Table 6: Quantitative evidence tables

Study details	Participants	Interventions	Outcomes and Results	Comments
Full citation Aubry, T., Goering, P., Veldhuizen, S., Adair, C. E., Bourque, J., Distasio, J., Latimer, E., Stergiopoulos, V., Somers, J., Streiner, D. L., et al.,, A Multiple-City RCT of Housing First With Assertive Community Treatment for Homeless Canadians With Serious Mental Illness, Psychiatric services (Washington, D.C.), 67, 275-281, 2016 Ref Id 967139 Country/ies where the study was carried out Canada Study type RCT Aim of the study To study the effectiveness of Housing first with ACT in a population with serious mental illness Study dates October 2009 to June 2013	Sample size N=780 Characteristics Mean(SD) Age: 39.4(11.03) years; 68% male, Diagnosis: Psychotic disorder 52%, Mood disorder with psychotic features 20%,Major depressive episode 43%,Mania or hypomania episode 16%, Posttraumatic stress disorder 27%, Substance-related problems 73%, Panic disorder 21%, Inclusion criteria 1) Age >18 years, >19 years in Vancouver 2) Homeless or precariously housed 3) Current mental disorder, as determined by MINI mental state examination Exclusion criteria Not reported	Interventions Intervention: Housing First Control: Treatment as usual, access to existing services in the communities	Results Follow up (21-24 months) Secure permanent tenancy: Number of people in stable housing at the end of follow-up: Housing First: 273/369 Treatment as usual: 138/337	Limitations Risk of bias assessed using the Cochrane risk of bias assessment tool Random sequence generation: low risk; randomized allocations were done by a central data collection system using an adaptive randomization algorithm Allocation concealment: unclear risk, allocation concealment not described Blinding of participants and personnel: low risk for objective outcome, high risk for subjective outcome; blinding of participants not feasible due to the nature of the intervention Blinding of outcome assessment: low risk for objective outcomes and high risk for subjective outcome

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Study details	Participants	Interventions	Outcomes and Results	Comments
Source of funding This study was funded by Health Canada grant provided to the Mental Health Commission of Canada (MHCC)				Attrition bias: low risk; 780 (82%) participants completed the final interview: 369/481 in treatment as usual (77%) and 411/469 (88%) in Housing First Selective reporting: low risk; all outcomes reported in sufficient detail for analysis Other bias: low risk Other information
Full citation Goldfinger, S. M., Schutt, R. K., Tolomiczenko, G. S., Seidman, L., Penk, W. E., Turner, W., Caplan, B., Housing placement and subsequent days homeless among formerly homeless adults with mental illness, Psychiatric Services, 50, 674-9, 1999 Ref Id 940156 Country/ies where the study was carried out United States Study type Randomised controlled trial Aim of the study To study the effectiveness of group or individual housing placement in formerly homeless people with mental	Sample size N=118 Characteristics Diagnosis Schizophrenia 45%, Schizoaffective disorder 17%, Bipolar disorder 14%, Major depressive disorder 14%, 72% men, 41% African American, Average age 38 years, 14% employed Inclusion criteria Residents of shelters for homeless mentally ill persons Exclusion criteria Unable to speak and understand English, not mentally ill, unsafe when screened for dangerousness or those not giving informed consent	Interventions Group housing sites (N=63); Independent apartments (N=55) Independent apartments: They organised a voluntary weekly group but no on-site programming or clinical staff Group housing: They accommodated 6-10 tenants with shared living, dining, recreational, and kitchen facilities, but separate bedrooms. Staffing pattern resembled that of traditional group homes, with 24-hour daily coverage, but project staff encouraged residents to take over household decision making All study participants were allotted one intensive case manager who provided weekly counselling,hands-on help with daily activities, and help with access to needed services.All participants were also	Results Follow up: 18 months Number of people in stable housing at 18 months follow-up: Group housing:47/61 Independent apartments: 37/49	Limitations Risk of bias assessed using the Cochrane risk of bias assessment tool Random sequence generation: unclear risk; random sequence generation not described Allocation concealment: unclear risk, allocation concealment not described Blinding of participants and personnel: low risk for objective outcome, blinding of participants not feasible due to the nature of the intervention Blinding of outcome assessment: low risk as number of people in stable housing is an objective outcome

