

Measuring Outcomes in Affordable & Mixed Model Housing

June 2022



Acknowledgements

The authors would like to express our gratitude to all the contributors who lent their expertise to this project, especially the members of the International Housing Partnership and Housing Partnership Canada: Thank you for your work building healthy communities, and your dedication to building the evidence base of the impact.

Housing Partnership Canada

HPC is a collaboration of Canada's housing leaders. It operates as a peer-based network and business cooperative for senior housing practitioners of influential organizations that have a demonstrated commitment to innovation. HPC is an independent, non-political body that initiated this project as part of its research priorities for the affordable housing sector.

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INTRODUCTION

Community housing providers play a critical role in contributing to both the wellbeing of their tenants and the communities in which they operate. While this linkage has been established in research, Canadian community housing providers generally do not collect the data needed to evaluate the wellbeing of their communities and fully demonstrate their value.

Community housing providers are tasked with working with increasingly sophisticated housing models and complex tenant needs. Without the tools to evaluate and demonstrate the improved outcomes for tenants supported by community housing providers, the fundamental contribution of affordable housing to healthy communities will continue to be discounted. This report builds off of Canada Mortgage and Housing

Corporation's (CMHC) and KPMG's Housing Research Report: Measuring Impacts of Affordable Housing² and provides a further linkage regarding the benefits of collecting housing and non-housing data for community housing providers, but within the context of contributing to healthy communities.

To inform this project, BGM Strategy Group (BGM) spoke to International Housing Partnership (IHP) members in Australia, Canada, United States and the United Kingdom about their data collection practices. (From these interviews BGM produced a report summarizing what data national and international community housing providers currently collect, and the methods they use to collect it).

Consistent with the findings of Housing Partnership Canada's 2020 comparative analysis of mixed model developments³,

https://www.healthaffairs.org/do/10.1377 /hpb20180313.396577/full/HPB_2018_R WJF_01_W.pdf

²Canadian Mortgage and Housing Corporation (CMHC) & KPMG, LLP, (2019) Housing Research Report:

Measuring Impacts of Affordable Housing.

https://static1.squarespace.com/static/5 592d584e4b00902628fe882/t/60144d2d de3d8c329675f661/1611943216144/Ca nadian%2BMixed%2BModel%2BDevelo

¹Taylor, LA, "Housing And Health: An Overview Of The Literature," Health Affairs Health Policy Brief, June 7, 2018. DOI: 10.1377/.

³ Housing Partnership Canada. "Canadian Mixed Model Development: A Comparative Analysis of Ten Sites." (August 2020),

these interviews also highlighted that very few community housing providers are collecting data in the context of mixed model developments⁴, and fewer still are intentionally using data to examine the impact of mixed model developments or affordable housing on outcomes related to wellbeing and social inclusion.

The goal of this project was to identify a 'starting place' for Canadian community housing providers to begin to collect and analyze data that speaks to the social inclusion and wellbeing of their tenants. The resulting data collection framework needed to be practical and feasible for providers to implement. Canada lags peer jurisdictions in housing data collection generally, and the area of tenant wellbeing is no exception.

A result of this work is the Community Wellbeing Assessment, an easy-to-use data collection framework that community housing providers can use to better understand their tenants, and demonstrate the value of affordable housing – as well as the value of collecting data on affordable housing – to government.

The Community Wellbeing Assessment is a data collection framework that equips Canadian community housing providers to demonstrate the value of affordable and mixed model housing to the development of diverse and healthy communities. Through the use of this framework, community housing providers will have the ability to track and measure housing and non-housing outcomes contributing to a healthy community. With this information, community housing providers have the ability to assess the wellbeing and social inclusion of tenants within their portfolios to inform service delivery and programming, communicate the value to funders, and advocate for investments in affordable housing.

<u>pment%2BComparitive%2BAnalysis_Fin</u> al%2BReport_0129.pdf

of Ten Sites "A broad definition of mixed model development is a housing community intentionally designed with a mix of units that vary in affordability for households with a range in income levels

⁴ This research uses the definition of mixed model established by HPC in their 2020 report, *Canadian Mixed Model Development: A Comparative Analysis*

METHODOLOGY

Developing the framework for the Community Wellbeing Assessment required first identifying the factors of a healthy community that overlap with housing providers' influence and/or directly connect to housing stability, then identifying metrics with an easy-to-implement method of collecting data on these factors. The research involved three parts:

- Collection and analysis of data collection practices from comparable jurisdictions;
- Key informant interviews to prioritize the metrics most immediately relevant to this exercise;
- Research to identify a data collection model that would offer the greatest value to Canadian community housing providers.

BGM interviewed 26 members of the International Housing Partnership (See Appendix B for a list of IHP members interviewed) – a collaborative of high performing non-profits from Australia, the United Kingdom, United States, and Canada. These interviews resulted in a longlist of over 150 housing and non-housing outcomes providers are collecting that speak to the social inclusion and wellbeing of tenants. This long list of metrics fell into 23 categories associated with tenants' wellbeing, e.g.:

housing suitability, tenants' financial wellbeing, etc.

