https://doi.org/10.1002/cl2.1165>

Keenan C, Miller S, Hanratty J, Pigott T, Mackie P, Coughlan C, Hamilton J, Cowman J, & Fitzpatrick S. (2020). Protocol: Accommodation-based interventions for individuals experiencing, or at risk of experiencing, homelessness: A network meta-analysis. 16(3), e1103.

Keizur E M, Vavala G, Romero-Espinoza A, Ocasio M, Fournier J, Lee S J, Abdalian S E, Rotheram M J, Klausner J D, & Goldbeck C. (2020). Safety and Effectiveness of Same-Day Chlamydia trachomatis and Neisseria gonorrhoeae Screening and Treatment among Gay, Bisexual, Transgender, and Homeless Youth in Los Angeles, California, and New Orleans, Louisiana. *Sexually Transmitted Diseases*, 47(1), 19–23. <https://doi.org/10.1097/OLQ.0000000000001088>

Kendzor D E, Allicock M, Businelle M S, Sandon L F, Gabriel K P, & Frank S G. (2017). Evaluation of a shelter-based diet and physical activity intervention for

- homeless adults. *Journal of Physical Activity & Health*, 14, 88–97. <https://doi.org/10.1123/jpah.2016-0343>
- Kennedy D P, Hunter S B, Osilla K, Maksabedian E, Golinelli D, & Tucker J. (2016). A computer-assisted motivational social network intervention to reduce alcohol, drug and HIV risk behaviors among Housing First residents. *Addiction Science & Clinical Practice*, 11(1), 4. <https://doi.org/10.1186/s13722-016-0052-y>
- Kenny D A, Calsyn R J, Morse G A, Klinkenberg W D, Winter J P, & Trusty M L. (2004). Evaluation of treatment programs for persons with severe mental illness: Moderator and mediator effects. *Evaluation Review*, 28(4), 294–324. <https://doi.org/10.1177/0193841X04264701>
- Kerman N, Aubry T, Adair C E, Distasio J, Latimer E, Somers J, & Stergiopoulos V. (2020). Effectiveness of Housing First for Homeless Adults with Mental Illness Who Frequently Use Emergency Departments in a Multisite Randomized Controlled Trial. *Administration and Policy in Mental Health and Mental Health Services Research*, 47, 515–525.
- Kerman N, Sylvestre J, Aubry T, & Distasio J. (2018). The effects of housing stability on service use among homeless adults with mental illness in a randomized controlled trial of housing first. *BMC Health Services Research*, 18(1), 14. <https://doi.org/10.1186/s12913-018-3028-7>
- Kerrigan A J, Kaough J E, Wilson B L, Vaughn Wilson J, & Bostick R. (2004). Vocational Rehabilitation of Participants with Severe Substance Use Disorders in a VA Veterans Industries Program. *Substance Use & Misuse*, 39(13–14), 2513–2523. <https://doi.org/10.1081/JA-200034695>
- Kertesz S G, Larson M J, Horton N J, Winter M, Saitz R, & Samet J H. (2005). Homeless Chronicity and Health-Related Quality of Life Trajectories Among Adults With Addictions. *Medical Care*, 43(6), 574–585. <https://doi.org/10.1097/01.mlr.0000163652.91463.b4>
- Kertesz S G, Mullins A N, Schumacher J E, Wallace D, Kirk K, & Milby J B. (2007). Long-term housing and work outcomes among treated cocaine-dependent homeless persons. *The Journal of Behavioral Health Services & Research*, 34(1), 17–33.
- Kertesz S G, Posner M A, O’Connell J J, Swain S, Mullins A N, Shwartz M, & Ash A S. (2009). Post-hospital medical respite care and hospital readmission of homeless persons. *Journal of Prevention & Intervention in the Community*, 37, 129–142. <https://doi.org/10.1080/10852350902735734>
- Khan Z, Koehne S, & McCrone P. (2020). Impact on the use and cost of other services following intervention by an inpatient pathway homelessness team in an acute mental health hospital. *Journal of Mental Health (Abingdon, England)*. <https://doi.org/10.1080/09638237.2020.1755017>
- Kidd S. (2021, February). Examining the Effectiveness of a Critical Time Intervention to Stabilize Trajectories Out of Homelessness for Youth. <https://clinicaltrials.gov/ct2/show/NCT04755361>
- Kidd S A, Frederick T, Leon S, Wang W, Mushquash C, McKenzie K, & Vitopoulos N.

- (2020). Trialing the feasibility of a critical time intervention for youth transitioning out of homelessness. *American Journal of Orthopsychiatry*, 90(5), 535–545.
- Killaspy H, Bebbington P, Blizard R, Johnson S, Nolan F, Pilling S, & King M. (2006). The REACT study: Randomised evaluation of assertive community treatment in north London. *BMJ (Clinical Research Ed.)*, 332(7545), 815–820. <https://doi.org/10.1136/bmj.38773.518322.7C>
- Killaspy H, Priebe S, McPherson P, Zenasni Z, McCrone P, Dowling S, Harrison I, Krotofil J, Dalton-Locke C, McGranahan R, & Arbuthnott M. (2019). Feasibility randomised trial comparing two forms of mental health supported accommodation (supported housing and floating outreach); a component of the QuEST (Quality and Effectiveness of Supported Tenancies) Study. *Frontiers in Psychiatry*, 10, 258–258.
- Killaspy H, Ritchie C W, Greer E, & Robertson M. (2004). Treating the homeless mentally ill: Does a designated inpatient facility improve outcome? *Journal of Mental Health*, 13, 593–599. <https://doi.org/10.1080/09638230400017038>
- Kim H Yu S, Lee A Y, Kim H O, Joh J S, Heo E Y, Oh K H, Kim H J, Chung H, & Choi H. (2019). Impact of Housing Provision Package on Treatment Outcome Among Homeless Tuberculosis Patients in South Korea. *Asia-Pacific Journal of Public Health*, 31, 603–611. <https://doi.org/10.1177/1010539519871779>
- Kim Y H, Park C S, Bae H O, Kim Y J, Huh M R, & Lee S H. (2020). A horticultural therapy program focusing on gardening activities to promote psychological, emotional and social health of the elderly living in a homeless living facility for a long time: A pilot study. *Journal of People, Plants, and Environment*, 23(5), 565–576.
- Kinner S A, Burford B J, Dooren K, & Gill C. (2013). PROTOCOL: Service brokerage for improving health outcomes for ex prisoners. *Campbell Systematic Reviews*, 9(1), 1–30. <https://doi.org/10.1002/cl2.111>
- Kirby Jr MW, Braucht GN, Brown E, Krane S, McCann M, & Vandemark N. (1999). Dyadic Case Management as a Strategy for Prevention of Homelessness Among Chronically Debilitated Men and Women with Alcohol and Drug Dependence. *Alcoholism Treatment Quarterly*, 17(1–2), 53–71. https://doi.org/10.1300/J020v17n01_04
- Kirst M Ta M, Amiri A, Hwang S W, Stergiopoulos V, O’Campo P, & Friesdorf R. (2020). Patterns and effects of social integration on housing stability, mental health and substance use outcomes among participants in a randomized controlled Housing First trial. *Social Science & Medicine*, 265, 113481–113481. <https://doi.org/10.1016/j.socscimed.2020.113481>
- Kirst M, Zerger S, Misir V, Hwang S, & Stergiopoulos V. (2015). The impact of a Housing First randomized controlled trial on substance use problems among homeless individuals with mental illness. *Drug and Alcohol Dependence*, 146(9), 24–29. <https://doi.org/10.1016/j.drugalcdep.2014.10.019>
- Kisely S R, Parker J K, Campbell L A, Karabanow J, Hughes J M, & Gahagan J. (2008). Health impacts of supportive housing for homeless youth: A pilot study. *Public Health*, 122(10), 1089–1092. <https://doi.org/10.1016/j.puhe.2008.01.009>

Kling J R, Liebman J B, & Katz L F. (2007). Experimental analysis of neighborhood effects. *Econometrica*, 75(1), 83–119.

Klinkenberg W D, Calsyn R J, & Morse G A. (1998). The Helping Alliance in Case Management for Homeless Persons with Severe Mental Illness. *Community Mental Health Journal*, 34(6), 569–578. <https://doi.org/10.1023/A:1018758917277>

Knapp J, Nabors C, Pascual F, & Betancur J. (2021). The Efficacy of the Geriatric Model of Care in Emergency Housing Programs for Homeless Veterans. *Medical Care*, 59, S154–S157. <https://doi.org/10.1097/MLR.0000000000001438>

Koffarnus M N, Diemer K, Needham M, Hampton J, Fingerhood M, Svikis D S, Bigelow G E, Silverman K, & Wong C J. (2011). A Randomized Clinical Trial of a Therapeutic Workplace for Chronically Unemployed, Homeless, Alcohol-Dependent Adults. *Alcohol & Alcoholism*, 46(5), 561–569. <https://doi.org/10.1093/alcalc/agr057>

Koffarnus M N, Wong C J, Diemer K, Needham M, Hampton J, Fingerhood M, Svikis D S, Bigelow G E, & Silverman K. (2011). A randomized clinical trial of a Therapeutic Workplace for chronically unemployed, homeless, alcohol-dependent adults. *Alcohol and Alcoholism (Oxford, Oxfordshire)*, 46(5), 561–569. <https://doi.org/10.1093/alcalc/agr057>

Korr W S & Joseph A. (1995). Housing the Homeless Mentally Ill: Findings from Chicago. *Journal of Social Service Research*, 21(1), 53–68. https://doi.org/10.1300/J079v21n01_04

Kozlof N, Adair C E, Lazgare L I P, Poremski D, Cheung A H, Sandhu R, & Stergiopoulos V. (2016). Housing first for homeless youth with mental illness: Analysis from a randomized controlled trial. *Journal of the American Academy of Child and Adolescent Psychiatry*. Conference: 63rd Annual Meeting of the American Academy of Child and Adolescent Psychiatry. United States. Conference Start: 20161024. Conference End: 20161029, 55(10), S149. <https://doi.org/10.1016/j.jaac.2016.09.154>

Kozloff N, Adair C E, Lazgare L I P, Poremski D, Cheung A H, Sandu R, & Stergiopoulos V. (2016). “Housing First” for Homeless Youth With Mental Illness. *Pediatrics*, 138, 1–10. <https://doi.org/10.1542/peds.2016-1514>

Krabbenborg M A, Boersma S N, Beijersbergen M D, Goscha R J, & Wolf J R. (2015). Fidelity of a strengths-based intervention used by dutch shelters for homeless young adults. *Psychiatric Services (Washington, D.C.)*, 66(5), 470–476. <https://doi.org/10.1176/appi.ps.201300425>

Krabbenborg M A, Boersma S N, van der Veld W M, van Hulst B, Vollebergh W A, & Wolf J R. (2017). A Cluster Randomized Controlled Trial Testing the Effectiveness of Houvast: A Strengths-Based Intervention for Homeless Young Adults. *Research on Social Work Practice*, 27(6), 639–652. <https://doi.org/10.1177/1049731515622263>

Kranenburg G D V, R H S, B. V. D., Mulder W G, Diekman W J, G H M, P., & Mulder C L. (2019). Clinical effects and treatment outcomes of long-term compulsory in-patient treatment of treatment-resistant patients with severe mental illness and

substance-use disorder. *BMC Psychiatry*, 19, 270. <https://doi.org/10.1186/s12888-019-2254-9>

Kreindler S A & Coodin S. (2010). Housing histories of assertive community treatment clients: Program impacts and factors associated with residential stability. *Canadian Journal of Psychiatry*, 55(3), 150–156. <https://doi.org/10.1177/070674371005500306>

Kushel MB, Colfax G, Ragland K, Heineman A, Palacio H, & Bangsberg DR. (2006). Case management is associated with improved antiretroviral adherence and CD4(+) cell counts in homeless and marginally housed individuals with HIV infection. *Clinical Infectious Diseases*, 43(2), 234–242. <https://doi.org/10.1086/505212>

Kyle T & Dunn J R. (2008). Effects of housing circumstances on health, quality of life and healthcare use for people with severe mental illness: A review. *Health & Social Care in the Community*, 16(1), 1–15. <https://doi.org/10.1111/j.1365-2524.2007.00723.x>

Lachaud J, Nisenbaum R, Stergiopoulos V, O’Campo P, Hwang S W, & Mejia-Lancheros C. (2021). Housing First and Severe Mental Disorders: The Challenge of Exiting Homelessness. *Sage Journals*, 693, 178–192. <https://doi.org/10.1177/0002716220987220>

Lachaud J, Wang R, Wiens K, Nisenbaum R, Stergiopoulos V, Hwang S W, O’Campo P, & Mejia-Lancheros C. (2020). Mental and substance use disorders and food insecurity among homeless adults participating in the At Home/Chez Soi study. *Plos ONE [Electronic Resource]*, 15, e0232001–e0232001. <https://doi.org/10.1371/journal.pone.0232001>

Lako D A, Beijersbergen M D, Jonker I E, de Vet R, Herman D B, van Hemert A M, & Wolf J R. (2018). The effectiveness of critical time intervention for abused women leaving women’s shelters: A randomized controlled trial. *International Journal of Public Health*, 63, 513–523. <https://doi.org/10.1007/s00038-017-1067-1>

Lapham S C, Hall M, & Skipper B J. (1996). Homelessness and substance use among alcohol abusers following participation in Project H&ART. *Journal of Addictive Diseases*, 14(4), 41–55. https://doi.org/10.1300/J069v14n04_03

Larimer M E, Malone D K, Garner M D, Atkins D C, Burlingham B, Lonczak HS, Tanzer K, Ginzler J, Clifasefi S L, Hobson W G, & Marlatt G A. (2009). Health care and public service use and costs before and after provision of housing for chronically homeless persons with severe alcohol problems. *JAMA: Journal of the American Medical Association*, 301(13), 1349–1357. <https://doi.org/10.1001/jama.2009.414>

Latimer E A, Cao Z, Ly A, Powell G, Aubry T, Distasio J, Hwang S W, Somers J M, Bayoumi A M, Mitton C, & Rabouin D. (2020). Cost-Effectiveness of Housing First With Assertive Community Treatment: Results From the Canadian At Home/Chez Soi Trial. *Psychiatric Services (Washington, D.C.)*, 71(10), 1020–1030. <https://doi.org/10.1176/APPI.PS.202000029>

Latimer E A., R., D. ., Cao, Z. ., Ly, A. ., Powell, G. ., Aubr, At Home, & Chez Soi Investigators. (2017). Costs of services for homeless people with mental illness in

5 Canadian cities: A large prospective follow-up study. *CMAJ Open*, 5(3), E576.

Latimer E A, Rabouin D, Cao Z, Ly A, Powell G, Adair C E, Sareen J, Somers JM, Stergiopoulos V, Pinto AD, & Moodie E E. (2019). Cost-effectiveness of Housing First Intervention With Intensive Case Management Compared With Treatment as Usual for Homeless Adults With Mental Illness: Secondary Analysis of a Randomized Clinical Trial. *JAMA Network Open*, 2, e199782–e199782. <https://doi.org/10.1001/jamanetworkopen.2019.9782>