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Study details	Participants	Interventions	Outcomes and Results	Comments
illnesses in reducing homelessness Study dates January 1991 to March 1992 Source of funding The Boston McKinney Research Demonstration Project was funded by grant from the National Institute of Mental Health		encouraged to participate in community mental health centre programmes		Attrition bias: low risk; 110/118 participants completed the final interview: reasons for loss to follow up described Selective reporting: low risk; outcomes reported in sufficient detail for analysis Other bias: low risk Other information
Full citation H, Killaspy., S, Priebe., P, McPherson., Z, Zenasni., L, Greenberg., P, McCrone.,, S, Dowling., I, Harrison., J, Krotofil., C, Dalton-Locke., R, McGranahan.,, M, Arbuthnott., S, Curtis., G, Leavey., G, Shepherd., S, Eldridge and M, King., Predictors of moving on from mental health supported accommodation in England: national cohort study., The British journal of psychiatry, 1-7, 2019 Ref Id 1013731 Country/ies where the study was carried out UK Study type Prospective cohort study Aim of the study	Sample size N=619 services users. Services were residential care (N=22), supported housing (N=35) or floating outreach (N=30). Characteristics Location of supported accommodation was: residential care (N=159 service users), supported housing (N=251) or floating outreach (N=209). 66% were male, 81% were white, 3% were in paid employment. Diagnosis was 53% schizophrenia, 9% schizoaffective disorder, 6% bipolar disorder, 21% depression or anxiety, 11% other. Inclusion criteria Service users participating in the national survey	Supported housing Floating outreach Residential care	Results 243/586 (41.5%) participants successfully moved on to less supported accommodation (residential care 15/146 [10.3%], supported housing 96/244 [39.3%], floating outreach 132/196 [67.3%])	Assessment of risk of bias using Newcastle Ottawa risk of bias assessment tool: 1) Selection: The study sample represents the population of interest on key characteristics. The baseline study sample is adequately described for key characteristics. 2) Comparability: Potential confounders are accounted for in the analysis. 3) Outcomes: Study attrition: those included only 5% were lost to follow-up over 30 months. 4) Outcome measurement: The method and setting of outcome measurement is the same for all study participants. Follow up adequate Low risk of bias

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Study details	Participants	Interventions	Outcomes and Results	Comments
To investigating service user and service factors which predict outcomes for users of mental health supported accommodation. Study dates 2013-2014 recruitment (then 30 month follow-up) Source of funding National Institute of Health Research (RP-PG-0610-10097)	component of the QuEST programme were eligible. In 2013 - 2014 the QuEST programme recruited 619 users of mental health supported accommodation across England (159 residential care, 251 supported housing, 209 floating outreach), randomly sampled from 87 services (22 residential care, 24 supported housing, 25 floating outreach). These services were randomly sampled from 14 nationally representative local authority areas, using an index developed by. A mean of seven service users were recruited per service. Exclusion criteria None reported.			
Full citation Somers, J. M., Moniruzzaman, A., Patterson, M., Currie, L., Rezansoff, S. N., Palepu, A., Fryer, K., A randomized trial examining housing first in congregate and scattered site formats, PLoS ONE, 12 (1) (no pagination), 2017 Ref Id 968320	Sample size N=297 Characteristics Age Mean(SD): CHF 40(11.6) years; SCH 39.5(10.8) years; TAU 39.5(11.2) years, Male 73%, Homeless 78% Inclusion criteria Age more than 19 years old; having current mental disorder; homeless or precariously housed;	Interventions Scattered Housing First: Market rental apartments with support provided by Assertive Community Treatment (ACT) Congregate Housing First: Single building with supports equivalent to ACT Treatment as usual(TAU): existing services and supports	Results Number of days in stable residence (Mean (SD) follow up 24 months): Scattered Housing First (SHF; n=90): 509(188.3) Congregate Housing First (CHF; n=107): 509.3(195) Treatment as usual (TAU; n=100): 181.1(204.5)	Limitations Risk of bias assessed using the Cochrane risk of bias assessment tool Random sequence generation: low risk; randomization was done by a centralised computer generated procedure Allocation concealment: unclear risk, allocation concealment not described