BGM consulted external experts with extensive experience in housing, evaluation and inclusion to narrow down this list to a limited set of priority categories and metrics, and offer advice on methods of data collection (For a list of experts interviewed see Appendix C).

The experts applied the following evaluation criteria to the long list of metrics:

- High relevance of outcomes to providers
- Capacity of measurement
- Minimal intrusiveness to tenants
- Within the scope of a housing provider's influence
- Indicative of social inclusion and wellbeing contributing to healthy communities

From these expert consultations, six categories emerged. Each category represents a critical aspect regarding the wellbeing and inclusion of tenants that, as a whole, can speak to the contribution of affordable and mixed model housing to community wellbeing.

These six categories form the framework of the Community Wellbeing Assessment.

Having established the framework, BGM then researched methods to collect data

on our specific metrics. The external experts had been unanimous that the most accurate method of assessing the wellbeing or social inclusion of tenants is to ask them directly, so research focused on identifying questions that could be posed directly to tenants.

This research included the data collection practices of providers identified in phase one, but also reviewed those of CMHC, Statistics Canada and other established sources. Wherever possible, the Community

Wellbeing Assessment borrows questions in use by Statistics Canada. Established questions have been vetted and have been demonstrated to be understood by respondents and yield results. Another benefit is that, in many cases, providers will have the ability to compare their results against a larger pool of answers (e.g., questions from Statistics Canada will be comparable to national results). In a few instances where there were gaps, the research team generated questions.

COMMUNITY WELLBEING ASSESSMENT FRAMEWORK

This work proposes a data collection practice for providers to demonstrate the impact of affordable and mixed model housing on healthy tenant communities.

The Community Wellbeing Assessment operates on the principle that a healthy community enables the social inclusion and wellbeing of its members and reduces barriers to enable meaningful participation in all aspects of society (See figure 1).

The Assessment defines wellbeing and social inclusion as:

- Wellbeing The combination of "social, economic, environmental, cultural, and political conditions identified by individuals and their communities as essential for them to flourish and fulfill their potential."⁵
- 2. Social Inclusion A situation in "which individuals have the

resources and opportunities to be involved in society to the extent that is satisfactory to them."6

The Community Wellbeing Assessment explores tenant outcomes along six categories:

- Positive mental & physical health
- Safety
- Neighbourhood cohesion
- Social connection
- Housing that is suitable and in good condition⁷
- Income stability

These categories are not exhaustive of all factors that comprise social inclusion and wellbeing. While we recognize there are other categories that could be included within the Community Wellbeing Framework, the six selected areas represent a meaningful starting place for community housing providers to begin collecting data.⁸

schl.gc.ca/en/nhs/guidepagestrategy/glossary

⁷ As this study is aimed at affordable housing providers, the affordability of housing is assumed to already be present.

⁵ Wiseman, John, and Kathleen Brasher, "Community wellbeing in an unwell world: trends, challenges, and possibilities." *Journal of public health policy* vol. 29,3 (2008): 353-66. doi:10.1057/jphp.2008.16

⁶ Canada Mortgage and Housing Corporation (CMHC). 2018. "The National Housing Strategy Glossary of Common Terms," https://cmhc-

Figure 1 Diagram of Healthy Communities



BENEFITS OF DATA COLLECTION

While all community housing providers collect some form of basic demographic and operational data to inform operations, there remains significant room for development of Canadian housing data collection practices. In interviews, providers in Australia, the United Kingdom, United States and Canada raised several direct benefits of their experience collecting and using data:

- Informing service delivery and programming: Data collection can reveal the effectiveness and outcomes of service delivery or where programming or additional services are needed. When combined with demographic data, initiatives can be tailored to specific needs in the community, or can be made more equitable.
- Building buy-in: Gathering evidence of the tenant experience can help build understanding and buy-in for change.
- Provide an evidence base: Data can both solidify and quantify what those on the frontline anecdotally know, and can also reveal blind spot, and can serve as a powerful check on organizational assumptions.
- Informing advocacy: Having local data can directly inform

- advocacy efforts and help organizations feel more confident in engaging in advocacy.
- Demonstrating ROI: Data
 collection on the impact of
 programing or housing provider
 lead initiatives can demonstrate
 value in cost savings or social
 return on investment that
 community housing providers can
 leverage into future funding
 opportunities. Data collection
 demonstrating the positive impact
 on tenant outcomes can help
 raise the profile of housing.
- Combatting NIMBYISM: Providers can use data to respond to NIMBYism.

 Data can also demonstrate what providers are doing that addresses concerns of residents' associations or city councillors.

Benefits of collecting demographic data

There are significant benefits to collecting demographic data as part of the Community Wellbeing Assessment, or as a regular practice in any kind of tenant-focused research or program evaluation. Community housing providers are accustomed to collecting some basic demographic data in order to assure program eligibility. Beyond that, understanding impact through a demographic lens is a relatively recent but increasingly urgent priority.

