

The Creation of “We Are Neighbours”: Participatory Research and Recovery

Alice de Wolff

Alice de Wolff and Associates

In consultation with

Pedro Cabezas, Linda Chamberlain, Aldo Cianfarani,
Phillip Dufresne, Peter Lye, Dennis Morency, Bradley Mulder,
Esther Mwange, and Mark Shapiro

ABSTRACT

Community-based participatory research is an enabling and empowering practice that is based in principles that overlap with those of mental health recovery. Using a participatory approach, an advocacy group called the Dream Team, whose members have mental health issues and live in supportive housing, planned and conducted a study of the neighbourhood impact of two supportive housing buildings in Toronto. The study found that tenants do not harm neighbourhood property values and crime rates, and that they do make important contributions to the strength of their neighbourhoods. This article demonstrates the strength of a self-directed collective of individuals who are prepared to challenge stigma and discrimination, and documents their use of participatory action research as a proactive strategy to contribute their knowledge to discussions that shape the communities, services, and politics that involve them.

The involvement of people with mental health issues in research about their concerns is a logical component of initiatives that are intended to support mental health recovery. This article highlights particular overlapping values of recovery, empowerment, and participatory action research that were central to a research study conducted in Toronto from 2005 to 2008. It is organized around the research group’s observations about how four recovery components—finding meaning and purpose through challenging stigma, empowerment

Alice de Wolff, Research Consultant, Alice de Wolff and Associates, Toronto; members of the Dream Team advocacy group: Pedro Cabezas, Linda Chamberlain, Aldo Cianfarani, Phillip Dufresne, Peter Lye, Dennis Morency, Bradley Mulder, Esther Mwange, and Mark Shapiro.

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Correspondence concerning this article should be emailed to Alice de Wolff: alice@alicedewolff.ca.

and control, the right peer and professional support, and the importance of hope—were woven as practices into the research process. The study examined the social and economic impact of supportive housing on surrounding neighbourhoods and produced the report *We Are Neighbours* (de Wolff, 2008). The project was initiated and conducted by the Dream Team, a group of men and women with mental health issues who live in supportive housing, and who have become advocates for more safe, secure, and supportive housing. This article demonstrates the strength of a self-directed collective of individuals who are prepared to challenge stigma and discrimination, and documents their use of participatory action research as a proactive strategy to contribute their knowledge to discussions that shape the communities, services, and politics that involve them. The article first introduces the project's connection with practices of inclusion, empowerment, participatory research, and recovery. The project's background provides an example of the group members' exploration of meaning and purpose through their choice to research stigma. The subsequent sections describe the group's practice model, training, analytical approach, research and evaluation methods, and the study's distribution. The article concludes with a short discussion of the hope that research group members see in the study's findings.

Since the early 1990s, there has been a distinct shift in the delivery of mental health services that has opened up decision making in projects, programs, and services to people who live with mental health issues as a matter of inclusion, empowerment, and social justice (Church, 1996; Constantino & Nelson, 1995; Nelson, Lord, & Ochocka, 2001). The shift to inclusiveness and empowerment has opened up opportunities for people with mental health issues to become, among other things, partners with professional researchers (Morrell-Bellai & Boydell, 1994; Nelson, Ochocka, Griffin, & Lord, 1998; Sylvestre, Ollenberg, & Trainor, 2007; Woodside, Cikalo, & Pawlick, 1995).

There is an easy fit between participatory research and philosophies of empowerment. Both are based on an understanding of power imbalances in society and recognize that underprivileged people's knowledge about their own situation is undervalued and can be the source for powerful individual and collective change (Parkinson & Nelson, 2003). Participatory approaches to research are rooted in the anti-oppression work of Paulo Freire (1972) in South America and the subsequent excitement of people all over the world, who began to develop practices of power-sharing and knowledge production that build on people's understanding of their own situations and lead to action for change (Flicker & Savan, 2006; Gaventa & Horton, 1981; Hall, Gillette, & Tandon, 1982). The "Nothing About Us Without Us!" principle that has gained strength among people living with mental health issues is echoed in the power-sharing, support, and empowerment practices of community-based participatory research.