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Study details	Participants	Interventions	Outcomes and Results	Comments
Country/ies where the study was carried out Canada Study type Randomised controlled trial Aim of the study To study the effectiveness of two housing first interventions (scattered HF and congregate HF) on housing stability, health and psychosocial outcomes Study dates October 2009 to June 2011 (recruitment upto 2011 and 2 years follow-up) Source of funding This study was funded by Grant from Mental Health Commission of Canada	moderate or severe disability defined as a score of 62 or lower on the Multnomah Community Ability Scale (MCAS;[21]), and fulfilled at least one of the following criteria: legal system involvement in the past year, substance dependence in the past month, or two or more hospitalizations for mental illness in any one of the past five years Exclusion criteria Not meeting eligibility criteria		Quality of life QOLI 20(Change from baseline score at 24 months): SHF (n=90): 17.6(27.3) CHF (n=107): 19.19(25.5) TAU (n=100): 13.09(25.9) Recovery: Recovery Assessment Scale (RAS)22 (Change from baseline score at 24 months): SHF (n=90): 3.95(11.4) CHF (n=107): 9.47(14.1) TAU (n=100): 3.95(12.3)	Blinding of participants and personnel: low risk for objective outcome, high risk for subjective outcome; blinding of participants not feasible due to the nature of the intervention Blinding of outcome assessment: low risk for objective outcomes and high risk for subjective outcome Attrition bias: low risk; data regarding primary outcome was available for 98% participants Selective reporting: low risk; all outcomes reported in sufficient detail for analysis Other information
Full citation Tsemberis, S. J., Moran, L., Shinn, M., Asmussen, S. M., Shern, D. L., Consumer preference programs for individuals who are homeless and have psychiatric disabilities: a drop-in center and a supported housing program, American Journal of Community Psychology, 32, 305-317, 2003 Ref Id 910106	Sample size N=225 Characteristics Age; Mean(SD) years: 42(12); Male 77%; Months spent in homelessness in last 5 years; mean(SD) 31(21) Diagnoses: Schizophrenia 58%, Bipolar 15%, Major depression 16%, Other 6%, unknown 5% Inclusion criteria 1) Age more than 18 years	Interventions Pathways Program: Access to independent apartments, support services and treatment from Assertive Community Treatment (ACT) teams.physical health, mental health, and substance abuse treatment: vocational rehabilitation; assistance with community and social integration; money management; and rapid response crisis intervention Treatment as usual: Continuum of care, individuals assigned to the control condition continued to	Results Proportions of time over 6 Months spent in stable housing Pathways(n=94): 0.59(0.31) TAU(n=111): 0.15(0.29) Number of participants in stable housing at 6 months after baseline Pathways(n=94): 74 TAU(n=111): 44	Limitations Risk of bias assessed using the Cochrane risk of bias assessment tool Random sequence generation: unclear risk; randomization not described Allocation concealment: unclear risk, allocation concealment not described Blinding of participants and personnel: low risk for objective outcome, high risk for subjective

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Study details	Participants	Interventions	Outcomes and Results	Comments
Country/ies where the study was carried out United States Study type Randomised controlled trial Aim of the study To evaluate the effectiveness of housing intervention compared to control in reducing homelessness Study dates December 1997 to January 1999 Source of funding This study was funded in part by a grant from the Substance Abuse and Mental Health Services Administration	2) Homelessness (living on streets or public places unintended for sleeping for 15 of last 30 days) 3) 6 months history of homelessness 4) DSM IV axis I diagnosis of serious and persistent mental disorder 5) willingness to participate in the study Exclusion criteria Not reported	work with the outreach teams, drop in centers or the other caseworkers employed by the social agencies with which they had been previously affiliated		outcome; blinding of participants not feasible due to the nature of the intervention Blinding of outcome assessment: low risk for objective outcomes and high risk for subjective outcome Attrition bias: low risk; data regarding 94% participants was available at follow-up Selective reporting: low risk; all outcomes reported in sufficient detail for analysis Other information

ACT: assertive community treatment; DSM: diagnostic and statistical manual; HF: housing first; N: number of participants; RCT: randomised controlled trial; SD: standard deviation; TAU: treatment as usual

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