Leaf P J, Thompson K S, Lam J A, Jekel J F, Armand E T, Evans A E, Martinez J S, Rodriguez C, Westman W C, Johnston P, Rowe M, Hartwell S, Blue H, & Harp T. (1993). Partnership in Recovery. *Alcoholism Treatment Quarterly*, 10(3–4), 77–90. https://doi.org/10.1300/J020V10N03_07

Leclair M C, Deveaux F, Roy L, Goulet M H, Latimer E A, & Crocker A G. (2019). The Impact of Housing First on Criminal Justice Outcomes among Homeless People with Mental Illness: A Systematic Review. *Canadian Journal of Psychiatry - Revue Canadienne de Psychiatrie*, 64, 525–530. <https://doi.org/10.1177/0706743718815902>

Lee D & McGuire M. (2017). Intergovernmental Alignment, Program Effectiveness, and US Homelessness Policy. *Publius-the Journal of Federalism*, 47(4), 622–647. <https://doi.org/10.1093/publius/pjx044>

Leff H S, Chow C M, Pepin R, Conley J, Allen I E, & Seaman C A. (2009). Does One Size Fit All? What We Can and Can't Learn From a Meta-analysis of Housing Models for Persons With Mental Illness. *Psychiatric Services*, 60(4), 473–482. <https://doi.org/10.1176/ps.2009.60.4.473>

Lehman A F, Dixon L B, Kernan E, DeForge B R, & Postrado L T. (1997). A randomized trial of assertive community treatment for homeless persons with severe mental illness. *Arch Gen Psychiatry*, 54(11), 1038–1043. <https://doi.org/10.1001/archpsyc.1997.01830230076011>

Lemoine C, Loubière S, Boucekine M, Girard V, Tinland A, & Auquier P. (2021). Cost-effectiveness analysis of housing first intervention with an independent housing and team support for homeless people with severe mental illness: A Markov model informed by a randomized controlled trial. *Social Science & Medicine*, 272, 272–272. <https://doi.org/10.1016/j.socscimed.2021.113692>

Lemoine C, Loubiere Sandrine, Tinland A, Boucekine M, Girard V, & Auquier P. (2019). Long-term effects of a housing support intervention in homeless people with severe mental illness. *European Journal of Public Health*, 29(Supplement_4), ckz185-086.

Lennon M C, McAllister W, Kuang L, & Herman D B. (2005). Capturing intervention effects over time: Reanalysis of a critical time intervention for homeless mentally ill men. *American Journal of Public Health*, 95(10), 1760–1766. <https://doi.org/10.2105/AJPH.2005.064402>

LePage J P, CIPHER D J, Anderson K, Rock A, Johnson J A P, Washington E L, Ottomanelli L, & Crawford A M. (2020). Blending traditional vocational services and individualized placement and support for formerly incarcerated veterans. *Psychiatric Services (Washington, D.C.)*, 71(8), 816–823. <https://doi.org/10.1176/appi.ps.201900421>

[appi.ps.201900421](https://doi.org/10.1176/appi.ps.201900421)

LePage J P, Bluitt M, McAdams H, Merrell C, House-Hatfield T, & Garcia-Rea E. (2006). Effects of increased social support and lifestyle behaviors in a domiciliary for homeless veterans. *Psychological Services*, 3(1), 16–24. <https://doi.org/10.1037/1541-1559.3.1.16>

LePage J P, Crawford A M, Rock A, Parish Johnson, J A, Washington E L, & Martin W B. (2021). Individualized Placement and Support Supported Employment for Justice-involved Homeless and Unemployed Veterans. *Medical Care*, 59, S195–S198. <https://doi.org/10.1097/MLR.0000000000001445>

LePage J P & Garcia-Rea E A. (2012). Lifestyle Coaching's Effect on 6-Month Follow-Up in Recently Homeless Substance Dependent Veterans: A Randomized Study. *Psychiatric Rehabilitation Journal*, 35(5), 396–402. <https://doi.org/10.1037/h0094500>

Lester K M, Milby J B, Schumacher J E, Vuchinich R, Person S, & Clay O J. (2007). Impact of behavioral contingency management intervention on coping behaviors and PTSD symptom reduction in cocaine-addicted homeless. *Journal of Traumatic Stress*, 20(4), 565–575. <https://doi.org/10.1002/jts.20239>

Lettner B H, Doan R J, & Miettinen A W. (2016). Housing outcomes and predictors of success: The role of hospitalization in street outreach. *Journal of Psychiatric and Mental Health Nursing*, 23(2), 98–107. <https://doi.org/10.1111/jpm.12287>

Levesque I S & Abdel-Baki A. (2020). Homeless youth with first-episode psychosis: A 2-year outcome study. *Schizophrenia Research*, 216, 460–469. <https://doi.org/10.1016/j.schres.2019.10.031>

Levitt A J, Mitchell K, Pareti L, DeGenova J, Heller A Hannigan A, & Gholston J. (2013). Randomized trial of intensive housing placement and community transition services for episodic and recidivist homeless families. *American Journal of Public Health*, 103(SUPPL. 2), S348–S354. <https://doi.org/10.2105/AJPH.2013.301521>

Lewis J R, Boyle D P, Lewis L S, & Evans M. (2000). Reducing AIDS and Substance Abuse Risk Factors among Homeless, HIV-Infected, Drug-Using Persons. *Research on Social Work Practice*, 10(1), 15–33. <https://doi.org/10.1177/15527581-00010001-05>

Lim S, Gao Q, Stazesky E, Singh T P, Harris T G, & Seligson A L. (2018). Impact of a New York City supportive housing program on Medicaid expenditure patterns among people with serious mental illness and chronic homelessness. *BMC Health Services Research*, 18, 15. <https://doi.org/10.1186/s12913-017-2816-9>

Lim S, Singh T P, & Gwynn R C. (2017). Impact of a Supportive Housing Program on Housing Stability and Sexually Transmitted Infections Among Young Adults in New York City Who Were Aging Out of Foster Care. *American Journal of Epidemiology*, 186(3), 297–304. <https://doi.org/10.1093/aje/kwx046>

Lim S, Singh T P, Hall G, Walters S, & Gould L H. (2018). Impact of a New York City Supportive Housing Program on Housing Stability and Preventable Health Care among Homeless Families. *Health Services Research*, 53(5), 3437–3454. <https://doi.org/10.1111/hlth.13333>

doi.org/10.1111/1475-6773.12849

Lim S, Singh T P, Wu W Y, Walters S C, Gould L H, & Miller-Archie S A. (2019). Supportive Housing and Its Relationship With Diabetes Diagnosis and Management Among Homeless Persons in New York City. *American Journal of Epidemiology*, 188(6), 1120–1129. <https://doi.org/10.1093/aje/kwz057>

Linn J G, Neff J A, Theriot R, Harris J L, Interrante J, & Graham M E. (2003). Reaching impaired populations with HIV prevention programs: A clinical trial for homeless mentally ill African-American men. *Cellular and Molecular Biology (Noisy-Le-Grand, France)*, 49, 1167–1175.

Lipton F R, Nutt S, & Sabatini A. (1998). Housing the Homeless Mentally Ill: A Longitudinal Study of a Treatment Approach. *Psychiatric Services*, 39(1), 40–45. <https://doi.org/10.1176/ps.39.1.40>

Lipton F R, Siegel C, Hannigan A, Samuels J, & Baker S. (2000). Tenure in supportive housing for homeless persons with severe mental illness. *Psychiatric Services*, 51(4), 479–486. <https://doi.org/10.1176/appi.ps.51.4.479>

Liu C. (2020). A Multi-Level Analysis of the Effects of Independent Living Programs on Educational Attainment, Employment, and Housing Outcomes of Youth Aging Out of Foster Care. *Child Welfare*, 98(4), 97–120.

Louden-Gerber G M. (2009). A group forgiveness intervention for adult male homeless individuals: Effects on forgiveness, rumination, and social connectedness. In *Dissertation Abstracts International Section A: Humanities and Social Sciences (Vol. 69)*. <https://search.proquest.com/openview/71d3a46864fa0dbc29dabc4d879016ed/1?pq-origsite=gscholar&cbl=18750&diss=y>

Lowrie R L S, Knapp M, Williamson A, Montgomery M, Lombard C, Maguire D, Allan R, Blair R, Paudyal V, Mair F S, & Stock K. (2021). Pharmacist led homeless outreach engagement and non-medical independent prescribing (Rx) (PHOENIX) intervention for people experiencing homelessness: A non-randomised feasibility study. *International Journal for Equity in Health*, 20(1), 1–13. <https://doi.org/10.1186/s12939-020-01337-7>

Lowry I S. (1982). Experimenting with Housing Allowances: Executive Summary (RAND, p. 80). Rand Corporation. <https://www.rand.org/pubs/reports/R2880.html>

Luchenski S, Maguire N, Aldridge RVW, Hayward A, Story A, Perri P, Withers J, Clint S, Fitzpatrick S, & Hewett N. (2018). What works in inclusion health: Overview of effective interventions for marginalised and excluded populations. *Lancet*, 391 North American Edition, 266–280. [https://doi.org/10.1016/S0140-6736\(17\)31959-1](https://doi.org/10.1016/S0140-6736(17)31959-1)

Luffborough I I I & E Douglas. (2017). Faith and homelessness: Examining the influence of the faithbased component of a transitional housing program on the attitudes and behaviors of homeless men. In *Dissertation Abstracts International Section A: Humanities and Social Sciences (Vol. 78)*. <https://search.proquest.com/openview/85872ac41a840e5ea6d90744f6d67e5f/1?pq-origsite=gscholar&cbl=18750&diss=y>

Luong L, Kouyoumdjian F G, Hwang S W, Mejia-Lancheros C, & Lachaud J. (2020).

The impact of a Housing First intervention and health-related risk factors on incarceration among people with experiences of homelessness and mental illness in Canada. *Canadian Journal of Public Health. Revue Canadienne de Sante Publique*, 112(2), 270–279. <https://doi.org/10.17269/s41997-020-00433-z>

Lutze F E, Rosky J W, & Hamilton Z K. (2014). Homelessness and reentry: A multisite outcome evaluation of Washington State's reentry housing program for high risk offenders. *Criminal Justice and Behavior*, 41(4), 471–491. <https://doi.org/10.1177/0093854813510164>

Ly A & Latimer E. (2015). Housing First impact on costs and associated cost offsets: A review of the literature. *The Canadian Journal of Psychiatry / La Revue Canadienne de Psychiatrie*, 60(11), 475–487. <https://doi.org/10.1177/070674371506001103>

Lynn C J, Acri M C, Goldstein L, Bannon W, Beharie N, & McKay M M. (2014). Improving youth mental health through family-based prevention in family homeless shelters. *Children and Youth Services Review*, 44(8), 243–248. <https://doi.org/10.1016/j.childyouth.2014.05.024>

MacInnes D, Tallent J, Hove F, Dyson H, Grandi T, Parrott J, & Khan A. (2021). Supporting prisoners with mental health needs in the transition to RESETtle in the community: The RESET study. *Social Psychiatry and Psychiatric Epidemiology*. <https://doi.org/10.1007/s00127-021-02045-5>

Mackelprang J L, Collins S E, & Clifasefi S L. (2014). Housing First Is Associated with Reduced Use of Emergency Medical Services. *Prehospital Emergency Care*, 18(4), 476–482. <https://doi.org/10.3109/10903127.2014.916020>

Mackie P, Johnsen S, & Wood J. (2019). Ending street homelessness: What works and why we don't do it. *European Journal of Homelessness _ Volume*, 13(1), 85–96.

Maddock A, Hevey D, & Eidenmueller K. (2017). Mindfulness training as a clinical intervention with homeless adults: A pilot study. *International Journal of Mental Health and Addiction*, 15(3), 529–544.

Magwood O, Beder M, Kendall C, Kpade V, Daghmach W, Habonimana G, Marshall Z, Snyder E, O'Shea T, Lennox R, Hsu H, Tugwell P, Pottie K, & Salvalaggio G. (2020). The effectiveness of substance use interventions for homeless and vulnerably housed persons: A systematic review of systematic reviews on supervised consumption facilities, managed alcohol programs, and pharmacological agents for opioid use disorder. *PloS One*, 15. <https://doi.org/10.1371/journal.pone.0227298>

Malte C A, Cox K, & Saxon A J. (2017). Providing intensive addiction/housing case management to homeless veterans enrolled in addictions treatment: A randomized controlled trial. *Psychology of Addictive Behaviors : Journal of the Society of Psychologists in Addictive Behaviors*, 31(3), 231. <https://doi.org/10.1037/adb0000273>

Marcus S M, Weaver J, Lim S, Duan N, Gibbons R D, & Rosenheck R. (2012). Assessing the causal effect of Section 8 housing vouchers as the active ingredient for decreasing homelessness in veterans with mental illness. *Health Services*

and Outcomes Research Methodology, 12(4), 273–287. <https://doi.org/10.1007/s10742-012-0100-3>

Mares A S & Robert RA. (2011). A comparison of treatment outcomes among chronically homelessness adults receiving comprehensive housing and health care services versus usual local care. *Administration and Policy in Mental Health and Mental Health Services Research*, 38(6), 459–475. <https://doi.org/10.1007/s10488-011-0333-4>

Maria D S. (2019, August). Development and Piloting of a Just-in-Time, Personalized HIV Prevention Intervention for Youth Experiencing Homelessness and Unstable Housing. National Library of Medicine; Clinical Trials. Gov. <https://clinicaltrials.gov/ct2/show/NCT03911024>

Marseille P H D. (2019, June). Alternative Care to the Accompaniment Called “Place of Respite” in the Resolution of the Psychotic Crises of Homeless People With Severe Mental Pathology. National Library of Medicine; Clinical Trials. Gov. <https://clinicaltrials.gov/ct2/show/NCT03992105>

Marshall C A, Boland L, Westover L A, Marcellus B, Weil S, & Wickett S. (2020). Effectiveness of interventions targeting community integration among individuals with lived experiences of homelessness: A systematic review. *Health & Social Care in the Community*, 28(6), 1843–1862. <https://doi.org/10.1111/hsc.13030>

Marshall C A, Westover L A, Isard R, Gutman S A, & Boland L. (2020). A systematic review of occupational therapy interventions in the transition from homelessness. *Scandinavian Journal of Occupational Therapy*, 171–187. <https://doi.org/10.1080/11038128.2020.1764094>

Marshall M, Lockwood A, & Gath D. (1995). Social services case-management for long-term mental disorders: A randomised controlled trial. *Lancet.*, 345(8947), 409–412. [https://doi.org/10.1016/S0140-6736\(95\)90399-2](https://doi.org/10.1016/S0140-6736(95)90399-2)

Martinez T E & Burt M R. (2006). Impact of permanent supportive housing on the use of acute care health services by homeless adults. *Psychiatric Services*, 57, 992–999.