The Dream Team has been intimately involved in the movement to empower people with mental health issues since it became an autonomous, member-directed organization in 2001. The group's founding principles are based in concepts of empowerment that have an explicit focus on power, politics, human rights, and community integration. Together, the members have developed a strong set of decision-making practices and have provided inspiration and guidance for other groups to do the same. Because of a growing consciousness about recovery philosophies in the mental health community, group members began to engage with concepts of recovery in the mid-2000s. Again, there is an easy fit and much overlap between the ideas of empowerment, participatory research, and recovery discourse, although the latter tends to have

a more individual, psychological language (Parkinson & Nelson, 2003). Each of these philosophies supports the recovery goal of individuals with psychiatric disabilities to live full, productive lives, and recognizes that paths to this goal are individual and winding and can be facilitated or impeded by interactions with community and environment (Casey, 2008; Onken, Craig, Ridgway, Ralph, & Cook, 2007). There is little consensus about what key elements make recovery possible. But there is some consistency in observations that the elements of recovery generally begin with hope and move toward capacities that make it possible to fulfill social roles: self-determination, agency, meaning/purpose, awareness, and support (Onken et al., 2007). The research team found that several of these elements were relevant to the study, particularly as we evaluated the project.

The research group has requested that a note about language be included in the introduction to this article. Service providers and researchers have used the term “psychiatric consumers/survivors” for a number of years. Dream Team members have expressed a growing discomfort with the clinical nature of this term and their unwillingness to be solely identified by their relationship with mental health services. They have begun to describe themselves as “people with mental health issues,” and consequently this phrase is used throughout this discussion.

MEANING, PURPOSE, AND CHALLENGING STIGMA

This study was different from many participatory research projects in that it was initiated and defined by an activist group, rather than by service providers or researchers, and focused on stigma and NIMBY (not in my back yard) attitudes, rather than on service delivery. In the winter of 2004, the Dream Team began discussions with researchers and funders about the possibility of conducting a research project that would further the team’s goals. The team’s core activity is advocating for more supportive housing and challenging stigma by telling their individual stories and making presentations to politicians, community groups, schools, faith groups, and other institutions.

All members of the Dream Team discussed the possibilities of conducting a research project, and some members decided that they wanted to invest their energies in a systematic investigation of the legitimacy of community concerns that continue to meet proposals to build supportive housing facilities in Toronto. They were inspired by reports about the positive neighbourhood effects of Common Ground’s supportive housing in New York City (Goar, 2003). The positive reports from New York run counter to the pervasive and persistent concerns raised in Toronto when new supportive housing is planned—one study describes recent public meetings about the development of supportive housing as “‘ugly,’ ‘terrible,’ and ‘offensive,’” with frequent violations of the human rights of future tenants (Ross, 2007). Dream Team members had considerable experience of NIMBY attitudes because they had attended a number of planning meetings and knew that concerns are usually voiced as a narrow list of fears about property values, crime, traffic congestion, and noise disruptions (Hill et al., 1993). Other studies show that negative attitudes dissipate quickly (Arens, 1993; Wahl, 1993) and that property values are not negatively affected (Anderson & Sherwood, 1999; Boydell, Pierri, & Trainor, 1986; Collingwood & Associates, 1995; Furman Center, 2008; Galster, Tatian, Santiago, Pettit, & Smith, 2003; Martinez, 1988; Smith, 1992). However, the economic and neighbourly interactions between tenants and neighbours of existing supportive housing facilities are rarely reported or introduced,

even anecdotally, in public forums. In order to see whether claims made by opponents of supportive housing could be challenged, the group decided to conduct a research project that would examine supportive housing's local economic and social impact.

