The Development of Regional Networks to Promote Housing First Implementation in Canada

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Options Bytown, Catharine worked at the Mental Health Commission of Canada where she led the implementation of Housing First across Canada. She worked alongside 18 Canadian communities in the design and implementation of Housing First. Currently Catharine is Vice-Chair of the Alliance to End Homelessness Ottawa, Chair of the Ottawa Supportive Housing Network and a member of the Ottawa Social Housing Network. Sam Tsemberis, leads Pathways Housing First, which trains direct service organizations, conducts research projects, and influences policy related to Housing First. Dr. Tsemberis is also on the faculty of the Department of Psychiatry at Columbia University Medical Center. Jino Distasio, Professor of Geography at the University of Winnipeg where his research focuses on mental health and homelessness and urban issues. Much of his recent work has examined Housing First and the Indigenous approaches used to end homelessness in Winnipeg, Canada as part of the At Home Chez Soi project. Vicky Stergiopoulos, Clinician Scientist and the Physician-in-Chief at the Centre for Addiction and Mental Health. She is also a Professor and Vice Chair Clinical and Innovation in the Department of Psychiatry at the University of Toronto. Her clinical and research activities focus on the development and evaluation of interventions to address the needs of people who are homeless and of those who use acute mental health services. She has a great interest in the redesign of our health system for the purpose of system improvement, in partnership with service users. Angela Yip, knowledge broker with Evidence Exchange Network in the Provincial System Support Program at the Centre for Addiction and Mental Health. With a background in neuroscience, health systems and services research, she is currently focused on working with different stakeholders to transfer evidence into practice and policy. Paula Goering, was Director of the Health Systems Research Consulting Unit at the Centre for Addiction and Mental Health in Toronto and a faculty member in the Department of Psychiatry at the University of Toronto. Dr. Goering was the lead researcher on Ontario-wide mental health services projects, including the Community Mental Health Evaluation Initiative and the Systems Enhancement Evaluation Initiative, and she was the Research Lead for the national At Home/Chez Soi research on Housing First for homeless people with mental illness. Dr. Goering was committed to knowledge transfer and mental health systems transformation and held a 10-year Chair in Knowledge Transfer from the Canadian Health Services Research Foundation and the Canadian Institute of Health Research. Sadly, Dr. Goering passed away on May 24, 2016.

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Abstract

While knowledge mobilization strategies, such as training and technical assistance, have been used to facilitate the implementation of evidence-based practices, little is known about the role of networks in influencing implementation. In this article, we describe the role of a variety of networking strategies (regional training events, community of practice teleconference calls, and the creation of regional networks) used to implement Housing First (HF) in Canada during a three-year training and technical assistance initiative. We report on three main findings from research on this initiative. First, data from regional training events (n=110) revealed that 92% of participants wanted a regional HF network. Participants in the regional training events, as well as those who participated HF training needs assessment focus groups (k=11, n=83), believed that the networks should focus on mutual learning and influencing policy and have strong leadership and an open membership. Second, HF training events held in four regions of Canada (the West, the Prairies and northern territories, Ontario, and the Atlantic region) were very positively evaluated by participants (n=276) in terms of their value in increasing HF knowledge and comprehension, and overall satisfaction with the training. Third, field notes (n=146) were used to generate a narrative of HF networks that emerged from training and technical assistance activities, including a province-wide network in Ontario and practitioner-led networks in southwestern Ontario and British Columbia. We discuss how these network activities contributed to capacity-building in HF programs designed to end homelessness in Canada.

Introduction

Housing First (HF) is an evidence-based practice (EBP) to ending chronic homelessness that can be challenging to implement because it presents a paradigm shift from the “treatment as usual” approach and requires change at individual, organizational and systemic levels (Goering & Tsemberis, 2014; Padgett, Henwood, & Tsemberis, 2015). Strategies for facilitating the implementation of community-based interventions in new settings often involve researchers engaging with community stakeholders to provide resources, training, and technical assistance (e.g., Wandersman, Chien, & Katz, 2012). Research suggests that in addition to these strategies, networking can advance the capacity of community stakeholders to implement innovative practices (Leeman et al., 2015). Network strategies for knowledge mobilization can thus complement researcher-led knowledge mobilization activities. While training and technical assistance can advance technical knowledge of the innovation, networking can facilitate the sharing of experiential knowledge among stakeholders related to changes in practice in their local community context (Nutley, Walter, & Davis, 2007). The purpose of this article is to describe how networking has been used as a
knowledge mobilization strategy in combination with training and technical assistance to advance the implementation of HF in Canada.