Mary L. (2018). The impact of length of stay on recovery measures in faith-based addiction treatment. *Public Health Nursing*, 35, 396–403. <https://doi.org/10.1111/phn.12401>

McCarthy E. (2007). Role of the case management relationship in helping homeless mothers with addictive disorders. In *Dissertation Abstracts International: Section B: The Sciences and Engineering* (Vol. 68). <https://opencommons.uconn.edu/dissertations/AAI3270967>

McCay E, Quesnel S, Langley J, Beanlands H, Cooper L, Blidner R, Aiello A, Mudachi N, Howes C, & Bach K. (2011). A Relationship-Based Intervention to Improve Social Connectedness in Street-Involved Youth: A Pilot Study. *Journal of Child & Adolescent Psychiatric Nursing*, 24(4), 208–215. <https://doi.org/10.1111/j.1744-6171.2011.00301.x>

McCormack R P, Hoffman L F, Wall S P & Goldfrank L R. (2013). Resource-limited collaborative pilot intervention for chronically homeless, alcohol-dependent

frequent emergency department users. *American Journal of Public Health*, 103(SUPPL. 2), S221–4. <https://doi.org/10.2105/AJPH.2013.301373>

McCosker L, Downes M J, & Ware R. (2020). Interventions to Deliver Vaccination to, and Improve Vaccination Rates in, People who are Homeless. *Social Science Protocols*, 3, 1–15. <https://doi.org/10.7555/SSP.V3.5190>

McCracken L M. (2003). Evaluation of the effectiveness of the therapeutic community model as a novel treatment in the homeless. In *Dissertation Abstracts International: Section B: The Sciences and Engineering* (Vol. 64). https://www.researchgate.net/publication/35227876_Evaluation_of_the_effectiveness_of_the_therapeutic_community_model_as_a_novel_treatment_in_the_homeless_by_Laura_Margaret_McCracken

McHugo G J, Bebout R R, Harris M, Cleghorn S, Herring G, Xie H, Becker D, & Drake R E. (2004). A Randomized Controlled Trial of Integrated Versus Parallel Housing Services for Homeless Adults With Severe Mental Illness. *Schizophrenia Bulletin*, 30(4), 969–982. <https://doi.org/10.1093/oxfordjournals.schbul.a007146>

Medalia A, Saperstein A M, Huang Y, Lee S, & Ronan E J. (2017). Cognitive skills training for homeless transition-age youth: Feasibility and pilot efficacy of a community based randomized controlled trial. *Journal of Nervous and Mental Disease*, 205, 859–866. <https://doi.org/10.1097/NMD.0000000000000741>

Meehan T, Stedman T, Robertson S, Drake S, & King R. (2011). Does supported accommodation improve the clinical and social outcomes for people with severe psychiatric disability? The Project 300 experience. *Australian & New Zealand Journal of Psychiatry*, 45(7), 586–592.

Mejia-Lancheros C, Lachaud J, Stergiopoulos V, Matheson FI, Nisenbaum R, O’Campo P, & Hwang SW. (2020). Effect of Housing First on violence-related traumatic brain injury in adults with experiences of homelessness and mental illness: Findings from the At Home/Chez Soi randomised trial, Toronto site. *BMJ Open*, 10, e038443–e038443. <https://doi.org/10.1136/bmjopen-2020-038443>

Meurice M E, Goad L M, Barlow P B, Kerestes C A, Stockdale C K, & Hardy-Fairbanks A J. (2019). Efficacy-based Contraceptive Counseling for Women Experiencing Homelessness in Iowa City, Iowa. *Journal of Community Health Nursing*, 36, 199–207. <https://doi.org/10.1080/07370016.2019.1665313>

Milburn N G, Iribarren F J, Rice E, Lightfoot M, Solorio R, Rotheram-Borus M J, Desmond K, Lee A, Alexander K, Maresca K, & Eastmen K. (2012). A family intervention to reduce sexual risk behavior, substance use, and delinquency among newly homeless youth. *Journal of Adolescent Health*, 50(4), 358–364. <https://doi.org/10.1016/j.jadohealth.2011.08.009>

Milby J B, Schumacher J E, McNamara C, Wallace D, Usdan S, McGill T, & Michael M. (2000). Initiating abstinence in cocaine abusing dually diagnosed homeless persons. *Drug and Alcohol Dependence*, 60(1), 55–67. [https://doi.org/10.1016/S0376-8716\(00\)80008-3](https://doi.org/10.1016/S0376-8716(00)80008-3)

Milby J B, Schumacher J E, Raczynski J M, Caldwell E, Engle M, Michael M, & Carr J. (1996). Sufficient conditions for effective treatment of substance abusing homeless persons. *Drug Alcohol Depend.*, 43(1–2), 39–47. [https://doi.org/10.1016/0376-8716\(96\)00008-3](https://doi.org/10.1016/0376-8716(96)00008-3)

org/10.1016/S0376-8716(96)01286-0

Milby J B, Schumacher J E, Wallace D, Freedman M J, & Vuchinich R E. (2005). To house or not to house: The effects of providing housing to homeless substance abusers in treatment. *American Journal of Public Health*, 95(7), 1259–1265. <https://doi.org/10.2105/AJPH.2004.039743>

Milby J B, Schumacher J E, Wallace D, Frison S, McNamara C, Usdan S, & Michael M. (2003). Day treatment with contingency management for cocaine abuse in homeless persons: 12-month follow-up. *Journal of Consulting and Clinical Psychology*, 71(3), 619–621. <https://doi.org/10.1037/0022-006X.71.3.619>

Milby J B, Schumacher J E, Wallace D, Vuchinich R, Mennemeyer S T, & Kertesz S G. (2010). Effects of sustained abstinence among treated substance-abusing homeless persons on housing and employment. *Am J Public Health*, 100(5), 913–918. <https://doi.org/10.2105/AJPH.2008.152975>

Miler J A, Foster R, Parkes T, & Carver H. (2020). Provision of peer support at the intersection of homelessness and problem substance use services: A systematic “state of the art” review. *BMC Public Health*, 20, 1–18.

Miler J A, Carver H, Masterton W, Parkes T, Maden M, Jones L, & Sumnall H. (2021). What treatment and services are effective for people who are homeless and use drugs? A systematic “review of reviews.” *PLoS ONE*, 16(7 July). <https://doi.org/10.1371/journal.pone.0254729>

Millen A M, Levinson A, Linkovski O, Shuer L, Thaler T, Nick GA, Johns GK, Vargas SM, Rottier KA, Joyner E, & Girson RB. (2020). Pilot Study Evaluating Critical Time Intervention for Individuals With Hoarding Disorder at Risk for Eviction. 71(4), 405–408. <https://doi.org/10.1176/appi.ps.201900447>

Miller S, Keenan C, Hanratty J, Mackie P, Maddock A, Hamilton J, & Coughlan C. (2020). Protocol: Improving accessibility of health and social services for individuals experiencing, or at risk of experiencing, homelessness: A Systematic Review. *Campbell Systematic Reviews*, 16(4), e1118.

Mills G, Gubits D, Larry O, Long D, Feins J, Kaul B, Wood M, & Jones A. (2006). Effects of housing vouchers on welfare families. Washington, DC: US Department of Housing and Urban Development, Office of Policy Development and Research. Retrieved October, 8, 2010.

Milton A & Dennis M. (1993). The use of shelters as substance abuse stabilization sites. *The Journal of Mental Health Administration*, 20(2), 126–137. <https://doi.org/10.1007/BF02519237>

Mission Australia. (n.d.-a). Reconnect Evaluation 2016. <https://www.missionaustralia.com.au/documents/687-reconnect-evaluation-report/file>

Mission Australia. (n.d.-b). Room to Grow Program: Final evaluation report. <https://www.missionaustralia.com.au/publications/research/homelessness-research/691-room-to-grow-evaluation-report>

Moes J. (2019). Proper fitting shoes: Reducing pain, increasing activity, and

improving foot health among adults experiencing homelessness. *Public Health Nursing*, 36, 321–329.

Moledina A, Magwood O, Agbata E, Hung JH, Saad A, Thavorn K, & Pottie K. (2021). A comprehensive review of prioritised interventions to improve the health and wellbeing of persons with lived experience of homelessness. *Campbell Systematic Reviews*, 17(2), e1154–e1154. <https://doi.org/10.1002/cl2.1154>

Montgomery A E, Hill L L, Kane V, & Culhane D P. (2013). Housing chronically homeless veterans: Evaluating the efficacy of a Housing First approach to HUD-VASH. *Journal of Community Psychology*, 41(4), 505–514.

Montgomery A J. (2019). Decreasing the risk of maltreatment for children experiencing homelessness: An evaluation of Triple P in shelters. Dissertation Abstracts International: Section B: The Sciences and Engineering, 80, No Pagination Specified.

Moore K A, Young M S, Barrett B, & Ochshorn E. (2009). A 12-Month Follow-Up Evaluation of Integrated Treatment for Homeless Individuals With Co-Occurring Disorders. *Journal of Social Service Research*, 35, 322–335. <https://doi.org/10.1080/01488370903110829>

Morse G A, Calsyn R J, Allen G, Tempethoff B, & Smith R. (1992). Experimental comparison of the effects of three treatment programs for homeless mentally ill people. *Hosp Community Psychiatry*, 43(10), 1005-1010. <https://doi.org/10.1176/ps.43.10.1005>

Morse G A, Calsyn R J, Klinkenberg W D, Cunningham J, & Lemming M R. (2006). Integrated treatment for homeless clients with dual disorders: A quasi-experimental evaluation. *Journal of Dual Diagnosis*, 4(3), 219–237. <https://doi.org/10.1080/15504260802072065>

Morse G A, Calsyn R J, Klinkenberg W D, Helminiak T W, Wolff N, Drake R E, Yonker R D, Lama G, Lemming M R, & McCudden S. (2006). Treating homeless clients with severe mental illness and substance use disorders: Costs and outcomes. *Community Mental Health Journal*, 42(4), 377–404.

Morse G A, Dell N, Blanco J, Birchmier C, & York M M. (2020). Improving outcomes for homeless people with alcohol disorders: A multi-program community-based approach. *Journal of Mental Health (Abingdon, England)*, 29, 684–691. <https://doi.org/10.1080/09638237.2017.1340617>

Morton M H, Epstein R, Farrell A, & Kugley S. (2020). Interventions for youth homelessness: A systematic review of effectiveness studies. *Children and Youth Services Review*, 116. <https://doi.org/10.1016/j.childyouth.2020.105096>

Munthe-K H M, Berg R C, & Blaasvør N. (2018). Effectiveness of interventions to reduce homelessness: A systematic review and meta-analysis. *Campbell Systematic Reviews*, 14(1), 1–281. <https://doi.org/10.4073/csr.2018.3>

Murdoch M, Sayer N A, Spont M R, Rosenheck R, Noorbaloochi S, Griffin J M, Arbisi P A, & Hagel E M. (2011). Long-term outcomes of disability benefits in US veterans with posttraumatic stress disorder. *Archives of General Psychiatry*, 68(10), 1072–1080. <https://doi.org/10.1001/archgenpsychiatry.2011.105>

Murphy H, Friel S, Dhillon C, & Vaid L. (2017). Tackling Multiple Disadvantage: Year 1 Interim Report. https://crisis.org.uk/media/238673/tackling_multiple_disadvantage_year_one_report_2017.pdf

Naomi Z, Erica E, Heidi A, & Tal G. (2019). The Effects of the ACA Medicaid Expansion on Nationwide Home Evictions and Eviction-Court Initiations: United States, 2000–2016. *American Journal of Public Health*, 109, 1379–1383. <https://doi.org/10.2105/AJPH.2019.305230>

Naranbhai V, Karim Q A, & Meyer-Weitz A. (2011). Interventions to modify sexual risk behaviours for preventing HIV in homeless youth. *Cochrane Database of Systematic Reviews*, 1, CD007501. <https://doi.org/10.1002/14651858.CD007501.pub2>

Nelson S E, Gray H M, Maurice I R, & Shaffer H J. (2012). Moving Ahead: Evaluation of a Work-Skills Training Program for Homeless Adults. *Community Mental Health Journal*, 48, 711–722. <https://doi.org/10.1007/s10597-012-9490-5>

Newman K L, McCulloch D, Wilcox N, Englund J A, Boeckh M, Chu H Y, & Rogers J H. (2020). Point-of-care molecular testing and antiviral treatment of influenza in residents of homeless shelters in Seattle, WA: study protocol for a stepped-wedge cluster-randomized controlled trial. *Trials*, 21(1), 1–12. <https://doi.org/10.1186/s13063-020-04871-5>

Nordentoft M, Øhlenschläger J, Thorup A, Petersen L, Jeppesen P, & Bertelsen M. (2010). Deinstitutionalization revisited: A 5-year follow-up of a randomized clinical trial of hospital-based rehabilitation versus specialized assertive intervention (OPUS) versus standard treatment for patients with first-episode schizophrenia spectrum disorders. *Psychological Medicine*, 40(10), 1619–1626. <https://doi.org/10.1017/S0033291709992182>

Norris-Shortle C, Melley A H, Kiser L J, Levey E, Cosgrove K, & Leviton A. (2006). Targeted Interventions for Homeless Children at a Therapeutic Nursery. *Zero to Three*, 26, 49–55.

Norton C L, Pelletier A, VanKanegan C, Bogs K, Foerster E, & Tucker A. (2020). Utilizing Outdoor Adventure Therapy to Increase Hope and Well-Being among Women at a Homeless Shelter. *Journal of Outdoor Recreation, Education, and Leadership*, 12(1), 87–101.

Nossel I R, Lee R J, Isaacs A, Herman D B, Marcus S M, & Essock S M. (2016). Use of Peer Staff in a Critical Time Intervention for Frequent Users of a Psychiatric Emergency Room. *Psychiatric Services*, 67(5), 479–481. <https://doi.org/10.1176/appi.ps.201500503>

Nunez E, Gibson G, Jones J A, & Schinka J A. (2013). Evaluating the impact of dental care on housing intervention program outcomes among homeless veterans. *American Journal of Public Health*, 103(SUPPL. 2), S368–373. <https://doi.org/10.2105/AJPH.2012.301064>

Nyamathi A, Flaskerud J H, Leake B, Dixon E L, & Lu A. (2001). Evaluating the impact of peer, nurse case-managed, and standard HIV risk-reduction programs on psychosocial and health-promoting behavioral outcomes among homeless women. *Research in Nursing & Health*, 24, 410–422. <https://doi.org/10.1002/nur.1041>

nur.1041

Nyamathi A, Kennedy B, Branson C, Salem B, Khalilifard F, Marfisee M, Getzoff D, & Leake B. (2013). Impact of nursing intervention on improving HIV, hepatitis knowledge and mental health among homeless young adults. *Community Mental Health Journal*, 49, 178–184. <https://doi.org/10.1007/s10597-012-9524-z>

Nyamathi A, Liu Y, Marfisee M, Shoptaw S, Gregerson P, Saab S, Leake B, Tyler D, & Gelberg L. (2009). Effects of a nurse-managed program on hepatitis A and B vaccine completion among homeless adults. *Nursing Research*, 58, 13–22. <https://doi.org/10.1097/NNR.0b013e3181902b93>

Nyamathi A M, Christiani A, Nahid P, Gregerson P, & Leake B. (2006). A randomized controlled trial of two treatment programs for homeless adults with latent tuberculosis infection. *International Journal of Tuberculosis and Lung Disease*, 10, 775–782.