This study found support from the Wellesley Institute and the University of Toronto. The Wellesley Institute has a unique mandate to support community capacity building and community-based research as part of the process of creating effective solutions to problems of urban health. All parties in this project understood participatory action research to be synonymous with community-based participatory research (CBPR), and were comfortable with the definition of CBPR as

a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities. (Israel, Schulz, Parker, & Becker, 1998, p. 173)

Finding meaning and purpose in one's life by challenging discrimination is recognized as one potential path to recovery (Jacobson & Curtis, 2000; Onken, Dumont, Ridgway, Dornan, & Ralph, 2002). This project created an opportunity for Dream Team members to shift into the position of knowledge producers, to channel some of their anger, to explore neighbourhood attitudes for themselves, and to reshape and rearticulate their own knowledge. From the project's beginning, Dream Team members also understood themselves to be pioneers, because there are still very few opportunities for people with mental health issues to become researchers. This created a collective excitement and purpose that carried throughout the study and continued into the preparation of this article with the recognition that the team's experience might make it just a bit easier for other people with mental health issues to conduct other studies.

THE RESEARCH PRACTICE MODEL: CONTROL AND SUPPORT

The Dream Team Research Group was initially composed of members of the Dream Team who were particularly interested in the project (about half of the Dream Team), a research consultant who acted as the study coordinator, and a researcher from the University of Toronto. An Enabling Grant from the Wellesley Institute made it possible for this group to spend 6 months preparing for the full research project. We began with a discussion about group members' experiences with research, either as researchers or as "the researched," and used that as a foundation for ongoing discussions of research terms and research methods. The education background of the Dream Team members varied considerably. Several members did not have formal post-secondary education, whereas others had some college or university. For most, their formal education took place before the onset of their illness and "felt like it belonged in another life" (research group member, personal communication, March 2008). None had ever participated in the design of a study.

As other researchers have noted, power-sharing strategies must be consciously worked out at all stages of a project, and they are particularly important at the beginning when the relationships are new (Ochocka, Janzen, & Nelson, 2002). In this case, the experience of the researchers was balanced by the strength of Dream Team members in operating their own organization. The enabling phase centred on four workshops, where both the researchers and the Dream Team members shifted their usual practices. The researchers acted as facilitators and resource people, and Dream Team members expanded their discussions to engage with

the ideas and language of research. Through these workshops, the group as a whole focused and refined the research question, established criteria for the buildings and neighbourhoods we wanted to study, and assess how other research would influence the study. These workshops did not involve “lectures”; rather, the group agreed on an agenda, and the experienced researchers prepared point-form summaries of research methods, research terms, and other studies to introduce at appropriate moments in the discussion. In each workshop the group made decisions about the next steps, after which the facilitator prepared detailed notes to act as the starting point for the next session. Halfway through this initial phase, group members worked in pairs to conduct their first interviews with agency executive directors to begin to ascertain which buildings might meet the group’s developing criteria.

The enabling phase was crucial to the research group’s ability to carry out the full project. The time and resources made it possible to develop a practice model that worked for this combination of people and that lasted throughout the project. The group became comfortable with regular, long meetings that were facilitated by the research coordinator. The group made the all decisions, usually by consensus, although several decisions were contentious enough to warrant a “straw” vote, followed by more discussion. A group member took minutes of each meeting, which provided the starting point for the next meeting. Expertise and other research were inserted into the group discussion as background information to support specific decisions that needed to be made. Each individual was involved in finding information or conducting interviews between meetings. The written components of the study (proposals, reports, ethics review, presentations, and this article) were first discussed by the group, then drafted by the more experienced researchers, brought back to the group at least once for thorough discussion, and then revised. This model made it possible to comfortably develop a consensus on the direction of the full research project, draft a research proposal, find support from several agencies, and establish trust between the Dream Team and the university and community-based researchers. It also made it possible for members to begin to explore their own identities as researchers, to re-encounter concepts from forgotten university courses, to process positive and negative experiences as research subjects, and to value the “insider” knowledge they had about supportive housing.