In the context of tenant research or program evaluation, demographic data adds depth and precision to findings. By collecting demographic data, providers can:

Assess whether a set of responses are representative – By collecting demographic data providers can understand whether their responses provide an accurate representation of the overall pool of tenants. By applying a demographic lens consistently across intake, program evaluation and the Community Wellbeing Assessment, providers can develop points of comparison in terms of which groups participate in programming, and which provide feedback to providers.

Determine whether some groups are over-targeted or under-targeted by programming – Demographic data can shine a light on groups who may be underserved and missing out on programs available to them.

Alternatively, demographic data can highlight areas where other groups may be disproportionately targeted by punitive policies or programs.

Gain insight on what kinds of programs are needed, and for whom

– Understanding which groups have sub optimal outcomes or are undersubscribed to assistance programs allows providers to ask why and take action to fill gaps. Demographic data in the context of the Community Wellbeing Assessment will point providers to targeted solutions tailored to the needs of specific groups to help them improve outcomes proximate to social inclusion and wellbeing.

Increase transparency, inclusion, and equity – Certain groups have systematically been left out of data collection processes. This has a detrimental impact on understanding and visibility of these groups. By collecting demographic data providers can make groups be seen, and glean information to demonstrate equity or to take steps to achieve it.

This report recommends a minimum set of demographic factors, as a place to begin collecting demographic data. Incorporating demographic collection across intake and programs will amplify the data points generated across activities and equip providers with a holistic view of which groups are served across their communities and programs.

THE COMMUNITY WELLBEING ASSESSMENT – 15 QUESTIONS TO BETTER UNDERSTAND TENANT INCLUSION AND WELLBEING

The Community Wellbeing Assessment consists of fifteen questions (See table 1) that providers can ask tenants directly to assess their tenants' wellbeing and inclusion. Providers can implement this framework themselves and do not have to hire external consultants. The data collected is gathered directly from

tenants. For many providers, implementing the Assessment will not require any new processes – these questions can be added to existing surveys, gathered during tenant intake, yearly rent reviews or added to regular communications.

"People don't fully realize and accept that their data is an asset. Just as much of an asset as their building is." - Australian IHP Member

Table 1: Community Wellbeing Assessment

Health	Safety	Neighbourhood Cohesion	Social Connection	Housing Suitability and Condition	Income Stability
1. Compared to other people your age, how would you rate your physical health? • Excellent • Good • Fair • Poor	 3. How safe do you feel from crime when walking alone in your area after dark? Very safe Reasonably safe Somewhat unsafe Very unsafe Do not walk alone 	 6. Of the people in your neighbourhood, how many do you know? • Most of the people • Many of the people • A few of the people • None of the people 	 9. How often do you feel lonely? Never Rarely Sometimes Often Always 	11. Do you feel you have enough bedrooms to comfortably house everyone who lives in your home (e.g. a maximum of two persons per bedroom)? • Yes • No	 14. What is your major source of income? Full-time employment Part-time employment Pension Child benefit Alimony, child support Social assistance/employment insurance

2. In general, would you say your mental health is: • Excellent • Good • Fair • Poor	4. Compared to surrounding neighbourhoods, do you think your neighbourhood has a higher amount of crime, about the same or a lower amount of crime? • Lower • About the same • Higher	7. How many people in your neighbourhood do you know well enough to ask for a favour (e.g. picking up the mail, watering plants)? • Over 10 • 6 to 10 • 1 to 5 • None	10. Approximately how many relatives and friends do you have who you feel close to or at ease with, can talk to about what is on your mind? • Ten or more • Six to nine • Three to five • One or two • None	 12. Is your home in need of any repairs? No, only regular maintenance is needed (painting, furnace cleaning, etc.) Yes, minor repairs are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.) Yes, major repairs are needed (defective slumbing or slumbing or	 15. In the past 12 months, how often do you feel you have enough income to pay rent on time? Always Often Sometimes Rarely Never

		wiring, structural repairs to walls, floors or ceilings, etc.)
5. How do you	8. How would	13. Do you
feel about your	you describe	currently require
safety from	your sense of	any
crime when	belonging to	modifications to
alone in your	your local	your home to
home in the	community?	carry out basic
evening or at night?Not at all worriedSomewhat worried	Very strongSomewhat strongSomewhat weak	daily living activities (e.g. handrails, ramps)? • Yes
worriedVery worriedNever alone	Very weak	• No

THE RATIONALE BEHIND THE FRAMEWORK

The following section details the complete data collection framework including the rationale for the inclusion of each of the six categories, the connection to both social inclusion and

wellbeing and housing as supported by research, as well as the source and rationale behind the specific questions included in the Assessment.

"In the US there's still this perception of social housing being the projects, a place where you warehouse poor people, rather than a place where families with children can live and graduate out of poverty. We started to collect data to demonstrate that housing is a platform for resident success." - American IHP Member

Mental & physical health: Possessing good physical and mental health

Research has shown an association between social inclusion and positive impacts on health, particularly mental health. Social inclusion is a recognized social determinant of health and integral to promoting mental health and

wellbeing. Without social inclusion, people are more likely to experience poor health outcomes such as premature mortality, substance abuse, loneliness, isolation, and poor selfesteem. There is also a virtuous or vitious cycle: When people are in good health, it is easier to actively participate in society, leading to better social inclusion. Because of this correlation,

https://www.wellesleyinstitute.com/wp-content/uploads/2019/07/Social-Inclusion-Report.pdf

⁹ Toronto Public Health and Wellesley Institute, Promoting health and wellbeing through social inclusion in Toronto: Synthesis of international and local evidence and implications for future action. (January, 2019),1,

¹⁰Ibid.

poor health, especially mental health, can be understood as a warning sign of poor social inclusion.