Nyamathi A M, Reback C J, Shoptaw S, Salem B E, Zhang S, Farabee D, & Khalilifard F. (2016). Impact of Community-Based Programs on Incarceration Outcomes Among Gay and Bisexual Stimulant-Using Homeless Adults. *Community Mental Health Journal*, 52(8), 1037–1042. <https://doi.org/10.1007/s10597-014-9792-x>

Nyamathi A M, Shin S S, Smeltzer J, Salem B E, Yadav K, Ekstrand M L, Turner S F, & Faucette M. (2017). Achieving drug and alcohol abstinence among recently incarcerated homeless women: A randomized controlled trial comparing dialectical behavioral therapy-case management with a health promotion program. *Nursing Research*, 66, 432–441. <https://doi.org/10.1097/NNR.0000000000000249>

Nyamathi A M, Zhang S, Salem B E, Farabee D, Hall B, Marlow E, Faucette M, Bond D, & Yadav K. (2016). A randomized clinical trial of tailored interventions for health promotion and recidivism reduction among homeless parolees: Outcomes and cost analysis. *Journal of Experimental Criminology*, 12, 49–74. <https://doi.org/10.1007/s11292-015-9236-9>

Nyamathi A, Nahid P, Berg J, Burrage J, Christiani A, Aqtash S, Morisky D, & Leake B. (2008). Efficacy of nurse case-managed intervention for latent tuberculosis among homeless subsamples. *Nursing Research*, 57, 33–39.

Nyamathi A, Salem B E, Zhang S, Farabee D, Hall B, Khalilifard F, & Leake B. (2015). Nursing Case Management, Peer Coaching, and Hepatitis A and B Vaccine Completion Among Homeless Men Recently Released on Parole: Randomized Clinical. *Nursing Research*, 64(3), 177. <https://doi.org/10.1097/NNR.0000000000000083>

Nyamathi A, Shin S S, Smeltzer J, Salem B, Yadav K, Krogh D, & Ekstrand M. (2018). Effectiveness of Dialectical Behavioral Therapy on Reduction of Recidivism Among Recently Incarcerated Homeless Women: A Pilot Study. *International Journal of Offender Therapy & Comparative Criminology*, 62, 4796–4813. <https://doi.org/10.1177/0306624X18785516>

O'Campo P, Stergiopoulos V, Nir P, Levy M, Misir V, Chum A, Arbach B, Nisenbaum R, To M J, & Hwang S W. (2016). At Home/Chez Soi randomised trial: How did a Housing First intervention improve health and social outcomes among homeless

adults with mental illness in Toronto? Two-year outcomes from a randomised trial. *BMJ Open*, 6(9), e010581. <https://doi.org/10.1136/bmjopen-2015-010581>

O'Connell M J, Kaspro W J, & Rosenheck R A. (2012). Differential impact of supported housing on selected subgroups of homeless veterans with substance abuse histories. *Psychiatry Services*, 63(12), 1195-1205. <https://doi.org/10.1176/appi.ps.201000229>

Ojo-Fati O, John F, Thomas J, Joseph A M, Raymond N C, Cooney N L, Pratt R, Rogers C R, Everson-Rose S A, Luo X, & Okuyemi K S. (2015). Integrating smoking cessation and alcohol use treatment in homeless populations: Study protocol for a randomized controlled trial. *Trials*, 16(1), 385–385. <https://doi.org/10.1186/s13063-015-0858-z>

Okuyemi K S, Goldade K, Whembolua G L, Thomas J L, Eischen S, Sewali B, Guo H, Connett J E, Grant J, Ahluwalia J S, & Resnicow K. (2013). Motivational interviewing to enhance nicotine patch treatment for smoking cessation among homeless smokers: A randomized controlled trial. *Addiction*, 108(6), 1136–1144. <https://doi.org/10.1111/add.12140>

Olivet J, Bassuk E, Elstad E, Kenney R, & Jassil L. (2010). Outreach and engagement in homeless services: A review of the literature. *The Open Health Services and Policy Journal*, 3(1). <https://doi.org/10.2174/1874924001003010053>

O'Shaughnessy B R, G. R. M. (2020). Empowering Features and Outcomes of Homeless Interventions: A Systematic Review and Narrative Synthesis. *American Journal of Community Psychology*, 66(1), 144–165. <https://doi.org/10.1002/ajcp.12422>

O'Shea T, Mbuagbaw L, Mokashi V, Bulir D, Gilchrist J, Smieja N, Chong S, Marttala S, Vera V, Cvetkovic A, & Smieja M. (2020). Comparison of four COVID-19 screening strategies to facilitate early case identification within the homeless shelter population: A structured summary of a study protocol for a randomised controlled trial. *Trials*, 21(1), 1–3.

Osypuk T L, Joshi S, Schmidt N M, Glymour M M, & Nelson T F. (2019). Effects of a federal housing voucher experiment on adolescent binge drinking: A secondary analysis of a randomized controlled trial: (Alcoholism and Drug Addiction). *Addiction*, 114, 48–58. <https://doi.org/10.1111/add.14379>

O'Toole T P, Buckel L, Bourgault C, Blumen J, Redihan S G, Jiang L, & Friedmann P. (2010). Applying the chronic care model to homeless veterans: Effect of a population approach to primary care on utilization and clinical outcomes. *Am J Public Health*, 100(12), 2493–2499. <https://doi.org/10.2105/AJPH.2009.179416>

O'Toole T P, Johnson E E, Borgia M L, & Rose J. (2015). Tailoring Outreach Efforts to Increase Primary Care Use Among Homeless Veterans: Results of a Randomized Controlled Trial. *Journal of General Internal Medicine*, 30, 886–898. <https://doi.org/10.1007/s11606-015-3193-x>

O'Toole T P, Johnson E E, Borgia M, Noack A, Yoon J, Gehlert E, & Lo J. (2018). Population-Tailored Care for Homeless Veterans and Acute Care Use, Cost, and Satisfaction: A Prospective Quasi-Experimental Trial. *Preventing Chronic Disease*, 15(2), 1–11. <https://doi.org/10.5888/pcd15.170311>

Oves D L & Self-Brown S. (2014). Impact of maternal health literacy training on the behaviors of women who have been homeless. *International Journal of Child Health and Human Development*, 7(3), 297–311.

Padgett D K, Gulcur L, & Tsemberis S. (2006). Housing first services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice*, 16, 74–83. <https://doi.org/10.1177/1049731505282593>

Padgett D K, Stanhope V, Henwood B F, & Stefancic A. (2011). Substance use outcomes among homeless clients with serious mental illness: Comparing Housing First with Treatment First programs. *Community Ment Health J*, 47(2), 227–232. <https://doi.org/10.1007/s10597-009-9283-7>

Paisi M, Witton R, Burrows M, Allen Z, Plessas A, Withers L, McDonald L, & Kay E. (2019). Management of plaque in people experiencing homelessness using “peer education”: A pilot study. *British Dental Journal*, 226, 860–866.

Palepu A, Patterson M, Moniruzzaman A, & Somers J M. (2013). Housing first among homeless persons with concurrent disorders among participants of the Vancouver at home study. *Journal of General Internal Medicine*, 28, S91.

Palmer C, Phillips DC, & Sullivan JX. (2019). Does emergency financial assistance reduce crime? *Journal of Public Economics*, 169, 34–51.

Parkes T, Matheson C, Carver H, Budd J, Liddell D, Wallace J, Pauly B, Fotopoulou M, Burley A, Anderson I, MacLennan G, & Foster R. (2019, July). Supporting Harm Reduction through Peer Support (SHARPS): Testing the feasibility and acceptability of a peer-delivered, relational intervention for people with problem substance use who are homeless, to improve health outcomes, quality of life and social functioning and reduce harms: Study protocol. Pilot and feasibility studies. *ISRCTN Registry*. <https://doi.org/10.1186/ISRCTN15900054>

Parriott A, Malekinejad M, Miller A P, Marks S M, Horvath H, & Kahn D G. (2018). Care Cascade for targeted tuberculosis testing and linkage to Care in Homeless Populations in the United States: A meta-analysis. *BMC Public Health*, 18, 485. <https://doi.org/10.1186/s12889-018-5393-x>

Patterson M L, Moniruzzaman A, & Somers J M. (2014). Community participation and belonging among formerly homeless adults with mental illness after 12 months of Housing First in Vancouver, British Columbia: A randomized controlled trial. *Community Mental Health Journal*, 50, 604–611. <https://doi.org/10.1007/s10597-013-9672-9>

Patterson M, Moniruzzaman A, Palepu A, Zabkiewicz D, Frankish C J, Krausz M, & Somers J M. (2013). Housing First improves subjective quality of life among homeless adults with mental illness: 12-month findings from a randomized controlled trial in Vancouver, British Columbia. *Social Psychiatry and Psychiatric Epidemiology*, 48(8), 1245–1259.

Patterson R, Wood M, LAm K, Patrabanish S, Mills G, Sullivan S, Amare H, Z, & niapour L. (2004). Evaluation of the Welfare to Work Voucher Program. <https://www.huduser.gov/portal/publications/pdf/welfwvrkVchrPrg.pdf>

Pauly B, Stockwell T, Chow C, Gray E, Kryswaty B, Vallance K, Zhao J, & Perkin K. (2013). Towards Alcohol Harm Reduction: Preliminary Results from an Evaluation of a Canadian Managed Alcohol Program. <https://www.homelesshub.ca/sites/default/files/attachments/Towards%20Alcohol%20Harm%20Reduction.pdf>

Pauly J B, Moore T A, & Shishko I. (2018). Integrating a mental health clinical pharmacy specialist into the Homeless Patient Aligned Care Teams. *The Mental Health Clinician*, 8, 169–174. <https://doi.org/10.9740/mhc.2018.07.169>

Pedersen C. (2020). Renaissance social services supportive housing outreach team program: An outcome evaluation. *Dissertation Abstracts International Section A: Humanities and Social Sciences*, 81. <https://www.proquest.com/openview/9ba8f9c33c76a34cdfef8d9d488bd59c/1?pq-origsite=gscholar&cbl=18750&iss=y>

Peng Y, Hahn RA, Finnie RK, Cobb J, Williams SP, Fielding JE, Johnson RL, Montgomery AE, Schwartz AF, Muntaner C, & Garrison VH. (2020). Permanent supportive housing with housing first to reduce homelessness and promote health among homeless populations with disability: A community guide systematic review. *Journal of Public Health Management and Practice*, 26, 404–411. <https://doi.org/10.1097/PHH.0000000000001219>

Perrens B Fildes J. (n.d.). Mission Australia Cairns Homelessness Services Evaluation. <https://thedeck.org.au/research/publications/mission-australia-cairns-homelessness-services-evaluation/>

Petering R, Srivastava A, Onasch-Vera L, Thompson N, Rice E, & Barr N. (2021). Examining impacts of a peer-based mindfulness and yoga intervention to reduce interpersonal violence among young adults experiencing homelessness. *University of Chicago Press Journals*. <https://www.journals.uchicago.edu/doi/abs/10.1086/712957?af=R>

Petering R, Wenzel S, & Winetrobe H. (2014). Systematic review of current intimate partner violence prevention programs and applicability to homeless youth. *Journal of the Society for Social Work and Research*, 5, 107–135. <https://doi.org/10.1086/675851>

Peterson P L, Baer J S, Wells E A, Ginzler J A, & Garrett S B. (2006). Short-Term Effects of a Brief Motivational Intervention to Reduce Alcohol and Drug Risk among Homeless Adolescents. *Psychology of Addictive Behaviors*, 20(3), 254–264. <https://doi.org/10.1037/0893-164X.20.3.254>

Pickett-Schenk S A, Cook J A, Grey D D, & Butler S B. (2007). Family Contact and Housing Stability in a National Multi-Site Cohort of Homeless Adults with Severe Mental Illness. *Journal of Primary Prevention*, 28, 327–339. <https://doi.org/10.1007/s10935-007-0098-4>

Pierce S, Grady B, & Holtzen H. (2016). Impact evaluation and roadmap to youth housing. https://www.researchgate.net/profile/Bryan-Grady/publication/308259243_Daybreak_Inc_Impact_Evaluation_and_Roadmap_to_Youth_Housing/links/57df336208ae72d72eac23c9/Daybreak-Inc-Impact-Evaluation-and-Roadmap-to-Youth-Housing.pdf

Pietrusza L M, Puskar K R, Ren D, & Mitchell A M. (2018). Evaluation of an

Opiate Overdose Educational Intervention and Naloxone Prescribing Program in Homeless Adults Who Use Opiates. *Journal of Addictions Nursing*, 29, 188–195. <https://doi.org/10.1097/jan.0000000000000235>

Piña G & Pirog M. (2019). The Impact of Homeless Prevention on Residential Instability: Evidence From the Homelessness Prevention and Rapid Re-Housing Program. *Housing Policy Debate*, 29(4), 501–521. <https://doi.org/10.1080/10511482.2018.1532448>

Podymow T, Turnbull J, Coyle D, Yetisir E, & Wells G. (2006). Shelter-based managed alcohol administration to chronically homeless people addicted to alcohol. *CMAJ Canadian Medical Association Journal*, 174, 45–49. <https://doi.org/10.1503/cmaj.1041350>

Polillo A, Sylvestre J, Kerman N, & Gran-Ruaz S. (2021). The use of eHealth interventions among persons experiencing homelessness: A systematic review. *Digital Health*, 7. <https://doi.org/10.1177/2055207620987066>

Ponka D, Kendall C, Stergiopoulos V, Mendonca O, Magwood O, Saad A, Larson B, Sun Anhr, Arya N, Hannigan T, Thavorn K, Andermann A, Tugwell P, Pottie K, & Agbata E. (2020). The effectiveness of case management interventions for the homeless, vulnerably housed and persons with lived experience: A systematic review. *PloS One*, 15(4). <https://doi.org/10.1371/journal.pone.0230896>

Poremski D, Rabouin D, & Latimer E. (2017). A randomised controlled trial of evidence based supported employment for people who have recently been homeless and have a mental illness. *Administration and Policy in Mental Health and Mental Health Services Research*, 44, 217–224.