Mutual and professional support among research group members is crucial to the success of participatory projects (Ochocka et al., 2002), and was an important component of this one. Members found a balance between professional and personal support that worked well for this group. It was a casual, professional research relationship that acknowledged and accommodated individual problems, but did not dwell on them. It created a space where members could explore identities (as planners, researchers, interviewers, etc.) that were not defined solely by their personal struggles and mental health. Recovery researchers have found that the capacity to experience oneself outside of the definition of mental illness is an important component of reauthoring, or taking control of one’s story and direction, and requires active involvement in other social roles (Ahern & Fisher, 1999; Harding & Zahniser, 1994). Group members came to know each other well and our meetings often started with a check-in about what was uppermost in people’s minds, with short celebrations of achievements and acknowledgements of concerns. Although the group acknowledged and made accommodations for the disruptions in individuals’ lives, the focus of our interactions stayed on the research.

The full research phase began with the addition to the research group of a representative from the two agencies whose buildings would be involved in the study. Over the course of the project, this group met over

40 times, usually for 3-hour sessions. As one member observed, “The meetings were frequent and long, but the frequency seemed to be of assistance to group members, helping to keep consistency and cementing new skills and knowledge” (personal communication, March 2008). Dream Team members and the research coordinator were paid honoraria for their participation in the group meetings and for project-related work between meetings. The Dream Team members’ honoraria were calculated so as to supplement, but not disrupt, their Ontario Disability Program or social assistance support. The sessions almost always included a meal, in recognition of the length of the meetings and of group members’ limited income.

The project work began with further negotiations with the two supportive housing agencies that had agreed to participate. The team was looking for buildings where there had been some controversy during the planning stage and that were in somewhat different locations (residential street vs. commercial street). Several options were possible, and the final selection required field visits, reports back to the whole group, and much discussion before the group could make the decision. After a building was chosen from each housing agency, the whole group worked on the content of the University of Toronto research ethics protocol, which involved further developing draft questionnaires and detailing recruitment plans for tenant and neighbour interviewees. The group thoroughly discussed how to protect the confidentiality of interviewees, and signed a confidentiality agreement stipulating that researchers would not name individuals in the study, or the location of the buildings, outside of meetings. Because the Dream Team researchers had connections throughout the community and their daily lives brought them into contact with potential interviewees and networks of those individuals, this agreement protected both the researchers and the interviewees.

RESEARCH METHOD

The research group developed separate strategies for recruiting tenants, staff, and neighbours for interviews. In the recruitment of tenants, agency representatives and staff needed to be careful not to influence tenants’ decisions to participate in the study. Because of the availability of common space in one building, the group chose to design a poster and flyer inviting these tenants to an information and sign-up session hosted by the research group. In the other building, staff circulated an invitation to participate and tenants voluntarily signed up. Tenants were asked to participate not only in the interviews but also in the follow-up sessions where researchers would share and discuss preliminary findings. Interviewees were offered an honorarium for participation, which was a crucial recognition of both their contribution and their financial situation. We found that the information session created excitement about, and ongoing support for, the project among tenants.

Neighbours were recruited in two different ways. Some were selected through a snowball process that began with recommendations from tenants and staff. Most were recruited through a canvass of residents and businesses on the same city block as each building. These people received a flyer, delivered by building tenants and research group members, letting them know when researchers would knock on their doors and offering them an honorarium for their participation. Because of the ethnic composition of the neighbourhood surrounding one house, the flyers were translated into Chinese.

Members’ knowledge of supportive housing assisted the process of developing the open-ended questionnaires for tenants and staff. They knew about likely interactions tenants might have in their neighbourhoods,

and insisted that the questions be stated as clearly as possible. Pairs of researchers took sections of each questionnaire and developed related questions for discussion by the whole group. Pairs tested the questions with each other and drafted revisions.