**Housing First in Canada**

HF is a program model that was developed in New York City in the 1990s to address the needs of people with mental illness who are homeless (Tsemberis, 2015). HF combines housing—through rent subsidies—with support through either Assertive Community Treatment (ACT) or Intensive Case Management (ICM) teams. The rent subsidies enable clients to rent private market housing, so that housing is scattered throughout the community rather than located in a “single-site” (i.e., congregate facility exclusively for people with mental illness who have experienced homelessness). HF is based on the principles of consumer choice, recovery, and community integration, and it has a strong evidence base attesting to its effectiveness in reducing homelessness (Aubry, Nelson, & Tsemberis, 2015; Padgett, Henwood, & Tsemberis, 2016).

In Canada, HF programs began in Calgary, Alberta and quickly expanded across the province in the early 2000s. In 2008, the federal government of Canada funded a five-year research demonstration project—At Home/Chéz Soi—which implemented HF and evaluated its effectiveness. The Mental Health Commission of Canada administered this project and HF programs were implemented in five cities (Moncton, Montreal, Toronto, Winnipeg, Vancouver) (Goering et al., 2011). The evaluation used a longitudinal (two-year) randomized controlled trial design, and found that HF participants receiving support and treatment with either ACT (Aubry et al., 2016) or ICM (Stergiopoulos et al., 2015) showed significantly better outcomes in terms of achieving housing stability over a two-year period when compared to individuals receiving treatment as usual. As well, HF participants receiving ICM reported greater improvements in quality of life relative to participants receiving usual treatment (Stergiopoulos et al., 2015).

**Networks as a Knowledge Mobilization Strategy for Housing First**

Network strategies have been developed to advance knowledge mobilization and to support the uptake of EBPs. These strategies are valuable in creating connections that allow for program managers and service providers to share experiences and knowledge related to a topic of shared interest. In addition, these networks also promote the generation of new knowledge as participants build an increased understanding of the practice across different contexts (Nutley et al., 2007). There are a variety of different types of network-based strategies for knowledge mobilization, such as learning communities, communities of practice, and communities of interest. Learning communities connect individuals for the purposes of sharing knowledge and engaging in mutual learning (e.g., Behl, Houston, & Stredler-Brown, 2012). Communities of practice (COPs) is an approach that aims to link individuals with a shared “domain of interest,” encourage the development of relationships and interactions, promote shared learning, and advance the development of shared practices (Wenger, McDermott, & Snyder, 2002). Communities of Interest (COI) have been described as “a community of representatives of communities” because they bring together stakeholders from different areas of professional practice to share knowledge to help address a particular problem (Fischer, 2001, p.4). There is substantial overlap in the goals and structures of these types of networks. In practice, not all networks will fit into defined categories or types. Networks may
develop or evolve in response to existing opportunities or needs of the members. These more emergent networks may incorporate elements of different network types (e.g., a focus on informing shared practice and information sharing across sector or geographic boundaries) (Worton, under review) making them more difficult to define.

Depending on the overarching goals of knowledge mobilization initiatives, network strategies can promote information sharing amongst participants, or advance commitment to change or engagement in collaborative efforts (Himmelman, 2001). A commitment to collaboration often requires participants to have support from their organization to contribute time, share “turf”, and take on both shared risk and shared reward (Himmelman, 2001). Groups adopting a networking approach to advance both shared learning and collaboration towards changing practice or policy, often describe themselves as COPs, coalitions, or collaboratives. Groups that engage in collaborative initiatives may limit membership to allow for the establishment of trust and commitment (Himmelman, 2001) and to advance change towards a planned goal quickly. Groups that adopt an emergent, mutual learning approach may have more fluid and inclusive membership criteria (Nutley et al., 2007; Wenger et al., 2002), allowing members to join on an ongoing basis and determine their own level of participation.

Network approaches can influence knowledge mobilization and implementation of EBPs by creating opportunities for members to connect, exposing members to innovative practices or EBPs through these connections, and informing members’ decisions about adopting an EBP in their own organization or practice (Palinkas et al., 2011; Ward et al., 2018; Worton, under review). Although network approaches appear to be a promising strategy for mobilizing knowledge, they are rarely evaluated (Nutley et al., 2007; Ramnathugala, Plumb, Cunningham, Georgiou, & Westbrook, 2011). Further research is necessary to understand how network approaches influence knowledge mobilization in different contexts and for different types of EBPs (e.g., guidelines, programs, complex interventions). To better understand how network approaches can advance HF, it is helpful to look to existing networks in the homelessness sector, such as the Alberta 7 Cities on Housing and Homelessness.