Housing is a recognized social determinate of health that can directly influence health outcomes.¹¹ Implementing the Community Wellbeing Assessment at intake as well as for established tenants will help providers directly demonstrate the impact of housing on health and mental health. Demographic data will ensure comparison is made within the same demographic (e.g.: seniors compared to seniors).

There are two questions to evaluate the physical and mental health of tenants:

Question 1. Compared to other people your age, how would you rate your physical health?¹²

- Excellent
- Good
- Fair

• Poor

Question 2. In general, would you say your mental health is:¹³

- Excellent
- Good
- Fair
- Poor

Why These Questions?

Studies have shown that asking someone about their perceived level of health is one of the most reliable measures of someone's overall health.¹⁴ These simple, non-invasive questions can offer providers an incredibly accurate portrait of the physical and mental health of their tenants.

Where These Questions Come From:

Questions regarding one's perceived physical health and mental health are used regularly by Statistics Canada in the Annual Canadian Community Health

https://www150.statcan.gc.ca/n1/pub/82 -229-x/2009001/status/phx-eng.htm

¹¹ Raphael, D., Bryant, T., Mikkonen, J. and Raphael, A, Social Determinants of Health: The Canadian Facts. (2020). Oshawa: Ontario Tech University Faculty of Health Sciences and Toronto: York University School of Health Policy and Management, 38.

¹² Statistics Canada, "Perceived health," Last modified September 28, 2016,

¹³ Ibid.

¹⁴ Lundberg O, Manderbacka K, "Assessing reliability of a measure of self-rated health" *Scand J Soc Med*. (1996) Sep;24(3):218-24. doi: 10.1177/140349489602400314. PMID: 8878376.

Survey.15 The presence of this existing data source gives providers a comparable point of reference.

2. Safety: Feeling safe in one's home and neighbourhood

A sense of personal safety is linked to overall feelings of wellbeing.¹⁶ It is also connected to social inclusion: in neighbourhoods, social inclusion often occurs in public spaces where people gather: parks, schools, libraries, community playgrounds, etc. If people do not feel safe in these spaces, people will be less likely to congregate or use those services. The role of safety acting as a barrier to social inclusion is more prominent in those who are the most vulnerable to crime, notably seniors, women, and people with disabilities.¹⁷

Research has also shown that there is also a strong link between social inclusion, cohesion, and the need for citizens to feel safe in their communities.

The presence of crime disrupts the connections between people, isolating them and jeopardizing social cohesion.¹⁸

While there is little a community housing provider can do about the overall crime rate within a neighbourhood, they can influence how safe a person's home is and, to some degree, take measures to increase the safety of a building and its immediate surrounds (e.g. through lighting, landscaping, and/or up to date repairs).

Within this category of the Community Wellbeing Assessment are three questions to evaluate how safe a person feels both in their neighbourhood and their home:

¹⁵ Statistics Canada, "Canadian Community Health Survey – Annual component (CCHS)," Last modified February 04, 2022, https://www.statcan.gc.ca/en/survey/household/3226

¹⁶ Statistics Canada, "Canadians' perceptions of personal safety and crime, 2014," Last modified December 12, 2017, https://www150.statcan.gc.ca/n1/daily-quotidien/171212/dq171212b-eng.htm

margins, Part II: reducing barriers to social inclusion and social cohesion,
Report of the Standing Senate
Committee on Social Affairs, Science and Technology, 41st Parliament, 1st
Session, 26th report, (June 2013), 8,
http://publications.gc.ca/collections/collection_2013/sen/yc17-0/YC17-0-411-26-eng.pdf

¹⁸ Ibid.

Question 3. How safe do you feel from crime when walking alone in your area after dark?¹⁹

- Very safe
- Reasonably safe
- · Somewhat unsafe
- Very unsafe
- Do not walk alone

Question 4. Compared to surrounding neighbourhoods, do you think your neighbourhood has a higher amount of crime, about the same, or a lower amount of crime?²⁰

- Lower
- · About the same
- Higher

Question 5. How do you feel about your safety from crime when alone in

¹⁹ Statistics Canada, "General Social Survey: Canadians' Safety, Question identifier:

NSC_Q30," [Survey question] Last modified April 10, 2019, https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&lang=en&l tem Id=1236284

²⁰ Statistics Canada, "General Social Survey: Canadians' Safety, Question identifier: NSC_Q10," [Survey question] Last modified April 10, 2019, https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&lang=en&l tem Id=1236284

your home in the evening or at night?²¹

- Not at all worried
- Somewhat worried
- Very worried
- Never alone

Why These Questions?