The neighbour questionnaire was a mix of fixed-response and open-ended questions. The fixed-response questions were included because we recognized that the interviews needed to be a maximum of 15 minutes long. One participating agency was concerned that the research process itself could stir up opposition among neighbours and asked for assurances that we would protect the privacy of tenants. The strategy the group developed to address this concern was to divide neighbour interviews into two sections. The first section focused on changes in the neighbourhood and finished with an opportunity for interviewees to voluntarily identify the buildings we were interested in. If they did not identify the buildings, then the interview ended. If they did, the second section continued with questions specific to the building.

Training and Interviewing

Training for interviewing tenants and staff took place over several months. The research coordinator prepared checklists of interviewing skills, interview ethics, interview protocol, and recorder operation in preparation for lengthy discussion by the whole group. Members worked in pairs to practise listening skills and unscripted follow-up questions. At the time, several members noted that listening was a skill they needed to strengthen, and that they were rarely challenged to do it. One of the Dream Team researchers initiated a session at her home for people to practise interviews with neighbours in her building. When the training was complete, group members conducted hour-long interviews with 23 tenants and 10 staff. Interviewers worked in pairs, at first with the research coordinator, and then with another member of the group. Interviewers identified themselves as people who lived in supportive housing, and assumed that this would set tenant interviewers at ease. This was true for the most part, although we could have been more careful with gender interactions—two of the women interviewees told us that they would have preferred to be interviewed by women.

The second round of training, this time for interviews with neighbours, took place a year into the project, after the tenant and staff interviews were completed. These door-to-door interviews were perhaps the riskiest and most complex component of the project. In the interviews with neighbours, Dream Team members were no longer “insiders,” and there was some risk that they would encounter stigma and the NIMBY opposition that had been expressed around at least one of the buildings. During this phase, interviewers were publicly identified as University of Toronto researchers, and the shift from being a fellow supportive housing tenant to a university researcher marked both the learning that had gone on in the previous year and an important identity shift. In order to conduct interviews in Chinese, the project recruited three interviewers/interpreters from a Chinese mental health organization. The research group as a whole oriented these new participants, which created a moment when the Dream Team researchers recognized how much they had learned. The Chinese interviewers brought important cultural observations to our planning discussions and altogether added a new excitement to the project. The expanded team met twice to practise the interviews in pairs, with discussion about possible difficult questions and situations and how we might respond. The interviews took place in four neighbourhood blitzes of 2 or 3 hours at a time. Each pair of interviewers was prepared with identification, clipboards, consent forms, interview questions, recorders, and honoraria for interviewees.

As pairs were interviewing, the more experienced researchers set up a mobile “office” at a neighbourhood coffee shop and debriefed each pair when they returned.

The team conducted 52 interviews with neighbours and local businesses. Several members acknowledged that they were nervous to start, but that the experience of encountering interested, unprejudiced people at the door was transforming and confidence building. One research group member said, “Before we did the door-to-door interviews, I was a bit worried. I was at those community meetings before it was built and knew that some people on this street had opposed the building. I didn’t know if I could handle someone who was angry or who had NIMBY attitudes. But everyone we spoke with was very polite with us” (personal communication, March 2008). Another said, “It was so hopeful, really an experience of what neighbour interactions without stigma might feel like” (personal communication, October 2008). Others were engaged by the intercultural experience of working with a Chinese speaker, and being easily invited into Chinese-speaking homes. One member said, “Our training, the peer and professional support made it possible for us to trust we could do it. Then we cut the strings and did it” (personal communication, October 2008). Another observed that “once you’ve gone through that, you have more confidence, and you know how to prepare for hard situations” (personal communication, October 2008).

Analyzing the Data

Throughout the project, group members searched for related research studies and descriptions of neighbourhood changes and statistics, and brought summaries to the whole group for discussion. The only information that was not possible to find in public records was the history of real estate sales, and consequently the project contracted a member of the Toronto Real Estate Board to conduct the review of property values.