Poremski D, Stergiopoulos V, Braithwaite E, Distasio J, Nisenbaum R, & Latimer E. (2016). Effects of Housing First on Employment and Income of Homeless Individuals: Results of a Randomized Trial. *Psychiatric Services (Washington, D.C.)*, 67(6), 603–609. <https://doi.org/10.1176/appi.ps.201500002>

Pottie K, Mathew C M, Mendonca O, Magwood O, & Saad A. (2019). Protocol: A comprehensive review of prioritized interventions to improve the health and wellbeing of persons with lived experience of homelessness. *Campbell Systematic Reviews*, 15(3), e1048. <https://doi.org/10.1002/cl2.1048>

Powell C, Ellasante I, Korchmaros JD, Haverly K, & Stevens S. (2016). ITEAM: Outcomes of an affirming system of care serving LGBTQ youth experiencing homelessness. *Families in Society*, 97(3), 181–190. <https://doi.org/10.1606/1044-3894.2016.97.24>

Pratt R, Pernat C, Kerandi L, Kmiecik A, Strobel-Ayres C, Joseph A, Rose S A E, Luo X, Cooney N, Thomas J, & Okuyemi K. (2019, November). Addressing Smoking in Sheltered homeless with Intensive Smoking Treatment. *ANZCTR*. <https://anzctr.org.au/Trial/Registration/TrialReview.aspx?ACTRN=12619001564145>

Quinton M L, Parry B J, Cumming J, & Clarke F J. (2021). An evaluation of My Strengths Training for Life (TM) for improving resilience and well-being of young people experiencing homelessness. *Journal of Community Psychology*. <https://doi.org/10.1002/jcop.22517>

RAFT. (n.d.). Youth Reconnect works. <http://www.theraft.ca/files/RAFT-YouthReconnectWorks.pdf>

Rajabiun S T M, Quinn E K, Borne D, Maskay M H, Giordano T P, Cabral H J, & Davis-Plourde K. (2020). Pathways to housing stability and viral suppression for people living with HIV/AIDS: findings from the Building a Medical Home for Multiply Diagnosed HIV-positive Homeless Populations initiative. *Plos ONE [Electronic Resource]*, 15, e0239190–e0239190. <https://doi.org/10.1371/journal.pone.0239190>

Randers M B, Petersen J, Andersen L J, Krusturup B R, Hornstrup T, Nielsen J J, Nordentoft M, & Krusturup P. (2012). Short-term street soccer improves fitness and cardiovascular health status of homeless men. *European Journal of Applied Physiology*, 112(6), 2097–2106.

Rapp R C. (2006). Case management and vouchers improve uptake of methadone treatment programmes. *Evidence-Based Mental Health*, 9(3), 81. <https://doi.org/10.1136/ebmh.9.3.81>

Rash C J, Alessi S M, & Petry N M. (2017). Substance abuse treatment patients in housing programs respond to contingency management interventions. *Journal of Substance Abuse Treatment*, 72, 97–102. <https://doi.org/10.1016/j.jsat.2016.07.001>

Rash C J, Petry N M, & Alessi S M. (2018). A randomized trial of contingency management for smoking cessation in the homeless. *Psychology of Addictive Behaviors*, 32(2), 141–148. <https://doi.org/10.1037/adb0000350>

Rashid S. (2004). Evaluating a Transitional Living Program for Homeless, Former Foster Care Youth. *Research on Social Work Practice*, 14, 240–248. <https://doi.org/10.1177/1049731503257883>

Rathod S D, Guise A, Annand P J, Hosseini P, Williamson E, Miners A, Bowgett K, Burrows M, Aldridge R W, Luchenski S, Menezes D, Story A, Hayward A, & Platt L. (2021). Peer advocacy and access to healthcare for people who are homeless in London, UK: a mixed method impact, economic and process evaluation protocol. *BMJ Open*, 11(6), e050717–e050717. <https://doi.org/10.1136/bmjopen-2021-050717>

Raven M C, K. M., Niedzwiecki M. J. (2020). A randomized trial of permanent supportive housing for chronically homeless persons with high use of publicly funded services. *Health Services Research*, 55, 797–806.

Reback C J, Peck J A, Dierst-Davies R, Nuno M, Kamien J B, & Amass L. (2009). Contingency management reduces substance use and increases healthy behaviours among homeless, out-of-treatment MSM. *Journal of Substance Abuse Treatment*, 29(3), 123. <https://doi.org/10.1016/j.jsat.2010.06.007>

Reid N Lamanna D, Wen S, Durbin A, Rajakulendran T, Stergiopoulos V, & Kron A. (2021). Building Bridges to Housing for homeless adults with intellectual and developmental disabilities: Outcomes of a cross-sector intervention. *Journal of Applied Research in Intellectual Disabilities*, 34(1), 16–27. <https://doi.org/10.1111/JAR.12779>

Reid N, Mason J, Kurdyak P, Nisenbaum R, de Oliveira C, Hwang S, & Stergiopoulos V. (2021). Evaluating the Impact of a Critical Time Intervention Adaptation on Health Care Utilization among Homeless Adults with Mental Health Needs in a Large Urban Center. *Canadian Journal of Psychiatry*. <https://doi.org/10.1177/0706743721996114>

Reid N, Nisenbaum R, Hwang SW, Durbin A, Kozloff N, Wang R, & Stergiopoulos V. (2021). The Impact of Financial Incentives on Service Engagement Among Adults Experiencing Homelessness and Mental Illness: A Pragmatic Trial Protocol. *Frontiers in Psychiatry*, 12, 1316–1316. <https://doi.org/10.3389/fpsyt.2021.722485>

Rew L, Fouladi R T, Land L, & Wong Y J. (2007). Outcomes of a brief sexual health intervention for homeless youth. *Journal of Health Psychology*, 12(5), 818–832. <https://doi.org/10.1177/1359105307080617>

Rew L, Powell T, Brown A, Becker H, & Slesnick N. (2017). An Intervention to Enhance Psychological Capital and Health Outcomes in Homeless Female Youths. *Western Journal of Nursing Research*, 39, 356–373. <https://doi.org/10.1177/0193945916658861>

Rezansoff S N, Moniruzzaman A, Fazel S, McCandless L, Procyshyn R, & Somers J M. (2016). Housing first improves adherence to antipsychotic medication among formerly homeless adults with schizophrenia: Results of a randomized controlled trial. *Schizophrenia Bulletin*, 43(4), 852–861. <https://doi.org/10.1093/schbul/sbw136>

Rhoades H Henwood B F, W. S. L. (2019). Changes in Self-Rated Physical Health After Moving Into Permanent Supportive Housing. *American Journal of Health Promotion*, 33, 1073–1076. <https://doi.org/10.1177/0890117119849004>

Riccio J & Deitch V. (2019). The Rent Reform Demonstration: Early Effects on Employment and Housing Subsidies. U.S. Department of Housing and Urban Development. <https://www.huduser.gov/portal/sites/default/files/pdf/RentReform-EarlyEffects.pdf>

Riccio J, Verma N, & Deitch V. (2019). The Rent Reform Demonstration: Interim Findings on Implementation, Work, and Other Outcomes. U.S. Department of Housing and Urban Development. <https://www.mdrc.org/sites/default/files/RentReform-InterimFindings.pdf>

Ricelli S E. (2017). Problem-solving therapy to foster resilience among Veterans who are homeless or at-risk for homelessness: A pilot randomized controlled trial. *Dissertation Abstracts International: Section B: The Sciences and Engineering*, 78, No Pagination Specified.

Ripka S, Černá E, Kubala P, & Krčál O. (2018). The Housing First for Families in Brno Trial Protocol: A Pragmatic Single-Site Randomized Control Trial of Housing First Intervention for Homeless Families in Brno, Czech Republic. *European Journal of Homelessness*, 12(1), 133–150.

Rodriguez-Moreno S, Farchione TJ, Roca P, Marín C, Guillén AI, & Panadero S. (2020). Initial Effectiveness Evaluation of the Unified Protocol for Transdiagnostic Treatment of Emotional Disorders for Homeless Women. *PubMed*. <https://doi.org/10.1101/2020.08.11.20181111>

org/10.1177/0145445520982562

Rog D J, Marshall T, Dougherty R H, George P, Daniels A S, Ghose S S, & Delphin-Rittmon M E. (2014). Permanent Supportive housing: Assessing the evidence. *Psychiatric Services*, 65(3), 287–294. <https://doi.org/10.1176/appi.ps.201300261>

Rog D J, Wagner C A, Abbruzzi E L, & Henderson K A. (2021). Housing Matters, Services Might: Findings from the High Needs Families Program Evaluation. *Annals of the American Academy of Political and Social Science*, 693, 209–229. <https://doi.org/10.1177/0002716221997037>

Rolston H, Geyer J, Locke G, Metraux S, & Treglia D. (2013). Evaluation of the homebase community prevention program. Final Report, Abt Associates Inc, June, 6, 2013.

Rosenblum A, Nuttbrock L, McQuiston H, Magura S, & Joseph H. (2002). Medical outreach to homeless substance users in New York City. *Substance Use & Misuse*, 37(8–10), 1269–1273. <https://doi.org/10.1081/JA-120004184>

Rosenheck R A & Mares A S. (2007). Implementation of supported employment for homeless veterans with psychiatric or addiction disorders: Two-year outcomes. *Psychiatric Services*, 58, 325–333.

Rosenheck R, Frisman L, & KasproW W. (1999). Improving access to disability benefits among homeless persons with mental illness: An agency-specific approach to services integration. *American Journal of Public Health*, 89(4), 524–528.

Rosenheck R, KasproW W, Frisman L, & Liu M W. (2003a). Cost-effectiveness of supported housing for homeless persons with mental illness. *Archives of General Psychiatry*, 60(9), 940–951.

Rosenheck R, KasproW W, Frisman L, & Liu M W. (2003b). Cost-effectiveness of supported housing for homeless persons with mental illness. *Archives of General Psychiatry*, 60(9), 940–951.

Rothbard A B, Min S Y, Kuno E, & Wong Y L I. (2004). Long-term Effectiveness of the ACCESS Program in Linking Community Mental Health Services to Homeless Persons With Serious Mental Illness. *The Journal of Behavioral Health Services & Research*, 31, 441–449. <https://doi.org/10.1007/BF02287695>

Rotheram M J, Fernandez M I, Lee S J, Abdalian S E, Kozina L, Koussa M, Comulada W S, Klausner J D, Arnold E M, Ocasio M A, & Swendeman D. (2019). Strategies to Treat and Prevent HIV in the United States for Adolescents and Young Adults: Protocol for a Mixed-Methods Study. *JMIR Research Protocols*, 8, e10759. <https://doi.org/10.2196/10759>

Roy M, Fiona K, Brendan B, & Garcia I E. (2018). Changes in the self-rated well-being of people who move from congregated settings to personalized arrangements and group home placements. *Journal of Intellectual Disabilities*, 22(1), 49–60. <https://doi.org/10.1177/1744629516674086>

Russolillo A, Patterson M, McCandless L, Moniruzzaman A, & Somers J. (2014). Emergency department utilisation among formerly homeless adults with mental disorders after one year of Housing First interventions: A randomised controlled

trial. *European Journal of Housing Policy*, 14(1), 79–97. <https://doi.org/10.1080/14616718.2014.884881>

Sacks S, Sacks J Y, McKendrick K, Pearson F S, Banks S, & Harle M. (2004). Outcomes from a Therapeutic Community for Homeless Addicted Mothers and Their Children. *Administration and Policy in Mental Health*, 31(4), 313–338.

Sadowski L S, Kee R A, & VanderWeele T J. (2009). Effect of a Housing and Case Management Program on Emergency Department Visits and Hospitalizations Among Chronically Ill Homeless Adults A Randomized Trial. *Jama-Journal of the American Medical Association*, 301(17), 1771–1778. <https://doi.org/10.1001/jama.2009.561>

Sajatovic M, Levin J, Ramirez L F, Hahn D Y, Tatsuoka C, Bialko C S, Cassidy K A, Fuentes-Casiano E, & Williams T D. (2013). A Prospective trial of customized adherence enhancement plus long-acting injectable antipsychotic medication in homeless or recently homeless individuals with schizophrenia or schizoaffective disorder. *The Journal of Clinical Psychiatry*, 74(12), 1249–1255. <https://doi.org/10.4088/JCP.12m08331>

Samuels J, Fowler P J, Ault-Brutus A, Tang D, & Marcal K. (2015). Time-Limited Case Management for Homeless Mothers With Mental Health Problems: Effects on Maternal Mental Health. *Journal of the Society for Social Work and Research*, 6(4), 515–539. <https://doi.org/10.1086/684122>

Sanbonmatsu L, Katz L F, Ludwig J, Gennetian L A, Duncan G J, Kessler R C, Adam E K, McDade T, & Lindau S T. (2011). Moving to opportunity for fair housing demonstration program: Final impacts evaluation (p. 287). US Dept of Housing and Urban Development.

Santa M D, Cuccaro P, Bender K, Cron S, Fine M, & Sibinga E. (2020). Feasibility of a Mindfulness-Based Intervention with Sheltered Youth Experiencing Homelessness. *Journal of Child and Family Studies*, 29(1), 261–272.

Savino R F, Bowen E A, Irish A, & Johnson A K. (2020). Evaluating the impact of in-home behavioral health services on housing first residents' emergency room and inpatient utilization. *Advances in Social Work*, 20(3), 675–693.

Saxon A J, Malte C A, Sloan K L, Baer J S, Calsyn D A, Nichol P, Chapko M K, & Kivlahan D R. (2006). Randomized Trial of Onsite Versus Referral Primary Medical Care for Veterans in Addictions Treatment. *Medical Care*, 44(4), 334–342. <https://doi.org/10.1097/01.mlr.0000204052.95507.5c>

Scheibein F. (2020). A three-month Electronic Nicotine Delivery System (ENDS)-based intervention in a homeless context: Efficacy, challenges and opportunities. *National Library of Medicine*. <https://doi.org/10.1186/ISRCTN14767579>

Schueller S M, Rufa A K, Dowdle C L, Gross G D, Karnik N S, Zalta A K, & Glover A C. (2019). A Mobile Phone-Based Intervention to Improve Mental Health Among Homeless Young Adults: Pilot Feasibility Trial. *JMIR MHealth and UHealth*, 7(7), e12347. <https://doi.org/10.2196/12347>

Schumacher J E, Mennemeyer S T, Milby J B, Wallace D, & Nolan K. (2002). Costs and effectiveness of substance abuse treatments for homeless persons

(Structured abstract). *Journal of Mental Health Policy and Economics*, 5(1), 33–42.