These questions capture perceptions of both absolute and relative safety. When a person has a positive perception of their safety, they are less likely to be fearful of being victimized by crime.²² However, when individuals are concerned for their safety, they are less likely to participate in their communities, leading to their social exclusion.²³ Further, feeling safe in one's home and neighbourhood is essential for people to feel able to access their community and

²¹Statistics Canada, "General Social Survey: Canadians' Safety, Question identifier: AHE_Q10," [Survey question] Last modified

April 10, 2019,https://www23.statcan.gc.ca/imdb/p3Instr.pl?Function=assembleInstr&lang=en&Item_Id=1236284

²² The Smith Institute, "Communities Social Exclusion and Crime," (2004), 76,

http://www.smith-institute.org.uk/wp-content/uploads/2015/11/CommunitiesSocialExclusionandCrime.pdf

²³lbid.

community supports, supports frequently either necessary or beneficial to tenants.

Where These Questions Come From:

All three questions come from the 2019 General Social Survey on Canadians' Safety. This survey is administered every five years.²⁴ As all the questions within this category are derived from Statistics Canada, community housing providers can compare their responses to the larger data pool.

3. Neighbourhood cohesion: connection and trust between neighbours and neighbourhood

Social connectedness between neighbours is an integral motivator to community participation and social inclusion. Neighbourhood cohesion encourages people to support one another, give back, and take pride in the condition of their communities.²⁵
Building and cultivating social
connections benefits both individuals
and communities.

People with widespread and strong support networks tend to have:

 Better physical health due to lower rates of participation in behaviours that negatively impact health (such as smoking, drinking, and inactivity)²⁶

A lower prevalence of mental illness.²⁷

Research has shown that people with a very strong sense of community belonging have a much higher likelihood of reporting good perceived health than those with a weak sense of community belonging.²⁸

Community housing providers can impact neighbourhood cohesion through

²⁴ Statistics Canada, "General Social Survey: Canadians' Safety" Last modified April 10, 2019, https://www23.statcan.gc.ca/imdb/p3Instr.pl?Function=assembleInstr&lang=en&l tem Id=1236284

²⁵ Plan H, "Social Connectedness," Date accessed March 12, 2022, https://planh.ca/take-action/healthy-society/inclusive-communities/page/social-connectedness

²⁷ Canadian Mental Health Association , *Social Inclusion a key determinant of mental wellness* (2019), 4, https://cmha.bc.ca/wp-content/uploads/2019/12/POL_BuildingE quitableFoundation_LitReview_8.5x11_ 2019_12_04.pdf

²⁸ Shields, Margot, "Community belonging and self-perceived health." *Health reports* vol. 19,2 (2008), 56.

²⁶ Ibid.

prioritizing safe communities so people can gather without hesitation, community programming, or regular tenant get-togethers (e.g. community barbecues, community clean-up, building potlucks, etc.).

Within this category of the Community Wellbeing Assessment are three questions to evaluate how connected people feel to their neighbours and neighbourhood:

Question 6. Of the people in your neighbourhood, how many do you know?²⁹

- Most of the people
- Many of the people
- · A few of the people
- None of the people

Question 7. How many people in your neighbourhood do you know well enough to ask for a favour (e.g., picking up the mail, watering plants)?³⁰

Over 10

²⁹Statistics Canada, "General Social Survey: Social Identity, Question identifier: QIN_Q10," [Survey question] Last modified August 18, 2020, https://www.statcan.gc.ca/en/statistical-programs/instrument/5024_Q1_V4

³⁰ Statistics Canada, "General Social Survey: Social Identity, Question identifier: QIN_Q50," [Survey question] Last modified August 18, 2020,

- 6 to 10
- 1 to 5
- None

Question 8. How would you describe your sense of belonging to your local community?³¹

- Very strong
- Somewhat strong
- Somewhat weak
- Very weak

Why These Questions?

Participation in community life is essential for healthy communities and social inclusion. Not knowing or trusting one's neighbours is a direct barrier to community participation and social inclusion. Community housing providers frequently engage in formal and informal activities that contribute to the cohesion of their communities. Because of its connection to health and safety, these questions provide a point of analysis for providers in an area in which they have greater direct influence.

https://www.statcan.gc.ca/en/statistical-programs/instrument/5024_Q1_V4

31 Statistics Canada, "General Social Survey: Social Identity, Question identifier: SBL_Q100," [Survey question] Last modified November 30, 2020, https://www.statcan.gc.ca/en/statistical-programs/instrument/5024 Q1 V3

Where These Questions Come From:

All three questions came from and are currently in use by Statistics Canada. These questions are from the General Social Survey - Social Identity³² which is administered every five years. Because all the questions within this category come from Statistics Canada, Community housing providers can compare their responses to the larger Canadian population.

4. Social connection: Connection to and regular contact with friends or family

Friendships and strong social connections have a beneficial effect on social inclusion and wellbeing. Research shows that those with strong social connections and access to healthy friendships have a reduced risk of social exclusion and premature death.³³ Meaningful social supports such as close connections to friends or family play an essential factor in shielding the impact of an adverse event or stressful life circumstance.