Alberta 7 Cities on Housing and Homelessness. The 7 Cities on Housing and Homelessness (www.7cities.ca) was established in 2001 by the seven organizations designated as administrators of federal Canadian funding for homelessness services and supports (Cameron & Makhoul, 2009). Leaders in the network meet in person several times per year and connect regularly to support one another, share information resources, and advance strategic initiatives to end homelessness. The 7 Cities network has played a key role in advancing HF in Alberta and has developed the capacity to work collaboratively on shared initiatives (e.g., a coordinated count of individuals experiencing homelessness). In addition to supporting the implementation of local plans to end homelessness, the 7 Cities core leadership has worked closely with the provincial government to inform and advance Alberta’s 10-year plan to end homelessness. The 7 Cities also coordinate HF educational opportunities (e.g., an annual HF conference and an online HF learning portal for frontline staff). Member organizations contribute resources to support collaborative activities and maintain a part-time administrative staff position. Using the HF approach, the 7 Cities have been successful in reducing
homelessness across the province by 20% from 2014-2016 (Seven Cities on Housing and Homelessness, 2017).

*Advancing Networks for Housing First Knowledge Mobilization in Canada*

With the advent of HF in Alberta and the At Home project, HF programs have emerged across Canada (Gaetz, Scott, & Gulliver, 2013). This development was accelerated by a change in federal policy that mandated HF programs beginning in 2013 (Macnaughton, Nelson, Goering, & Piat, 2017). To assist communities in making the transition from managing homelessness and delivering time-limited treatment and support (e.g., shelters, transitional housing, outreach services) to HF, the Mental Health Commission funded a training and technical assistance initiative in HF from 2013-2016 that included the development of practitioner networks. This initiative consisted of initial and follow-up training for communities in HF and fidelity assessments of the local HF programs. There were two-day training events in four regions of Canada, COP teleconference calls, and work to promote regional HF networks (Worton et al., 2018). The training, technical assistance, and fidelity review teams were led by Dr. Sam Tsemberis, the founder of Pathways HF.

**Present Study**

The present study, also funded from 2013-2016, was conducted in collaboration with the national training and technical assistance initiative. The study examined learning needs of communities, early implementation of HF, related systems changes across communities, and the development of regional networks among communities implementing HF. Findings from the broader project have been published elsewhere (e.g., Macnaughton et al., 2018; Worton et al., 2018). In this article, we address the following questions:

1. What are participants’ views of the need for, purpose of, and structures and functions of potential regional HF networks?
2. How were HF regional training events evaluated by participants in terms of their value in increasing HF knowledge and comprehension, and establishing a foundation for network connections?
3. What was the nature of the regional HF networks that emerged from training and technical assistance activities?

**Method**

*Data Collection and Analysis*

Using a developmental stage approach to evaluation (Pancer, 1997), the research began with a needs assessment of local stakeholders for HF training, then moved to HF program planning, implementation, training, and fidelity assessment. Research participants provided their informed written consent, and the research was approved by the Research Ethics Board of Wilfrid Laurier University.

In the sections below, we describe the data collection activities that were used to gather information on our three research questions. Data gathered through the training needs assessment and network discussions at HF regional training events were analyzed to answer research question one. Evaluation data from the HF regional training events was analyzed to answer research question two. Researcher field notes completed throughout all activities of the training and technical assistance initiative were analyzed to answer research question three.

**Housing First training needs assessment.** A total of 11 focus groups and six key informant interviews (n = 83) were
conducted in seven Canadian cities across six provinces (Hasford et al., 2019). A team of eight researchers conducted the focus groups and key informant interviews in 2014. Either one or two interviewers conducted the interviews in each community. A common protocol of open-ended questions was used to inquire about the need for HF regional networks. All interviews were audio-recorded and transcribed. Theme coding, as described by Braun and Clarke (2006) was used to analyze the qualitative data for themes pertaining to networks.