Schumacher J E, Milby J B, Wallace D, Meehan D C, Kertesz S, Vuchinich R, Dunning J, & Usdan S. (2003). Meta-Analysis of Day Treatment and Contingency-Management Dismantling Research: Birmingham Homeless Cocaine Studies (1990-2006). *Journal of Consulting and Clinical Psychology*, 75(5), 823–828. <https://doi.org/10.1037/0022-006X.75.5.823>

Schumacher J E, Milby J B, Wallace D, Simpson C, Frison S, McNamara C, & Usdan S. (2003). Diagnostic compared with abstinence outcomes of day treatment and contingency management among cocaine-dependent homeless persons. *Experimental and Clinical Psychopharmacology*, 11(2), 146–157. <https://doi.org/10.1037/1064-1297.11.2.146>

Schumacher J E, Usdan S, Milby J B, Wallace D, & McNamara C. (2000). Abstinient-contingent housing and treatment retention among crack-cocaine-dependent homeless persons. *Journal of Substance Abuse Treatment*, 19, 81–88.

Schutt R K, Goldfinger S M, & Penk W E. (1997). Satisfaction with residence and with life: When homeless mentally ill persons are housed. *Evaluation and Program Planning*, 20(2), 185–194. [https://doi.org/10.1016/S0149-7189\(96\)00049-3](https://doi.org/10.1016/S0149-7189(96)00049-3)

Schutt R K, Mitchell-Miland C, McCarthy S, Chinman M, Ellison M, & Schultz M. (2021). Explaining Service Use and Residential Stability in Supported Housing: Problems, Preferences, Peers. *Medical Care*, 59, S117–S123. <https://doi.org/10.1097/MLR.0000000000001498>

Seidman L J, Schutt R K, Caplan B, Tolomiczenko G S, Turner W M, & Goldfinger S M. (2003). The effect of housing interventions on neuropsychological functioning among homeless persons with mental illness. *Psychiatric Services (Washington, D.C.)*, 54(6), 905–908. <https://doi.org/10.1176/appi.ps.54.6.905>

Seivwright A, Callis Z, Thielking M, & Flatau P. (2020). Chronic homelessness in Melbourne: Third-year outcomes of Journey to Social Inclusion Phase 2 study participants. *Social Inclusion Phase 2 Study Participants*. https://apo.org.au/sites/default/files/resource-files/2020-08/apo-nid306249_5.pdf

Sekiguchi T, Hagiwara Y, Sugawara Y, Tomata Y, Tanji F, Yabe Y, Itoi E, & Tsuji I. (2019). Moving from prefabricated temporary housing to public reconstruction housing and social isolation after the Great East Japan Earthquake: A longitudinal study using propensity score matching. *BMJ Open*, 9, e026354corr1. <https://doi.org/10.1136/bmjopen-2018-026354>

Seron C, Frankel M, Ryzin G V, & Kovath J. (2001). The impact of legal counsel on outcomes for poor tenants in New York City's housing court: Results of a randomized experiment. *Law and Society Review*, 35(2), 419–434.

Shaw J, Conover S, Herman D, Jarrett M, Leese M, McCrone P, Murphy C, Senior J, Susser E, Thornicroft G, & Wright N. (2017). Critical time Intervention for Severely mentally ill Prisoners (CrISP): A randomised controlled trial. *Europe PMC*, 21(2), 187–193.

Shelley D, Cantrell J, Wong S, & Warn D. (2010). Smoking cessation among

sheltered homeless: A pilot. *American Journal of Health Behavior*, 34, 544–552. <https://doi.org/10.5993/AJHB.34.5.4>

Shern D L, Felton C J, Hough R L, Lehman A F, Goldfinger S, Valencia E, Dennis D, Straw R, & Wood P A. (1997). Housing Outcomes for Homeless Adults With Mental Illness: Results From the Second-Round McKinney Program. *Psychiatric Services*, 48(2), 239–241.

Shern D L, Tsemberis S, Anthony W, Lovell A M, Richmond L, Felton C J, Winarski J, & Cohen M. (2000). Serving street-dwelling individuals with psychiatric disabilities: Outcomes of a psychiatric rehabilitation clinical trial. *American Journal of Public Health*, 90(12), 1873–1878.

Shinn M, Brown SR, Wood M, & Gubits D. (2016). Housing and Service Interventions for Families Experiencing Homelessness in the United States: An Experimental Evaluation. 10(1), 13.

Shinn M, Samuels J, Fischer S N, Thompkins A, & Fowler P J. (2015). Longitudinal Impact of a Family Critical Time Intervention on Children in High-Risk Families Experiencing Homelessness: A Randomized Trial. *American Journal of Community Psychology*, 56(3–4), 205–216. <https://doi.org/10.1007/s10464-015-9742-y>

Siegel C E, Samuels J, Tang D I, Berg I, Jones K, & Hopper K. (2006). Tenant Outcomes in Supported Housing and Community Residences in New York City. *Psychiatric Services*, 57(7), 982–991. <https://doi.org/10.1176/ps.2006.57.7.982>

Silva E N, Pereira A C E D S, Araújo W N D, & Elias F T S. (2018). A systematic review of economic evaluations of interventions to tackle tuberculosis in homeless people. *Pan American Journal of Public Health*, 42, e40.

Slesnick N, Dashora P, Letcher A, Erdem G, & Serovich J. (2009). A review of services and interventions for runaway and homeless youth: Moving forward. *Children and Youth Services Review*, 31, 732–742. <https://doi.org/10.1016/j.childyouth.2009.01.006>

Slesnick N & Erdem G. (2012). Intervention for Homeless, Substance Abusing Mothers: Findings from a Non-Randomized Pilot. *Behavioral Medicine*, 38, 36–48. <https://doi.org/10.1080/08964289.2012.657724>

Slesnick N & Erdem G. (2013). Efficacy of ecologically-based treatment with substance-abusing homeless mothers: Substance use and housing outcomes. *Journal of Substance Abuse Treatment*, 45(5), 416–425. <https://doi.org/10.1016/j.jsat.2013.05.008>

Slesnick N, Guo X, Brakenhoff B, & Bantchevska D. (2005). Outcome of CRA with Homeless Adolescents: Preliminary findings. 67th annual scientific meeting of the college on problems of drug dependence; 2005 jun 18-23; orlando, florida. <http://onlinelibrary.wiley.com/doi/10.1002/coc.10039>

Slesnick N, Guo X, Brakenhoff B, & Bantchevska D. (2015). A comparison of three interventions for homeless youth evidencing substance use disorders: Results of a randomized clinical trial. *Journal of Substance Abuse Treatment*, 54, 1–13.

Slesnick N, Prestopnik J L, Meyers R J, & Glassman M. (2007). Treatment outcome for street-living, homeless youth. *Addictive Behaviors*, 32(6), 1237–1251.

Slesnick N, Zhang J, Feng X, Wu Q, Walsh L, & Granello DH. (2020). Cognitive Therapy for Suicide Prevention: A Randomized Pilot with Suicidal Youth Experiencing Homelessness. *Cognitive Therapy and Research*, 44(2), 402–411.

Smelson D A, Chinman M, Hannah G, Byrne T, & McCarthy S. (2018). An evidence-based co-occurring disorder intervention in VA homeless programs: Outcomes from a hybrid III trial. *BMC Health Services Research*, 18(1), 332.

Smelson D A, Perez C K, Farquhar I, Byrne T, & Colegrove A. (2018). Permanent Supportive Housing and Specialized Co-Occurring Disorders Wraparound Services for Homeless Individuals. *Journal of Dual Diagnosis*, 14(4), 247–256. <https://doi.org/10.1080/15504263.2018.1506195>

Smith J E, Meyers R J, & Delaney H D. (1998). The community reinforcement approach with homeless alcohol-dependent individuals. *Journal of Consulting and Clinical Psychology*, 66(3), 541. <https://doi.org/10.1037/0022-006X.66.3.541>

Soar K, Dawkins L, Robson D, & Cox S. (2020). Smoking amongst adults experiencing homelessness: A systematic review of prevalence rates, interventions and the barriers and facilitators to quitting and staying quit. *Journal of Smoking Cessation*. <https://doi.org/10.1017/jsc.2020.11>

Somers J M, Moniruzzaman A, & Palepu A. (2015). Changes in daily substance use among people experiencing homelessness and mental illness: 24-month outcomes following randomization to Housing First or usual care. *Addiction*, 110, 1605–1614. <https://doi.org/10.1111/add.13011>

Somers J M, Moniruzzaman A, Patterson M, Currie L, Rezansoff S N, Palepu A, & Fryer K. (2017). A randomized trial examining housing first in congregate and scattered site formats. *PloS One*, 12(1), e0168745.

Somers J M, Rezansoff S N, Moniruzzaman A, Palepu A, & Patterson M. (2013). Housing first reduces re-offending among formerly homeless adults with mental disorders: Results of a randomized controlled trial. *Plos One*, 8, e72946. <https://doi.org/10.1371/journal.pone.0072946>

Song J, Ratner E R, Wall M M, Bartels D M, Ulvestad N, Petroskas D, West M, Weber-Main A M, Grengs L, & Gelberg L. (2010). Effect of an End-of-Life Planning Intervention on the completion of advance directives in homeless persons: A randomized trial. *Annals of Internal Medicine*, 153, 76–84. <https://doi.org/10.7326/0003-4819-153-2-201007200-00003>

Sonja L R. (2018). A transitional housing program for older foster youth: How do youth fare after exiting? *Children and Youth Services Review*, 88, 361–365. <https://doi.org/10.1016/j.childyouth.2018.03.042>

Sosin M R, Bruni M, & Reidy M. (1996). Paths and impacts in the progressive independence model: A homelessness and substance abuse intervention in Chicago. *Journal of Addictive Diseases*, 14(4), 1–20.

Sosin M R, George C C, & Grossman S F. (2012). Social services in interim housing programs and shelters. *Housing Policy Debate*, 22, 527–550. <https://doi.org/10.10>

80/10511482.2012.697911

Speirs V, Johnson M, & Jirojwong S. (2013). A systematic review of interventions for homeless women. *Journal of Clinical Nursing*, 22, 1080–1093. <https://doi.org/10.1111/jocn.12056>

Srebnik D, Connor T, & Sylla L. (2013). A pilot study of the impact of housing first-supported housing for intensive users of medical hospitalization and sobering services. *American Journal of Public Health*, 103(2), 316–321. <https://doi.org/10.2105/AJPH.2012.300867>

Stahler G, Shipley Jr TE, Bartelt D, Ducette J, & Shandler IW. (1996). Evaluating Alternative Treatments for Homeless Substance-Abusing Men: *Journal of Addictive Diseases*, 14(4), 151–167. https://doi.org/10.1300/J069v14n04_09

Starks S L. (2012). Cost and effectiveness of full-service partnerships: Assertive community treatment of severe mental illness following the California Mental Health Services Act [ProQuest]. In *Dissertation Abstracts International: Section B: The Sciences and Engineering (Vol. 73)*. <https://search.proquest.com/openview/d96719d7ac7e98de0b8ad58a75c6a1fd/1?pq-origsite=gscholar&cbl=18750&diss=y>

Steele R W & O'Keefe M A. (2001). A program description of health care interventions for homeless teenagers. *Clinical Pediatrics*, 40, 259–263. <https://doi.org/10.1177/000992280104000504>

Stefancic A & Tsemberis S. (2007). Housing First for long-term shelter dwellers with psychiatric disabilities in a suburban county: A four-year study of housing access and retention. *Journal of Primary Prevention*, 28(3–4), 265–279. <https://doi.org/10.1007/s10935-007-0093-9>

Stephen M, Steven M C, & Dennis C P. (2003). The New York-New York housing initiative and use of public shelters by persons with severe mental illness. *Psychiatric Services*, 54(1), 67–71.

Stergiopoulos V, Dewa C S, Tanner G, Chau N, Pett M, & Connelly J L. (2010). Addressing the needs of the street homeless: A collaborative approach. *International Journal of Mental Health*, 39, 3–15. <https://doi.org/10.2753/IMH0020-7411390101>

Stergiopoulos V, Gozdzik A, Misir V, Skosireva A, Connelly J, Sarang A, Whisler A, Hwang S W, O'Campo P, & McKenzie K. (2015). Effectiveness of housing first with intensive case management in an ethnically diverse sample of homeless adults with mental illness: A randomized controlled trial. *PLoS One*, 10(7), e0130281.

Stergiopoulos V, Gozdzik A, Misir V, Skosireva A, Sarang A, Connelly J, Whisler A, & McKenzie K. (2016). The effectiveness of a Housing First adaptation for ethnic minority groups: Findings of a pragmatic randomized controlled trial. *BMC Public Health*, 16(1), 1–11. <https://doi.org/10.1186/s12889-016-3768-4>

Stergiopoulos V, Gozdzik A, Nisenbaum R, Durbin J, Wang S H, O'Campo P, Tepper J, & Wasylenki D. (2018). Bridging Hospital and Community Care for Homeless Adults with Mental Health Needs: Outcomes of a Brief Interdisciplinary Intervention. *Canadian Journal of Psychiatry - Revue Canadienne de Psychiatrie*,

63, 774–784. <https://doi.org/10.1177/0706743718772539>

Stergiopoulos V, Hwang S W, Gozdzik A, Nisenbaum R, Latimer E, Rabouin D, Adair C E, Bourque J, Connelly J, Frankish J, & Katz L Y. (2015). Effect of Scattered-Site housing using rent supplements and intensive case management on housing stability among homeless adults with mental illness. *Jama*, 313(9), 905–915. <https://doi.org/10.1001/jama.2015.1163>

Stergiopoulos V, Mejia-Lancheros C, Nisenbaum R, Wang R, Lachaud J, O'Campo P, & Hwang S W. (2019). Long-term effects of rent supplements and mental health support services on housing and health outcomes of homeless adults with mental illness: Extension study of the At Home/Chez Soi randomised controlled trial. *The Lancet. Psychiatry*, 6, 915–925. [https://doi.org/10.1016/S2215-0366\(19\)30371-2](https://doi.org/10.1016/S2215-0366(19)30371-2)

Stockwell T, Pauly B, Chow C, Vallance K, & Perkin K. (2013). Evaluation of a Managed Alcohol Program in Vancouver, BC: Early Findings and Reflections on Alcohol Harm Reduction (Vol. 9, Issue 1). <https://www.homelesshub.ca/sites/default/files/attachments/bulletin9-evaluation-managed-alcohol-program.pdf>

Stormon N, Anderson J, Ford P J, & Sowa P M. (2020). Facilitating Access to Dental Care for People Experiencing Homelessness. *JDR Clinical and Translational Research*. <https://doi.org/10.1177/2380084420952350>

Stringer C, Loosemore M, Moller E, Jackson S E, López-Sánchez G F, Firth J, Johnstone J, Stubbs B, Vancampfort D, & Smith L. (2019). Promoting physical activity in vulnerable adults at risk of homelessness: A randomised controlled trial protocol. *BMJ Open*, 9, e026466. <https://doi.org/10.1136/bmjopen-2018-026466>

Sullivan C M, Goodman L A, Virden T, Strom J, & R Ramirez. (2018). Evaluation of the effects of receiving trauma-informed practices on domestic violence shelter residents. *American Journal of Orthopsychiatry*, 88, 563–570. <https://doi.org/10.1037/ort0000286>