Without regular contact with close relationships with friends or family, people can become socially isolated and withdrawn.

While a community housing provider cannot directly impact the quality of someone's social connection, they can help foster social connections. For example: having units in good repair so tenants are proud to host guests, ensuring the building or neighbourhood is well lit and clean, or investing in community programming to help people make friends or connect.

There are two questions to help evaluate how connected a person feels with friends or family:

Question 9. How often do you feel lonely?³⁴

- Never
- Rarely
- Sometimes
- Often
- Always

Question 10. Approximately how many relatives and friends do you

³⁴ Statistics Canada, "Canadian Social Survey - Well-being and Family Relationships, Question identifier: LON_Q01," [Survey question] Last modified November 30, 2021, <a href="https://www23.statcan.gc.ca/imdb/p3Instr.pl?Function=assembleInstr&lang=en<em_ld=1329712">https://www23.statcan.gc.ca/imdb/p3Instr.pl?Function=assembleInstr&lang=en<em_ld=1329712

³² Statistics Canada, "General Social Survey: Social Identity" Last modified August 18, 2020, https://www.statcan.gc.ca/en/statistical-programs/instrument/5024_Q1_V4

³³ Plan H, "Social Connectedness."

have who you feel close to or at ease with, can talk to about what is on your mind?³⁵

- Ten or more
- Six to nine
- Three to five
- One or two
- None

Why These Questions?

Without the presence of meaningful relationships with friends or family, it is easy to become socially withdrawn. The questions within this category aim to measure the presence of social connection as a contributor to social inclusion and wellbeing. Along with the questions on neighbourhood cohesion, these questions give providers a good indication of the degree of vulnerability tenants experience: without relationships to draw on in tough times, tenants' wellbeing is more mentally and materially fragile.

Both questions came from and are currently in use by Statistics Canada. Question 9 is sourced from the Canadian Social Survey.³⁶ The source of question 10 is the General Social Survey - Social Identity administered every five years.³⁷ As the questions within this category come from Statistics Canada, housing providers can compare their responses to the larger Canadian population.

Housing that is suitable and in good condition: Having a home that is in a good state of repairs with sufficient bedrooms

Having access to suitable,³⁸ affordable, and good-quality housing impacts inclusion and one's ability to engage with social support networks. A study done by the Wellesley Institute, which examined the linkage between housing and health, found that poor health outcomes can result from poor housing

https://www23.statcan.gc.ca/imdb/p3Inst

Where These Questions Come From:

³⁵ Statistics Canada, "General Social Survey: Social Identity, Question identifier: RFE_Q10," [Survey question] Last modified November 30, 2020, https://www.statcan.gc.ca/en/statistical-programs/instrument/5024_Q1_V3

³⁶ Statistics Canada, "Canadian Social Survey - Well-being and Family Relationships," Last modified November 30, 2021,

r.pl?Function=assembleInstr&lang=en&l tem_ld=1329712

³⁷ Statistics Canada, "General Social Survey: Social Identity," Last modified November 30, 2020, https://www.statcan.gc.ca/en/statistical-programs/instrument/5024_Q1_V3

³⁸ Housing is considered suitable when there are enough bedrooms for the size and make-up of resident households.

conditions that do not meet suitability standards.³⁹ Housing that does not provide sufficient space or requires repairs can significantly impact daily livability and increase the chance of social exclusion and poor health outcomes for those living inside.⁴⁰

Safe, affordable and good quality housing is a social determinant of health that community housing providers can directly influence to improve a person's physical and mental health outcomes.⁴¹ Further, housing provides the foundation for interacting with the broader community and for wellbeing and social inclusion.⁴²

Three questions evaluate whether a person's home is suitable and in good condition:

- Yes
- No

Question 12. Is your home in need of any repairs?⁴³

- No, only regular maintenance is needed (painting, furnace cleaning, etc.)
- Yes, minor repairs are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.)
- Yes, major repairs are needed (defective plumbing or electrical

submissions/housing-policy-framework-pdf.pdf

⁴² Ontario Human Rights Commission, Human Rights and rental housing in Ontario: Background paper, (March 28, 2007),

https://www.ohrc.on.ca/en/book/export/html/2504

⁴³ Statistics Canada, "Canadian Census 2021, Question identifier: DCT_Q25," [Survey question] Last modified February 3, 2021, https://www.statcan.gc.ca/en/statistical-programs/instrument/3901 Q8 V2

Question 11. Do you feel you have enough bedrooms to comfortably house everyone who lives in your home?

³⁹ Wellesley Institute, "Housing and health: Examining the links" (2012): 2. http://www.wellesleyinstitute.com/wp-content/uploads/2012/10/Housing-and-Health-Examining-the-Links.pdf

⁴⁰ Stone, W., et al. "Housing and social inclusion: a household and local area analysis," AHURI Final Report No.207. (2013): 51.

⁴¹ CAMH, *Housing and* Mental *Health Policy Framework,* (2022), 1,https://www.camh.ca/-/media/files/pdfs---public-policy-

wiring, structural repairs to walls, floors or ceilings, etc.)