**Housing First regional training events.** Four regional HF training events were held, one in the West (with participants from British Columbia (BC) and Alberta), the Prairies (with participants from Saskatchewan, Manitoba, Nunavut, and the northern territories), Ontario, and Atlantic Canada. The regional training events were designed to provide information about HF, convene meetings of community stakeholders, create dialogue, and facilitate the development of regional HF networks. The agendas for the training sessions typically involved a keynote on the HF model, plenary sessions featuring regional/national experts, a selection of specialized workshops (e.g., service teams, evaluation and policy, peer support, housing procurement, etc.) and a workshop on the HF Toolkit. A presentation on HF networks was made at each of the regional training events and was followed by facilitated small and large group discussion sessions focused on planning the next steps in network development. During these sessions, open-ended questions were posed to the audiences (e.g., Who should lead and/or host a regional network? What types of assistance are needed to start a regional network? What would the next steps be in starting a regional HF network?). Facilitators recorded ideas presented by participants on flip chart paper during the session. These flip chart pages were analyzed using thematic analysis to capture participants’ views on potential structure and functions of a HF regional network.

Data on participant satisfaction with the regional training events were gathered through an evaluation form completed by participants (n = 276). The evaluation form included closed-ended questions about the participant’s background (e.g., age, gender, work sector), ratings of how workshop presentations increased participants’ knowledge (1 = “not at all” to 5 = “extremely”), comprehensiveness of the information provided, and overall satisfaction (both from 1 = “very low” to 5 = “very high”), one question about whether they would find a regional HF network valuable (answered yes, no, or not sure), and four open-ended questions about the purpose, structure, and functions of such a network.

**Field notes.** The researchers participated in all focus groups, HF regional training events, COP teleconferences, and the fidelity assessments that took place during the training and technical assistance initiative. Using a structured form, the researchers recorded qualitative field notes, including descriptive observations and impressions (n = 146). Flip chart notes on the network discussions at the regional training events were included in the field notes (n = 4). A total of nine COP conference calls were held over three years for Ontario, and minutes of those calls were incorporated into researchers’ field notes. Theme coding was also used to analyze these data to create a narrative about the emerging networks.

**Timeline**

A timeline for the HF training and technical assistance initiative is presented in Figure 1. Activities positioned above the timeline were initiated by the research team to collect data and advance the development of a regional
COI. Activities below the timeline were initiated by participating community leaders. Although these practitioner-led regional networks are independent of the study, these networks were informed by leaders’ participation in the HF training and technical assistance initiative.

Figure 1. Timeline of Activities related to HF Training and Technical Assistance

Findings

Research Question 1: Participants’ Views on Establishing Regional Housing First Networks

The findings regarding participants’ views regarding the potential development of regional HF networks are based on thematic analyses of data from the needs assessment and from facilitated group discussions at the HF regional training events. The majority of stakeholders completing evaluations for the regional training events indicated a potential HF regional network would be of value (86-96% across the four regions). Some stakeholders were unsure of the value (4.5-14%), but no stakeholders indicated a network would not be of value (see Table 1). Participants’ views on the potential development of HF regional networks included considerations regarding network structure, composition, purpose, development, and infrastructure.

Table 1

<table>
<thead>
<tr>
<th>% of Attendees Selecting Each Response Option</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BC/Alberta (n=23)</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Not Sure</td>
<td>4.3</td>
</tr>
<tr>
<td>Yes</td>
<td>95.7</td>
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</tbody>
</table>
Network structure. Two main types or structures for networks were identified as potentially useful resources to support HF implementation: regional networks (organized by geographic and/or demographic characteristics) and COPs (organized by sector or area of expertise). Regional networks were considered particularly valuable if they could connect cities of similar size or with similar demographic profiles; so being part of a network within a specific geographic region was not necessarily a priority for all participants. For instance, some communities were most interested in making connections with communities of similar size, similar stage of HF implementation, and/or common challenges. For this reason, some communities looked to connect with communities in other provinces that met these criteria.

Network composition. Participants considered strong leadership to be necessary for the creation of a regional network. The existence of a coordinating body early in network development was suggested as a means of establishing ownership from communities as well as potential government and cross-sector partners. Shared leadership between grassroots stakeholders and individuals with systems influence was considered important. Open membership was another key consideration around network composition. A broad approach to membership was suggested to ensure the networks would be open to stakeholders across sectors with ties to housing supports and efforts to end homelessness. Open membership was suggested as a means of engaging multiple stakeholder groups including service providers, individuals with lived experience and peer support workers, cross-sector leaders (e.g., health, justice, mental health), government representatives and funders, as well as funding entities.