Sundin E C, Bowpitt G, Boatman C A, Williams A J, Sarkar M, Baguley T S, & Mrowiec A. (2020). Feasibility and acceptability of an intervention for enhancing reintegration in adults with experience of homelessness. *European Journal of Public Health*, 30, 595–600. <https://doi.org/10.1093/eurpub/ckz202>

Susser E, Valencia E, Conover S, Felix A, Tsai W Y, & Wyatt R J. (1997). Preventing Recurrent Homelessness among Mentally 111 Men: A “Critical Time” Intervention after Discharge from a Shelter. *American Journal of Public Health*, 87(2), 256–262. <https://doi.org/10.2105/AJPH.87.2.256>

Tabol C, Drebing C, & Rosenheck R. (2010). Studies of “supported” and “supportive” housing: A comprehensive review of model descriptions and measurement. *Evaluation and Program Planning*, 33(4), 446–456. <https://doi.org/10.1016/j.evalprogplan.2009.12.002>

Taylor H, Genevieve D F, Benjamin H F, Harmony R, Eric R, & Suzanne W L. (2019). Los Angeles housing models and neighbourhoods role in supportive housing residents social integration. *Housing Studies*, 34(4), 609–635. <https://doi.org/10.1080/02673037.2018.1462308>

Taylor J. (2014). Housing Assistance for Households Experiencing Homelessness.

https://b3cdn.net/naeh/4f955097bc2cfb8c31_iym6b8y5u.pdf

Tempier R, Balbuena L, Garety P, & Craig T J. (2012). Does Assertive Community Outreach Improve Social Support? Results From the Lambeth Study of Early-Episode Psychosis. *Psychiatric Services*, 63(3), 216–222. <https://doi.org/10.1176/appi.ps.20110013>

Thomas Y, Gray M, & McGinty S. (2011). A systematic review of occupational therapy interventions with homeless people. *Occupational Therapy In Health Care*, 25, 38–53. <https://doi.org/10.3109/07380577.2010.528554>

Thompson Jr R G, Elliott J C, Hu M C, Aivadyan C, Aharonovich E, & Hasin D S. (2017). Short-term effects of a brief intervention to reduce alcohol use and sexual risk among homeless young adults: Results from a randomized controlled trial. *Addiction Research & Theory*, 25, 24–31. <https://doi.org/10.1080/16066359.2016.1193165>

Thompson R G, Stohl M, Aharonovich E, Hasin D S, & Aivadyan C. (2020). Smartphone application plus brief motivational intervention reduces substance use and sexual risk behaviors among homeless young adults: Results from a randomized controlled trial. *Psychology of Addictive Behaviors*, 34, 641–649. <https://doi.org/10.1037/adb0000570>

Thulien N S, Kozloff N, McCay E, Nisenbaum R, Wang A, & Hwang S W. (2019). Evaluating the Effects of a Rent Subsidy and Mentoring Intervention for Youth Transitioning Out of Homelessness: Protocol for a Mixed Methods, Community-Based Pilot Randomized Controlled Trial. *JMIR Research Protocols*, 8(12), e15557.

Tiderington E. (2020). Moving on from permanent supportive housing: Implementation and outcomes of the New York City Moving On Initiative. Microsoft Academic. <https://doi.org/10.7282/T3-S60X-PR48>

Tiderington E, Aykanian A, Huang B, & Tsai J. (2021). Change in housing environment and residential satisfaction following exit from permanent supportive housing. *Journal of Community Psychology*, 49(2), 305–320. <https://doi.org/10.1002/JCOP.22458>

Tinland A, Fortanier C, Girard V, Laval C, Videau B, Rhenter P, Greacen T, Falissard B, Apostolidis T, Lançon C, & Boyer L. (2013). Evaluation of the “Housing First Program” in Homeless Patients With Severe Mental Disorders in France. *Clinical Trials*.Gov, 1. <https://clinicaltrials.gov/ct2/show/NCT01570712>

Tinland A, Loubiere S, Boucekine M, Boyer L, Fond G, Girard V, & Auquier P. (2019). Effectiveness of a Housing Support Team Intervention with a Recovery-Oriented Approach on Hospital and Emergency Department Use by Homeless People with Severe Mental Illness: A Randomized Controlled Trial. *Epidemiology and Psychiatric Sciences*, 29, E169.

Tomita A & Herman D B. (2012). The impact of critical time intervention in reducing psychiatric rehospitalization after hospital discharge. *Psychiatric Services*, 63(9), 935–937. <https://doi.org/10.1176/appi.ps.201100468>

Tomita A & Herman DB. (2015). The role of a critical time intervention on the experience of continuity of care among persons with severe mental illness after

hospital discharge. *Journal of Nervous and Mental Disease*, 203, 65–70. <https://doi.org/10.1097/NMD.0000000000000224>

Tomita A, Lukens E P, & Herman D B. (2014). Mediation Analysis of Critical Time Intervention for Persons Living With Serious Mental Illnesses: Assessing the Role of Family Relations in Reducing Psychiatric Rehospitalization. *Psychiatric Rehabilitation Journal*, 37(1), 4–10. <https://doi.org/10.1037/prj0000015>

Tomita A M. (2011). Examining the impact and theoretical pathway of critical time intervention on psychiatric re-hospitalization outcomes among formerly homeless individuals with severe mental illness. *Dissertation Abstracts International Section A: Humanities and Social Sciences*, 72, 2159.

Toombs E Lund J, Pitura V A, Toneguzzi K, Leon S, Bobinski T, Vitopoulos N, Frederick T, Kidd S, & Mushquash C J. (2021). Adaption and implementation of the Housing Outreach Program Collaborative (HOP-C) North for Indigenous youth. *American Journal of Orthopsychiatry*, 91, 96–108. <https://doi.org/10.1037/ort0000520>

Toro P A, Rabideau J M P, Bellavia C W, Daeschler C V, Wall D, Thomas D M, & Smith S J. (1997). Evaluating an Intervention for Homeless Persons: Results of a Field Experiment. *Journal of Consulting and Clinical Psychology*, 65(3), 476–484. <https://doi.org/10.1037/0022-006X.65.3.476>

Trusty M L. (1997). An experimental comparison of three types of case management for homeless mentally ill persons. *Psychiatr Serv.*, 48(4), 497–503. <https://doi.org/10.1176/ps.48.4.497>

Tsai J, Kaspro W, & Rosenheck R A. (2011). Exiting homelessness without a voucher: A comparison of independently housed and other homeless veterans. *Psychological Services*, 8, 114–122. <https://doi.org/10.1037/a0023189>

Tsai J, Mares A S, & Rosenheck R A. (2010). A Multisite Comparison of Supported Housing for Chronically Homeless Adults: “Housing First” Versus “Residential Treatment First.” *Psychological Services*, 7(4), 219–232. <https://doi.org/10.1037/a0020460>

Tsemberis S, Gulcur L, & Nakae M. (2004). Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals With a Dual Diagnosis. *American Journal of Public Health*, 94(4), 651–656. <https://doi.org/10.2105/AJPH.94.4.651>

Tucker J S, Linnemayr S, Shadel W G, DeYoreo M, Zutshi R, & Pedersen E R. (2020). A text message intervention for quitting cigarette smoking among young adults experiencing homelessness: Study protocol for a pilot randomized controlled trial. *Addiction Science & Clinical Practice*, 15(1), 11–11.

Tucker J S, Ewing B A, Miles J N, Pedersen E R, & D’Amico E J. (2020). Study protocol for a group-based motivational interviewing brief intervention to reduce substance use and sexual risk behavior among young adults experiencing homelessness. *Addiction Science & Clinical Practice*, 76, 20–27. <https://doi.org/10.1016/j.jsat.2017.02.008>

Tucker J S, Osilla K C, Golinelli D, & Kennedy D P. (2021). Motivational network intervention to reduce substance use and increase supportive connections among

formerly homeless emerging adults transitioning to housing: Study protocol for a pilot randomized controlled trial. *Addiction Science & Clinical Practice*, 16(1), 1–9. <https://doi.org/10.1186/s13722-021-00227-9>

Udodirim O, Kristin W M, Rose-Marie S F, & David H P. (2019). Using Directly Observed Therapy (DOT) for latent tuberculosis treatment A hit or a miss? A propensity score analysis of treatment completion among 274 homeless adults in Fulton County, GA. *PLOS ONE*, 14(6), e0218373. <https://doi.org/10.1371/journal.pone.0218373>

Upshur, C. C. (1985). The Bridge, Inc. Independent Living Demonstration. Research Report. ERIC. <https://files.eric.ed.gov/fulltext/ED269661.pdf>

Urbanoski K, Krausz M, Schutz C, Somers J M, Kirst M, Fleury M J, Stergiopoulos V, Patterson M, Strehlau V, Goering P, & Veldhuizen S. (2017). Effects of comorbid substance use disorders on outcomes in a Housing First intervention for homeless people with mental illness. *Addiction (Abingdon, England)*, 113(1), 137–145. <https://doi.org/10.1111/add.13928>

Vallesi S, Flatau P, Thielking M, Mackelprang J L, Taylor K M, Sala L L, Spiers J, Wood L, Martin K, Kragt D, Lester L, Whittaker E, & Courtney R J. (2019). A mixed methods randomised control trial to evaluate the effectiveness of the journey to social inclusion—Phase 2 intervention for chronically homeless adults: Study protocol. *BMC Public Health*, 19, 334. <https://doi.org/10.1186/s12889-019-6644-1>

van Vugt M D, Kroon H, Delespaul P A, & Mulder C L. (2012). Consumer-providers in assertive community treatment programs: Associations with client outcomes. *Psychiatric Services*, 63(5), 477–481.

Vet R D, Beijersbergen M D, Jonker I E, Lako D A, van Hemert A M, Herman D B, & Wolf J R. (2017). Critical Time Intervention for Homeless People Making the Transition to Community Living: A Randomized Controlled Trial. *American Journal of Community Psychology*, 60(1–2), 175. <https://doi.org/10.1002/ajcp.12150>

Victoria Ministry of Housing & Australian Institute of Family Studies. (1989). First evaluation report of the Victorian Ministry of Housing’s Capital Indexed Loan Pilot Scheme. https://aifs.gov.au/sites/default/files/publication-documents/first_evaluation_report_of_the_victorian_ministry_of_housings_capital_indexed_loan_pilot_scheme.pdf

Vijayaraghavan M & Apollonio D E. (2019). Engaging Adults Experiencing Homelessness in Smoking Cessation Through Large-Scale Community Service Events. *Health Promotion Practice*, 20(3), 325–327. <https://doi.org/10.1177/1524839919835280>

Vijayaraghavan M, Elser H, & Apollonio D. (2019). Interventions to reduce tobacco use in people experiencing homelessness. *Cochrane Database of Systematic Reviews*, 9. <https://doi.org/10.1002/14651858.cd013413>

Vijayaraghavan M, Frazer K, Lindson N, Apollonio D, & Elser H. (2020). Interventions to reduce tobacco use in people experiencing homelessness. *Cochrane Database of Systematic Reviews (Online)*, 12, CD013413–CD013413. <https://doi.org/10.1002/14651858.CD013413.pub2>

- Wade BP. (2009). The effectiveness of the advocacy and benefits homeless programs in reducing homelessness or at-risk for homelessness. Dissertation Abstracts International Section A: Humanities and Social Sciences, 70, 3217.
- Wagner V, Sy J, Weeden K, Blanchard T, Cauce AM, Morgan CJ, Moore E, Wurzbacher K, & Tomlin S. (1994). Effectiveness of intensive case management for homeless adolescents: Results of a 3-month follow-up. *Journal of Emotional and Behavioral Disorders*, 2(4), 219–227. <https://doi.org/10.1177/106342669400200404>
- Wainwright M K, Kosog K, Gilbert M K, Nolan C, Stellon E, Vitolo O, Canar W J, & Earle M. (2020). The Effect of Place of Service on Diabetic Screening Adherence in the Homeless Population. *Journal of Community Health*, 45(1), 73–80. <https://doi.org/10.1007/s10900-019-00718-6>
- Weber J J. (2019a). A systematic review of nurse-led interventions with populations experiencing homelessness. *Public Health Nursing*, 36, 96–106. <https://doi.org/10.1111/phn.12552>
- Weber J J. (2019b). A systematic review of nurse-led interventions with populations experiencing homelessness. *Public Health Nursing*, 36, 96–106. <https://doi.org/10.1111/phn.12552>
- Wee L E, Lee S, Oen K, Tsang T Y Y, Koh G C H, & Yee J. (2020). Trends in health screening participation and lifestyle behaviours after participation in a free, access-enhanced screening intervention in a low-income Singaporean rental-flat community. *Health & Social Care in the Community*, 28(2), 439–447. <https://doi.org/10.1111/hsc.12876>
- Weinreb L, Upshur C C, Fletcher-Blake D, Reed G, & Frisard C. (2016). Managing Depression Among Homeless Mothers: Pilot Testing an Adapted Collaborative Care Intervention. *PMC*, 18(2). <https://doi.org/10.4088/PCC.15m01907>
- Weissman E M, Covell N H, Kushner M, Irwin J, & Essock S M. (2005). Implementing peer-assisted case management to help homeless veterans with mental illness transition to independent housing. *Community Mental Health Journal*, 41(3), 267–276. <https://doi.org/10.1007/s10597-005-5001-2>
- Whisler A, Dosani N, To MJ, O'Brien K, Young S, & Hwang SW. (2021). The effect of a Housing First intervention on primary care retention among homeless individuals with mental illness. *PloS One*, 16(2). <https://doi.org/10.1371/journal.pone.0246859>
- Wiersema JJ, Cruzado-Quñones J, Cosme Pitre CG, & Jordan AO. (2020). Client outcomes from a multilevel intervention to support persons living with hiv and returning to the community after incarceration in Puerto Rico. *AIDS Education and Prevention*, 32(3), 181–195. <https://doi.org/10.1521/aeap.2020.32.3.181>
- Wiewel E W, Zhong Y, Beattie C M, Lim S, Walters S, Braunstein S L, Rojas J, & Singh T P. (2020). Housing Subsidies and Housing Stability are Associated with Better HIV Medical Outcomes Among Persons Who Experienced Homelessness and Live with HIV and Mental Illness or Substance Use Disorder. *AIDS and Behavior*, 24, 3252–3263. <https://doi.org/10.1007/s10461-020-02810-8>

