

Life Skills Intervention Outcomes for People who are Homeless with Mental Illness

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Introduction: This paper presents a four-year outcomes study that evaluated the impact of learning life skills on maintaining residential stability among people with mental illness at risk for homelessness. The manualized intervention included financial management, nutrition management, room and self care, and safe community participation modules. Each module included six groups and six individual sessions with an occupational therapist. The groups were led using social learning theory to empower the participants to take responsibility for their own recovery. Changes in cognitive functioning, readiness to change, trauma related symptoms and occupational self assessments were evaluated in relation to demographic variables.

Objectives: The objective of this study was to improve residential stability through the development of life skills.

Methods: This repeated measures design study was conducted in two supported housing programs in a large U.S. city. Participants (N=86) were evaluated pre-intervention, post-intervention and three and six months later. Outcomes measures included the Allen Cognitive Level Screen, University of Rhode Island Change Assessment, Occupational Self Assessment, Impact of Events Scale and a demographic assessment. Data was analyzed using SPSS.

Results: Participants at all stages of change benefitted from the intervention. Over time, ACL scores increased (Time1-Time4, $x = 5.03$ vs. 5.22 , $p = .007$), social involvement and connection with peers improved, and trauma symptoms decreased. A functional decline was observed three months post-intervention when many participants transitioned to more independent housing; they spontaneously recovered three months later.

Conclusion: Participants improved both housing maintenance and life skill performance. The intervention was successful with individuals with various cognitive levels and diagnoses. Social learning methods allowed participants to become involved in the intervention at whatever stage they were in with variation in goals and skill attainment. This variation was acceptable given the recovery orientation of the project which allowed for individual client-centered outcomes. These results indicate that caution should be taken when screening individuals for an intervention based on cognitive levels, readiness to change or presence of psychiatric symptoms.

Contribution to Practice: This project produced a manualized, evidenced based intervention to teach life skills that can be generalized and used with a wide variety of populations.