Network purpose. Participants considered the overarching purpose of a potential regional network to be to enhance the capacity of network members to implement HF. Two main objectives for a potential network were identified. The first main objective identified was to promote mutual learning and collaboration among network members. A regional network was seen as a strategy to facilitate knowledge mobilization through dialogue (e.g., case studies), coordination of HF training and technical assistance opportunities for members (e.g., webinars, site visits), and creating opportunities to share tools and information resources (e.g., intake forms, evaluation forms). Some participants expressed an interest in access to problem-solving support akin to a “help desk” function. Several communities also identified case-level problem-solving as a valued resource for dealing with challenging client scenarios. For example, one participant described the need for ongoing HF learning and problem-solving opportunities in the following way:

“Even if you train the staff with Housing First... how do you keep the learnings current? How do you do reflective practice? How do you set-up problem-solving options [...]? But, you know, what are the strategies that might also come [from...] sort of a support group, a community of practice...”

The sharing of knowledge and experience was considered important to learn from the successes and failures of communities with greater experience in HF implementation in specific areas (e.g., rent supplement procurement, system planning, and landlord engagement). One participant
Network development. The process of network development was generally considered to comprise two key components. The first component was engagement to encourage “buy-in” from existing stakeholder groups and begin developing opportunities for connection and discussion to begin establishing the network. A key part of engagement is establishing clear objectives for the network. The second component was support. Participants were asked directly how they felt the leaders of the training and technical assistance initiative could support the network development. Participants indicated that support could be best provided in terms of helping to build connections and identifying existing resources (e.g., information resources and research findings, training and support, and sources of funding).

Network infrastructure. Participants suggested three main infrastructure needs to establish and maintain potential regional networks. First, as many communities have pre-existing homelessness advocacy and provider networks, participants indicated that such networks could offer potential infrastructure to house or facilitate the development of regional HF networks. There may be challenges, however, in housing new networks within established ones, due to existing community politics and conflicting mandates. Second, specific types of infrastructure were identified as necessary, including online information systems, and administrative support or staffing since networks can’t be implemented “off the side of a desk.” Third, meetings such as regional conferences or social events were also viewed as valuable facilitators of networking infrastructure, as a conference or event could serve to engender support for a network and the infrastructure to support one.

The second main objective identified was to support systems and policy change. Connections developed through a network (e.g., relationships among leaders or communication channels with policy makers and/or government funders) were considered to be of value in supporting HF. Participants suggested that regional networks could facilitate HF implementation at the systems level by supporting planning and advocacy. A participant described the value of a strategic focus on systems-level change in the following way:

“There is something somewhat informally established already. I think more can be done with an actual strategy […] not just networking… it’s advocacy to the government to put some resources into this…to put more money toward health, put more money toward child and family services. They seem to focus a lot of money on housing which is always good, but it all sort of feeds together.”

described the potential value added contributions of a network for HF implementation in the following manner:

“I think it’s having an extremely supportive network […] having a group that is kind of going through the processes you are going through, but also some of them may be further ahead […] So the latter group is kind of learning from the experience of the previous group. I think having that network allows for… as we put policies in place and guidelines in place… working through all of these things together, sharing the knowledge so an organization doesn’t feel alone and helpless, as they go through these changes.”
Research Question 2: Contributions of Training and Technical Assistance Activities to HF Knowledge and Regional Network Connections

There were three main regional network activities/initiatives stemming from the training and technical assistance research and developmental evaluation: (a) HF regional training events, (b) regional COP teleconference calls, and (c) the establishment of new networks that continue past the end of the training and technical assistance initiative.

Housing First regional training events. Evaluations of the regional networking events (see Table 2) suggest that these events may have impacted HF planning and implementation by increasing regional awareness of HF, knowledge about its principles, and readiness to implement the program. The majority of attendees were frontline providers and agency directors who had not participated in previous HF trainings. Regional training evaluations revealed very good ratings for the influence of the training on their overall knowledge of HF (average of 3.7 on a 5-point scale), comprehensiveness of the information provided (average of 4.0/5), and overall satisfaction (average of 3.9/5). The opportunity to learn from other communities was viewed by participants as a benefit of the regional event.