- Winn J L, Shealy S E, Kropp G J, Felkins-Dohm D, Gonzales-Nolas C, & Francis E. (2013). Housing Assistance and Case Management: Improving Access to Substance Use Disorder Treatment for Homeless Veterans. *Psychological Services*, 10(2), 233–240. <https://doi.org/10.1037/a0031051>
- Wolff N, Helminiak T W, Morse G A, Calsyn R J, Klinkenbert W D, & Trusty M L. (1997). Cost effectiveness evaluation of Three approaches to case management for homeless mentally ill clients. *The American Journal of Psychiatry*, 154(3), 341–348. <https://doi.org/10.1176/ajp.154.3.341>
- Wolitski R J, Kidder D P, Pals S L, Royal S, Aidala A, Stall R, Holtgrave D R, Harre D, & Courtenay-Quirk C. (2010). Randomized Trial of the Effects of Housing Assistance on the Health and Risk Behaviors of Homeless and Unstably Housed People Living with HIV. *AIDS and Behavior*, 14(3), 493–503. <https://doi.org/10.1007/s10461-009-9643-x>
- Wong C J, Kolodner K, Fingerhood M, Bigelow G E, & Silverman K. (2005, June). A Therapeutic Workplace for Homeless Alcohol-Dependent Individuals. Proceedings of the 67th annual scientific meeting of the college on problems of drug dependence. <http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/429/CN-00714429/frame.html>
- Woodhall-Melnik J R & Dunn J R. (2016). A systematic review of outcomes associated with participation in Housing First programs. *Housing Studies*, 31(3), 287–304. <https://doi.org/10.1080/02673037.2015.1080816>
- Woollett, N., Bandeira, M., & Hatcher, A. (2020). Trauma-informed art and play therapy: Pilot study outcomes for children and mothers in domestic violence shelters in the United States and South Africa. *Child Abuse and Neglect*, 107, 104564. <https://doi.org/10.1016/j.chiabu.2020.104564>
- Yamin S, Aubry T, Volk J, Jetté J, Bourque J, & Crouse S. (2014). Peer Supportive Housing for Consumers of Housing First Who Experience Ongoing Housing Instability. *Canadian Journal of Community Mental Health*, 33, 61–76. <https://doi.org/10.7870/cjcmh-2014-034>
- Yazdani K, Sayre E C, Choi F, Jang K, Krausz R M, & Nikoo M. (2020). The impact of employment on recovery among individuals who are homeless with severe mental illness in the Vancouver At Home/Chez Soi trial. *Social Psychiatry and Psychiatric Epidemiology*, 55, 1619–1627. <https://doi.org/10.1007/s00127-020-01887-9>
- Ybarra M, Bosi A T B, Korchmaros J, & Emri S. (2019, May). Text Messaging-Based Smoking Cessation Program for Homeless Youth. *National Library of Medicine; Clinical Trials. Gov.* <https://clinicaltrials.gov/ct2/show/NCT03874585>
- Zalta A. (2019, September). Homeless Youth Study—Stepping Stone 2.0. *National Library of Medicine; Clinical Trials. Gov.* <https://clinicaltrials.gov/ct2/show/NCT03776422>
- Zha M, Goulet C, & Olson C L. (2020). Improving the Attitudes to Homeless Persons in a Family Medicine Residency. *Journal of Primary Care & Community Health*, 11. <https://doi.org/10.1177/2150132720949778>
- Zhang J & Slesnick N. (2018). Substance use and social stability of homeless

youth: A comparison of three interventions. *Psychology of Addictive Behaviors*, 32, 873–884. <https://doi.org/10.1037/adb0000424>

Zhang S X, Shoptaw S, Reback C, Yadav K, & Nyamathi A M. (2018). Cost-effective way to reduce stimulant-abuse among gay/bisexual men and transgender women: A randomized clinical trial with a cost comparison. *Public Health*, 154, 151–160. <https://doi.org/10.1016/j.puhe.2017.10.024>

Zhuo W L, Mott S, Magwood O, Mathew C, McLellan A, Kpade V, Gaba P, Kozloff N, Pottie K, & Andermann A. (2019). The impact of interventions for youth experiencing homelessness on housing, mental health, substance use, and family cohesion: A systematic review. *BMC Public Health*, 19, 1528. <https://doi.org/10.1186/s12889-019-7856-0>

Appendix 8 List of Impact Evaluations conducted in the UK

Aldridge, R., Yates, S., Hemming, S., Possas, L., Ferenando, G., Garber, E., Hayward, A., McHugh, T., Lipman, M., & Story, A. (2014). S80 Impact Of Peer Educators On Uptake Of Mobile X-ray Tuberculosis Screening At Homeless Hostels: A Cluster Randomised Controlled Trial. *Thorax*, 69(Suppl 2), A44–A45. <https://doi.org/10.1136/thoraxjnl-2014-206260.86>

Aldridge, S. (2019). Impact evaluation of the Rough Sleeping Initiative 2018 (Issue September). Ministry of Housing, Community and Local Government. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/831133/RSI_Impact_Evaluation.pdf

Bäumker, T., Netten, A., & Darton, R. (2010). Costs and outcomes of an extra care housing scheme in England. *Journal of Housing for the Elderly*, 24(2), 151–170. <https://doi.org/10.1080/02763891003757098>

Bradley, C., Day, C., Penney, C., & Michelson, D. (2020). ‘Every day is hard, being outside, but you have to do it for your child’: Mixed-methods formative evaluation of a peer-led parenting intervention for homeless families. *Clinical Child Psychology and Psychiatry*, 25(4), 860–876. <https://doi.org/10.1177/1359104520926247>

Cooley, S. J., Quinton, M. L., Holland, M. J. G., Parry, B. J., & Cumming, J. (2019). The experiences of homeless youth when using strengths profiling to identify their character strengths. *Frontiers in Psychology*, 10(SEP). <https://doi.org/10.3389/fpsyg.2019.02036>

Cox, S. (2018). Exploring the use and uptake of e-cigarettes for homeless smokers. <http://www.who.int/trialssearch/Trial2.aspx?TrialID=ISRCTN14140672>. <https://www.cochranelibrary.com/central/doi/10.1002/central/CN-01949373/full>

Craig, T. K. J., Garety, P., Power, P., Rahaman, N., Colbert, S., Fornells-Ambrojo, M., & Dunn, G. (2004). The Lambeth Early Onset (LEO) Team: Randomised controlled

trial of the effectiveness of specialised care for early psychosis. *British Medical Journal*, 329(7474), 1067–1070. <https://doi.org/10.1136/bmj.38246.594873.7C>

Dawkins, L., Bauld, L., Ford, A., Robson, D., Hajek, P., Parrott, S., Best, C., Li, J., Tyler, A., Uny, I., & Cox, S. (2020). A cluster feasibility trial to explore the uptake and use of e-cigarettes versus usual care offered to smokers attending homeless centres in Great Britain. *PLoS ONE*, 15(10 October), e0240968–e0240968. <https://doi.org/10.1371/journal.pone.0240968>

Dunn, R. J. (2019). Military veteran transition into employment and civilian engagement: a walking with the wounded evaluation [King’s College London]. <https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.797782>

Hickman, P., Kemp, P. A., Reeve, K., & Wilson, I. (2017). The impact of the direct payment of housing benefit: evidence from Great Britain. *Housing Studies*, 32(8), 1105–1126. <https://doi.org/10.1080/02673037.2017.1301401>

Hopkin, G. (2016). The Impact of the Critical Time Intervention for People with Severe Mental Illness in the Transition from Prison to the Community. https://kclpure.kcl.ac.uk/portal/files/83196371/2017_Hopkin_Gareth_1312060_thesis.pdf

Hough, J. (2020). Adopting a Critical Time Intervention model through Fulfilling Lives Newcastle Gateshead : An evaluation (Issue May). <http://www.fulfillinglives-ng.org.uk/wp-content/uploads/2020/06/FLNG-CTI-Final-Evaluation.pdf>

Howard, L., Flach, C., Leese, M., Byford, S., Killaspy, H., & Johnson, S. (2011). Effectiveness and cost-effectiveness of admissions to women’s crisis houses compared with traditional psychiatric wards: pilot patient-preference randomised controlled trial. *Psychiatrische Praxis*, 38(S 01), 32–40. <https://doi.org/10.1055/s-0031-1277763>

Jarrett, M., Thornicroft, G., Forrester, A., Harty, M., Senior, J., King, C., Huckle, S., Parrott, J., Dunn, G., & Shaw, J. (2012). Continuity of care for recently released prisoners with mental illness: A pilot randomised controlled trial testing the feasibility of a Critical Time Intervention. *Epidemiology and Psychiatric Sciences*, 21(2), 187–193. <https://doi.org/10.1017/S2045796011000783>

Khan, Z., McCrone, P., & Koehne, S. (2020). Impact on the use and cost of other services following intervention by an inpatient pathway homelessness team in an acute mental health hospital. *Journal of Mental Health*, 1–7. <https://doi.org/10.1080/09638237.2020.1755017>

Killaspy, H., Bebbington, P., Blizard, R., Johnson, S., Nolan, F., Pilling, S., & King, M. (2006). The REACT study: Randomised evaluation of assertive community treatment in north London. *British Medical Journal*, 332(7545), 815–818. <https://doi.org/10.1136/bmj.38773.518322.7C>

Killaspy, H., Priebe, S., McPherson, P., Zenasni, Z., McCrone, P., Dowling, S., Harrison, I., Krotofil, J., Dalton-Locke, C., McGranahan, R., Arbuthnott, M., Curtis, S., Leavey, G., MacPherson, R., Eldridge, S., & King, M. (2019). Feasibility randomised trial comparing two forms of mental health supported accommodation (Supported Housing and Floating Outreach); a component of the QUEST (Quality and Effectiveness of Supported Tenancies) study. *Frontiers in Psychiatry*, 10(APR),

258. <https://doi.org/10.3389/fpsyt.2019.00258>

Killaspy, H., Ritchie, C. W., Greer, E., & Robertson, M. (2004). Treating the homeless mentally ill: Does a designated inpatient facility improve outcome? *Journal of Mental Health*, 13(6), 593–599. <https://doi.org/10.1080/09638230400017038>

Lowrie, R., Stock, K., Lucey, S., Knapp, M., Williamson, A., Montgomery, M., Lombard, C., Maguire, D., Allan, R., Blair, R., Paudyal, V., & Mair, F. S. (2021). Pharmacist led homeless outreach engagement and non-medical independent prescribing (Rx) (PHOENIx) intervention for people experiencing homelessness: a non-randomised feasibility study. *International Journal for Equity in Health*, 20(1), 1–13. <https://doi.org/10.1186/s12939-020-01337-7>

MacInnes, D., Khan, A. A., Tallent, J., Hove, F., Dyson, H., Grandi, T., & Parrott, J. (2021). Supporting prisoners with mental health needs in the transition to RESETtle in the community: the RESET study. *Social Psychiatry and Psychiatric Epidemiology*. <https://doi.org/10.1007/s00127-021-02045-5>

Marshall, M., Lockwood, A., & Gath, D. (1995). Social services case-management for long-term mental disorders: a randomised controlled trial. *The Lancet*, 345(8947), 409–412. [https://doi.org/10.1016/S0140-6736\(95\)90399-2](https://doi.org/10.1016/S0140-6736(95)90399-2)

Mason, P., Lloyd, R., & Nash, F. (2017). Qualitative evaluation of the London homelessness Social impact Bond: Executive summary. Department for Communities and Local Government. https://s3.eu-west-2.amazonaws.com/golab.prod/documents/Qualitative_Evaluation_of_the_London_Homelessness_SIB_exec_summary.pdf

Paisi, M., Witton, R., Burrows, M., Allen, Z., Plessas, A., Withers, L., McDonald, L., & Kay, E. (2019). Management of plaque in people experiencing homelessness using “peer education”: a pilot study. *British Dental Journal*, 226(11), 860–866. <https://doi.org/10.1038/s41415-019-0361-0>

Parkes, T., Matheson, C., Carver, H., Budd, J., Liddell, D., Wallace, J., Pauly, B., Fotopoulou, M., Burley, A., Anderson, I., MacLennan, G., & Foster, R. (2019). Supporting Harm Reduction through Peer Support (SHARPS): Testing the feasibility and acceptability of a peer-delivered, relational intervention for people with problem substance use who are homeless, to improve health outcomes, quality of life and social functioning and reduce harms: Study protocol. In *Pilot and Feasibility Studies* (Vol. 5, Issue 1). ISRCTN Registry. <https://doi.org/10.1186/s40814-019-0447-0>

Quinton, M. L., Clarke, F. J., Parry, B. J., & Cumming, J. (2021). An evaluation of My Strengths Training for Life™ for improving resilience and well-being of young people experiencing homelessness. *Journal of Community Psychology*, 49(5), 1296–1314. <https://doi.org/10.1002/jcop.22517>

Rathod, S. D., Guise, A., Annand, P. J., Hosseini, P., Williamson, E., Miners, A., Bowgett, K., Burrows, M., Aldridge, R. W., Luchenski, S., Menezes, D., Story, A., Hayward, A., & Platt, L. (2021). Peer advocacy and access to healthcare for people who are homeless in London, UK: A mixed method impact, economic and process evaluation protocol. *BMJ Open*, 11(6), e050717–e050717. <https://doi.org/10.1136/bmjopen-2021-050717>

Read, J. (2006). Erratum: Specialised care for early psychosis: Symptoms, social functioning and patient satisfaction. Randomised controlled trial (*British Journal of Psychiatry* 188 (37-45)). *British Journal of Psychiatry*, 188(MAR.), 295. <https://www.ncbi.nlm.nih.gov/pubmed/16388068>

Shaw, J., Conover, S., Herman, D., Jarrett, M., Leese, M., McCrone, P., Murphy, C., Senior, J., Susser, E., Thornicroft, G., Wright, N., Edge, D., Emsley, R., Lennox, C., Williams, A., Cust, H., Hopkin, G., & Stevenson, C. (2017). Critical time Intervention for Severely mentally ill Prisoners (CrISP): a randomised controlled trial. *Health Services and Delivery Research*, 5(8), 1–138. <https://doi.org/10.3310/hsdr05080>

Stringer, C., Loosemore, M., Moller, E., Jackson, S. E., López-Sánchez, G. F., Firth, J., Johnstone, J., Stubbs, B., Vancampfort, D., & Smith, L. (2019). Promoting physical activity in vulnerable adults at risk of homelessness: A randomised controlled trial protocol. *BMJ Open*, 9(3), e026466. <https://doi.org/10.1136/bmjopen-2018-026466>

Sundin, E. C., Mrowiec, A., Bowpitt, G., Boatman, C. A., Williams, A. J., Sarkar, M., & Baguley, T. S. (2020). Feasibility and acceptability of an intervention for enhancing reintegration in adults with experience of homelessness. *European Journal of Public Health*, 30(3), 595–600. <https://doi.org/10.1093/eurpub/ckz202>

Tempier, R., Balbuena, L., Garety, P., & Craig, T. J. (2012). Does assertive community outreach improve social support? Results from the Lambeth study of early-episode psychosis. *Psychiatric Services*, 63(3), 216–222. <https://doi.org/10.1176/appi.ps.20110013>



© 2022 | Centre for Homelessness Impact

ISBN: 978-1-914132-14-8

CHI | Registered Charity Number: E&W1183026; SC049501

Company Number: 11732500

www.homelessnessimpact.org