Question 13. Do you currently require any modifications to your home to carry out basic daily living activities (e.g., handrails, ramps)?

- Yes
- No

Why These Questions?

The questions within this category aim to measure the perception of housing – whether a tenant feels their home meets their needs and is in good repair. Suitable and adequate housing is integral to an individual's ability to fully participate in and be a part of their community. It is also a prime indicator of an individual's overall quality of life.

Where These Questions Come From:

Question 11 is a simplified selfassessment based on CMHC's criteria for housing suitability. This selfassessment allows for differing cultural practices around bedroom sharing. Because Question 11 still speaks to the presence of suitability, community housing providers can still reference national or provincial statistics for comparison. Question 12 is derived from the 2021 Census. Question 13 is a self-assessment created for the Community Wellbeing Assessment, to identify the presence of accessibility barriers within a person's living environment that limited their ability to engage in daily activities. It is a simplified version of many available assessment of accessibility.⁴⁴

 Income stability: Having a stable source of income to minimize stress and food/housing precarity

People whose incomes are insufficient to secure stable housing, food, and other necessities can be easily caught in a downward spiral of deprivation. A loss of income or employment can lead to a loss of housing, a lack of food, and difficulty accessing social and health services. The chronic stress of not "knowing where or how to procure the basics for survival not only takes up a person's energy and deprioritizes social connection but also increases their vulnerability to chronic mental health and substance use-related illness." 45

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668#qb1199789

⁴⁴ For a comparable question, see: Statistics Canada, "Canadian Housing Survey, Question identifier: DAA_Q10," [Survey question] Last modified January, 01, 2021,

⁴⁵ Canadian Mental Health Association, *Social Inclusion a key determinant of mental wellness* (2019), 4, https://cmha.bc.ca/wp-

Both low income and precarious income have a detrimental effect on health and wellbeing.

While tenants' income is outside of a community housing provider's direct influence, they are immediately affected by it. Beyond ability to pay rent, income stability is an indicator of other forms of precarity. When someone has difficulty paying rent, it usually means they have difficulty affording food, paying bills, and accessing other vital resources. When tracked at a portfolio level, providers can gain a larger view of how many residents are having difficulty paying rent and accessing stable income. This information will also add nuance to any analysis of rental arrears rates.

"Before the data collection, we were just making assumptions."
For example, a lot of us had this assumption that if people had affordable housing, they're set. Through data collection, we found out that a lot of our tenants were continuing to struggle with food insecurity. So

content/uploads/2019/12/POL_BuildingE quitableFoundation_LitReview_8.5x11_ 2019_12_04.pdf we've invested in our food distribution services and that's now our biggest program." -American IHP Member

Community housing providers can use this information to inform programming, partnerships, or funding applications to assist tenants with income instability (e.g. rent banks, food banks).

The Community Wellbeing Assessment contains two questions to evaluate a person's income precarity and ability to pay rent on time:

Question 14. What is your major source of income?

- Full-time employment
- Part-time employment
- Pension
- Child benefit
- Alimony, child support
- Social assistance/employment insurance

Question 15. In the past 12 months, how often do you feel you have enough income to pay rent on time?

- Always
- Often
- Sometimes
- Rarely

Never

Why These Questions?

Social inclusion and wellbeing are negatively impacted when you struggle to meet basic needs, or when dealing with the stress of not knowing whether you will be able to meet basic needs from one month to the next.⁴⁶ The questions within this category aim to measure the precarity of one's income, and connection to housing stability.

Where These Questions Come From:

Question 14 was derived from the 2011 National Household Survey.⁴⁷ Question 15 is original to assess the ability of a person to pay their rent.

14, 2016, https://www.12.stateor

https://www12.statcan.gc.ca/nhsenm/2011/ref/dict/pop067-eng.cfm

⁴⁶ Ibid.

⁴⁷ Statistics Canada, "Major source of income," Last modified January

RECOMMENDED COLLECTION OF DEMOGRAPHIC DATA

In addition to collecting data through the Community Wellbeing Assessment, collecting basic demographic data adds significant insight to results. As mentioned above, demographic data are integral to understanding the full picture of the health of our communities.

While many providers already collect this data, as a way to standardize the demographic data collected, providers may want to use comparable questions from Statistics Canada. To provide a common starting point, questions used by Statistics Canada to gather the same information have been cited in the footnotes of each demographic area.