Table 2

Summary of Key Evaluation Ratings for Regional Networking Events

<table>
<thead>
<tr>
<th>Sites</th>
<th>Attendance</th>
<th># of Evaluation Forms Completed</th>
<th>Influence on Knowledge</th>
<th>Comprehensiveness of information provided</th>
<th>Overall Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>West</td>
<td>150</td>
<td>103</td>
<td>3.5</td>
<td>3.9</td>
<td>3.8</td>
</tr>
<tr>
<td>Prairies and Territories</td>
<td>115</td>
<td>54</td>
<td>3.8</td>
<td>3.9</td>
<td>4.0</td>
</tr>
<tr>
<td>Atlantic</td>
<td>100</td>
<td>88</td>
<td>3.7</td>
<td>4.0</td>
<td>4.0</td>
</tr>
<tr>
<td>Ontario</td>
<td>55</td>
<td>31</td>
<td>3.8</td>
<td>4.1</td>
<td>3.9</td>
</tr>
<tr>
<td>Average total % of all participants who completed an evaluation</td>
<td>105</td>
<td>69 / 66%</td>
<td>3.7</td>
<td>4.0</td>
<td>3.9</td>
</tr>
</tbody>
</table>

*Note: Ratings are on a 1-5 scale with 5 as the most positive rating.

COP teleconferences. COP conference calls were held on a bi-monthly basis in the four regions. The calls were facilitated by Mental Health Commission staff members (including members of the training and technical assistance team for this project) with agendas focusing on updates and information sharing from each community and discussion driven by questions raised by local stakeholders around specific aspects of HF implementation. In Ontario, topics during the calls included experiences and challenges in preparing for system change within the housing/shelter system, funding models, and processes for enumeration activities to count the number of individuals experiencing...
homelessness in each community. In the Central COP (Saskatoon, SK; Winnipeg, MB; Yellowknife, NWT) discussions focused on specific aspects of HF implementation, including the use of measures and indicators, ensuring consumers are getting the right level of support, considerations of consumer “flow through” in programs, job descriptions and staff roles in HF, and landlord relations.

The Western COP (Fraser Valley, BC; Nanaimo, BC; Kamloops, BC) focused early meetings on considerations of readiness for HF as some communities navigated what HF would look like in their local context and how to begin developing partnerships. Communities farther ahead in the HF implementation process shared strategies they had been found helpful to build readiness. The Eastern COP (Moncton, NB; Halifax, NS; Saint John, NB; Sydney, NS) also provided the opportunity for communities to learn from the experiences of Halifax and Moncton, which had more HF implementation experience than other sites. Discussions focused on topics such as consumer needs assessment, data collection, and effective systems monitoring.

How to navigate potential constraints on new federal funding was a key topic in all communities, as stakeholders grappled with adapting their programs to HF or introducing new HF programs. The COP teleconferences provided an opportunity for communities with more experience with HF to share insights with communities newer to HF with the additional support of the training and technical assistance teams. This facilitated the planning process for communities at earlier stages of implementation. Discussions focused on the nuances of the HF model and participating communities shared knowledge and skills gained from addressing issues arising in the process of implementing HF locally. The extent of community participation on the calls was varied. Although there were often a number of communities engaged in the calls, there were times when only one community would be present. In these instances, the calls provided opportunities for consultation with facilitators. Upon completion of the training and technical assistance in 2016, facilitation and administration of the COP calls was transferred to the Canadian Alliance to End Homelessness. The calls have continued and format of calls has remained the same.

Research Question 3: The Nature of Emerging Regional Networks

In connection with the training and technical assistance, new regional networks developed after the delivery of the HF regional training and technical assistance events. New networks include the Ontario Housing First Regional Network – Community of Interest and a number of emerging regional practitioner-led networks.

Ontario Housing First Regional Network – Community of Interest. In 2016, two researchers who led the training and technical assistance evaluation successfully applied for support from the Evidence Exchange Network (EENet) located at the Centre for Addiction and Mental Health to develop the Ontario Housing First Regional Network – Community of Interest (OHFRN-COI). Findings from the needs assessment and network discussions undertaken in the training and technical assistance evaluation indicated that there was value and an identified need for a network with strong leadership that would connect communities to enhance capacity for HF implementation and to support systems and policy change. Building of these learnings, the OHFRN-COI was conceptualized as a HF capacity-building network with representation from the different regions of the province.

The goals of the OHFRN-COI are to: (a) build local capacity for HF programs, (b) promote
high quality implementation of the HF model that includes both fidelity to and adaptation of the model, and (c) advocate for and influence public policy related to HF. These goals stem from expressed needs of participants in the needs assessment research and the discussions about regional networks at the regional training events. A Steering Committee provides direction for the OHFRN-COI in line with these goals. It is made up of Ontario HF policy-makers, planners, managers, service-providers, researchers, and persons with lived experience, including representatives from the housing, health, and justice sectors and Indigenous programs. The OHFRN-COI has been provided with one-half day of staff support per week from EENet 2017-2020.

The OHFRN-COI has a website, http://eenet.ca/initiative/housing-first-community-interest#about. To meet the first goal of building local capacity for HF programs, it has held several webinars (e.g., rent assistance, landlord engagement strategies). These webinars have attracted the participation of approximately 80-100 individuals in Ontario, from across Canada, and from Europe. The OHFRN-COI has also organized full-day forums on HF, one in 2018 and one in 2019, that included workshops on topics relevant to HF. Working in partnership with the training and technical assistance team of the Canadian Alliance to End Homelessness, the OHFRN-COI has developed a roster of HF training and technical assistance consultants and researchers. An inventory of HF programs in Ontario is also being created.

To meet the second goal of promoting high fidelity implementation of HF, the network has held a webinar and workshops at the annual forum on HF fidelity. Materials on fidelity assessment are posted on the network’s website, and a project piloting a fidelity exchange approach between two agencies is underway.

Regarding the third goal of advocating for and influencing public policy related to HF, the network has produced two policy briefs for the provincial and federal governments: one on the application of rent subsidies in HF programs (Nelson & Aubry, 2017) and another on the need to link HF with ACT (Nelson & Aubry, 2018). Letters to provincial and federal politicians and Op-Ed articles in Canadian newspapers have also been written to influence public policy. The OHFRN-COI will also continue to advocate for resources from the provincial and federal governments to scale up HF throughout Ontario with the development of programs of good quality and high fidelity.

Practitioner-led regional networks. One of the early activities of the training and technical assistance initiative involved a pre-conference meeting at the 2015 Canadian Alliance to End Homelessness conference. This meeting included a presentation by the chair of the Alberta 7 Cities about this network. This presentation was the catalyst for a group of leaders in southwestern Ontario to establish a similar network. One leader instigated the development of the network, identifying like-minded municipal leaders of communities of similar size, generally located within the same region (Worton, under review). Members draw upon their local experiences with HF and knowledge gained from the training and technical assistance and share it in the network. Similarly, knowledge shared among leaders in the network informed HF implementation, with leaders implementing HF for the first time drawing on the experiences of leaders representing communities with established HF programs (Worton, under review).

Two researchers from the training and technical assistance evaluation have consulted with leaders of homelessness services in British Columbia and assisted them with the creation of a similar regional
network – the BC 10. This network is now in the early stages of development, but has regular conference calls and has engaged provincial-level organizations in its work. Discussions about regional networks have also been held with HF stakeholders in the Atlantic provinces (Nova Scotia, New Brunswick, Newfoundland, and Prince Edward Island) and the Prairie provinces (Manitoba and Saskatchewan).

**Discussion**

There are a variety of networking strategies that can be used to facilitate knowledge mobilization. The research described in this paper demonstrates how training and technical assistance for HF can be advanced and sustained through the incorporation of networking strategies. It also demonstrates how networks developed for knowledge mobilization may differ in form and function based on the goals of the network leaders and members. In this section, we highlight key considerations in developing networks, and describe how networking activities can be incorporated into implementation theory as a capacity building strategy that complements training and technical assistance.

**Key Considerations in Developing Networks for HF Knowledge Mobilization**

The research findings highlighted three main considerations for developing networks for HF knowledge mobilization: (a) readiness, (b) leadership, and (c) network composition.

**Readiness.** The establishment of the regional networks in this study began by bringing stakeholders together and engaging in dialogue regarding the value of a network and learning from existing networks in the homelessness sector (e.g., the 7 Cities). At the regional training events and throughout the needs assessment research activities, stakeholders had an opportunity to consider how regional networks could be structured, facilitated, and resourced. In this way, the research activities served to promote “buy-in” for the development of regional networks. The regional training and technical assistance activities also provided a foundation for the development of networks by providing opportunities for interaction among participants from different communities.

**Leadership.** The network activities described in this research vary in terms of who facilitates network activities and provides core leadership and/or administrative support. Across the activities leadership varies. In the COP calls, leadership is provided by a central organization. In the OHRN-COI, a multi-stakeholder steering committee chaired by two researchers provides leadership with the support of EENet. In the emerging practitioner-led networks, it is the members who share the leadership and facilitation of the group. Determining the leadership for networking activities requires consideration of the network size, resource needs, and goals.

**Composition.** Scope and membership are two aspects of network composition that were identified in this research.

**Scope.** Networks in this research were regional in nature, aiming to facilitate connections across communities rather than within communities. This approach is different than local network-based approaches for advancing strategies to end homelessness, such as community advisory groups or coalitions. Many communities already have local advisory boards comprised of diverse stakeholders working to end homelessness (e.g., Scott, 2013). The regional networks described in the present study complement, rather than duplicate, existing local networks.