Collecting the following demographic information will help community housing providers begin to understand critical distinctions amongst their tenants:

- Age⁴⁸
- Gender^{49 50}
- Citizenship⁵¹
- Race and ethnicity⁵²

⁴⁸ For a comparable question, see: Statistics Canada, "Canadian Housing Survey, Question identifier: HHC_R17," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

⁴⁹ Gender refers to "the socially constructed characteristics of women and men – such as norms, roles and relationships of and between groups of women and men." Which is different from sex, "the different biological and physiological characteristics of males and females, such as reproductive organs, chromosomes, hormones, etc." "Sex and Gender," Gender Matters (Council of Europe, 2022),

https://www.coe.int/en/web/gendermatters/sex-and-gender

⁵⁰ For a comparable question, see: Statistics Canada, "Canadian Housing Survey, Question identifier: DEM_Q010," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

51 For a comparable question seem Statistics Canada, "Canadian Census 2021, Question identifier: Question 21," [Survey question] Last modified February 3, 2021, https://www.statcan.gc.ca/en/statistical-programs/instrument/3901 Q8 V2

52 For a comparable question, see:Statistics Canada, "Canadian Housing

After those basic characteristics, community housing providers should consider adding the following to their demographic collection practices:

- Household composition⁵³
- Sexual orientation⁵⁴
- Indigenous identity⁵⁵

Survey, Question identifier: DEM_PG_Q05," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

53 For a comparable question, see: Statistics Canada, "Canadian Housing Survey, Question identifier: HHC_Q05," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

⁵⁴ For a comparable question, see:Statistics Canada, "Canadian Housing

Survey, Question identifier: SOR_Q05," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

For a comparable question, see:
 Statistics Canada, "Canadian Housing Survey, Question identifier:
 ABI_Q05," [Survey question] Last modified January 01, 2021,

https://www23.statcan.gc.ca/imdb/p3Inst r.pl?Function=assembleInstr&a=1&&lan g=en&Item_Id=1197668

UNDERSTANDING THE RESULTS

The responses to the Community Wellbeing Assessment can be understood through several lenses. The six categories in the framework allow community housing providers to understand the overall health of their community, but also break down the responses to ascertain the specific areas in which they can seek to improve outcomes for tenants. Collecting demographic data enables further specificity, understanding how community outcomes break down by different composite groups, e.g.,: understanding the gendered dynamics of safety or the incidence of loneliness across different age groups. This will assist community housing providers in determining and improving program interventions in their communities.

For us, housing data collection has been good for business. Data collection has opened the door to large scale grants that we didn't have access to before. Through data collection, we can track activities onsite and demonstrate the direct impact of investment." – American IHP Member

Assessing results within each of the six areas of social inclusion and wellbeing, and using a demographic lens, providers can use the results to launch targeted discussions with relevant groups of tenants. Data on outcomes by population group enables deeper discussion with those groups to ascertain the 'why' of a result (positive or negative) and 'what' can be done in the instance of less than desirable outcomes.

By repeating the questionnaire with tenants at intake and over time, community housing providers will begin to amass evidence on the impact of housing on a person's social inclusion and wellbeing. This too could inform programs and help contribute to a powerful narrative about the impact of affordable housing. The results of the Community Wellbeing Assessment can inform advocacy for supports that tenants need, as well as demonstrate the value of affordable housing as part of healthy communities. Community housing providers can share results to inform a community of practice or comparative research between projects, to begin to understand what forms of affordable housing and programs are most strongly correlated with greater social inclusion and wellbeing for tenants.

Because most of the questions are drawn from existing Statistics Canada surveys, results on the individual

questions can be compared against results from across the country. While this may be incredibly useful any such analysis should take care to consider the impact of socioeconomic factors on results. This is another reason

demographic data is so important, as it lends both context and nuance to the findings.

CONCLUSION AND AREAS FOR FUTURE RESEARCH

The Community Wellbeing Assessment is an important first step in equipping community housing providers to assess and demonstrate the health of their communities through the social inclusion and wellbeing of their tenants. The 15 questions selected for the Assessment explore a reasonably holistic set of interconnected factors proximate to social inclusion and wellbeing and closely connected to housing.

This is, however, only the starting point when it comes to what providers can do once collecting the data. Areas for further development include:

- Creating a tool to process and analyze results – Many Canadian providers receive no funding to support data collection or processing. A standard Assessment that all providers can use regardless of setting enables economies of scale to support the development of a tool to assist with the collection and analysis of data.
- Enabling centralized collection of results to understand results across the sector – This would enable a provincial and national picture of the health of communities that include affordable housing and enable analysis across the sector. This can inform communities of practice within affordable housing

- and contribute to a national narrative about the value of housing.
- Collaborating with tenants to weight and evolve the Assessment – Asking tenants about how their housing contributes to their social inclusion and wellbeing could affirm and lend weighting to the 15 questions in the Assessment, as well as highlight areas in which the Assessment should be expanded.
- Coding responses to produce a quantified result – Assigning a numerical score to responses would provide a comparable and promotable result that can be easily intuited by tenants, funders or the public. BGM has created a concept model that illustrates how quantifying the Community Wellbeing Assessment could be operationalized.

Ultimately, the Assessment and demographic data will give providers insight into areas of their communities they did not have before. With internal audiences, this information can help change the way services are organized, inform programming, as well as build buy-in and spur action to make programs more equitable.

Providers will be able to build powerful new narratives that can be shared with external audiences to build understanding and support for affordable and mixed model housing. The Community Wellbeing Assessment will help strengthen and demonstrate the value of housing on healthy communities.

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APPENDIX B: LIST OF INTERNATIONAL HOUSING PARTNERSHIP INTERVIEWEES

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