**Membership.** The networking activities and new networks developed through the course of the training and technical assistance also
differ in approach to membership. In the OHRN-COI, membership is open while in other networks (e.g., the emerging practitioner-led networks) membership is limited to a core set of organizations/participants. Each approach is suited to different goals. Open membership facilitates broad knowledge mobilization and learning amongst a diverse group of participating stakeholders, while limited membership supports the development of stronger ties based on similarity (Lawlor & Neal, 2016) and the formation of relationships through ongoing interaction (Worton, under review).

Networks as a Capacity Building Strategy for Implementation

Capacity for implementation can be developed through the provision of tools, training, technical assistance, and quality improvement/quality assurance (e.g., fidelity assessment), (Leeman et al., 2015; Wandersman et al., 2012). These strategies are considered to be additive, each enhancing the one before it (Wandersman et al., 2012). Peer networking is another common component of capacity building in community implementation (Leeman et al., 2015). In the present study, the development of network connections contributed to informing and advancing knowledge sharing through training, technical assistance, and quality assurance activities. This suggests that networking also plays an additive role in enhancing training and technical assistance and advancing capacity for implementation. Aspects of the training and technical assistance were designed to create network connections (e.g., regional training events, COP calls). These connections play a role in establishing relationships, advancing change in communities, and promoting ongoing learning, all of which are important for implementing HF.

Establishing relationships. Capacity-building for implementation takes place in the context of relationships (Wandersman et al., 2012) and the network activities outlined in this study contribute to the development of relationships between training and technical assistance providers and community stakeholders (e.g., through ongoing COP calls), as well as connections among community stakeholders (e.g., through regional events and events of the OHRN-COI). The practitioner-led regional networks established by homelessness sector leaders provide an opportunity for leaders to establish meaningful professional relationships across jurisdictions. These networks developed through a more emergent process than the COP call groups or the OHRN-COI and do not fit a specific network type. Although the purpose of these networks is to advance practice (like a COP) and promote information sharing (like a COI), the emphasis on achieving these goals through role-specific, relationship-based support among leaders is unique.

Advancing change. Network connections are helpful to advance learning and create change in community settings, as participants can share strategies for change (Lawlor & Neal, 2016). The COP calls provided an opportunity for community leaders implementing HF to learn from one another while also receiving guidance from the trainers participating on the calls. Much of the information shared is directed towards implementing HF at the local level. However, the policy-related activities of the OHRN-COI (e.g., policy brief) serve to influence change at the systems level as well.

Promoting ongoing learning. The regional practitioner networks that developed as a result of the training and technical assistance initiative have created opportunities for ongoing learning around HF implementation in Canadian communities. Some formal training and technical assistance has
continued beyond the original initiative (i.e., COP calls), and new regional networks continue to emerge and evolve. The continuation of the OHRN-COI in the coming year means that the COI can offer more topic-specific webinars and knowledge-sharing events such as the HF forum to stakeholders across the country. The development of a number of regional networks across Canada provides opportunities for national learning if these networks can be linked in the future. Regional networks in which members are closely connected (through strong or dense connections), may eventually be able to be linked across the country, creating what is referred to as a “small world network” in which information can be easily shared between regions (Lawlor & Neal, 2016) and solutions to the complex issue of homelessness can be advanced. This would require some coordination at a national level but could be highly beneficial in advancing HF knowledge mobilization between regions.

Conclusion

In this paper, we described how networking strategies have been informed and adopted as a part of a national training and technical assistance initiative. These strategies provided a means of identifying stakeholder networking needs and informing and contributing to the development of various networks, many of which are continuing to emerge beyond the end of the project. Strategies such as the regional COPs and the community-led networks engage a small group of leaders who participate regularly for the purposes of informing practice. The OHRN-COI engages a broad range of stakeholders to promote shared learning and education around HF research and practice. An important area for future research is to examine connections among these various networks to determine how information may flow between networks with similar goals, and how actors participating in more than one network can play a role in facilitating these connections. In addition, it would be of value to examine the influence of network participation on capacity-building for HF which varies for individuals in different roles (e.g., organizational leaders, front line staff, peer support workers, etc.). Although more research on networks as a knowledge mobilization strategy is needed, this paper demonstrates the value of incorporating networking strategies into training and technical assistance initiatives.

References


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