After interviews were completed, all group members read interview transcripts to pull out themes and stories. One attempt to have the whole group identify code words in the transcripts did not work well, but a method of clustering stories by themes was much more successful. This was when we began to recognize the strength of the stories about tenants’ contributions to their neighbourhoods. It was also a moment when researchers recognized that they had underestimated the importance of their “insider knowledge” and observations. As one member said, “We had to overcome our own attitudes about what we, people with mental health issues, can contribute to our neighbourhood. It was almost like a surprise finding. We might have designed the questions differently if we hadn’t had those blinkers on” (personal communication, October 2008). Several studies on neighbourhood strength and cohesion were particularly helpful in expanding our understanding of many of our key observations (Freiler, 2004; Galster, Pettit, Santiago, & Tatian, 2002; Sampson & Raudenbush, 1999; Sampson, Raudenbush, & Earls, 1997).

As the outline of our analysis began to emerge, group members presented it to follow-up meetings with tenants in each building and to a combined meeting of staff from both buildings. The purpose of these sessions was to ask whether interviewees found any of our observations surprising, whether we had missed anything, whether anything had happened in the interim that we should know about, and where we should distribute the report. Observations from these sessions were integrated into the final report and its distribution. One session with tenants was particularly lively and added to our understanding of the significance of tenants’ contributions to the safety of their neighbourhood. “I don’t know of any other research that would

check back with the tenants like this. That meeting had so much energy, and several people offered to help us publicize the report” (research group member, personal communication, December 2007).

TRANSFORMING THE STUDY INTO ACTION

Almost a year before the study’s report was complete, the research group began to make plans to use the study to strengthen the development of additional supportive housing in Toronto. Making presentations and networking are among the strengths of the Dream Team members, and they took the lead in much of this work. To reach two important provincewide audiences, Dream Team members initiated, organized, and delivered “preview” conference presentations. The second of these, a 2-hour workshop with slides and speakers’ notes for four presenters, formed the basis of the group’s standard presentation of the research. One of the most important strategies for ongoing distribution is that the study has become a regular component of Dream Team presentations. To that end, the research group designed an in-depth workshop that engaged those Dream Team members who had not been involved in the study, so that they could begin to speak about the study themselves. Members wrote announcements for newsletters and websites and distributed these through a wide range of housing- and mental health-related networks. Copies of the final report were hand delivered to over 50 members of the federal and provincial governments and to city councillors.

After consultations with housing and mental health activists, the Dream Team and the Wellesley Institute released the study at a media conference at Toronto City Hall (Monsebraaten, 2008). This was followed immediately by a presentation at Wellesley’s community forum on supportive housing, and by a presentation to the City’s Affordable Housing Committee. Within a month of the release, group members had presented the study to mental health workers, to social work students, and to several agencies at their annual general meetings.

Empowerment

In keeping with the research practice throughout the project, the group designed its own project evaluation. We reviewed descriptions of participatory research and revisited the project’s goals and activities in order to develop a set of questions for ourselves. All group members said they had acquired new interviewing skills, and most thought they had learned new meeting and planning skills. It was remarkable that at the end of the project most members felt that the regular work of the group was easy. As one member put it, “At first it seemed complicated, but over time I got the hang of it, and it turned out that it was quite straightforward” (personal communication, March 2008). There were also critiques, particularly about moments when individuals felt confused by, or were not able to participate in, the decision making, and when the group did not provide the appropriate supports.

A strong theme in the evaluation was that members were ready for more challenges and wanted to take on more complex reading and preparation between meetings. This new capacity showed itself as members began writing op-ed articles and letters to the editor about the research findings. One member said, “We are much more confident when we make presentations now. Other people see it. We see it” (personal communication, October 2008). One member summed up his experience with the project as follows: “I can comment on research now, and am on another research committee. I thought I would never use my university education

again, but now it's fabulous to say I am doing research, writing letters, and contributing to ideas" (personal communication, October 2008). During a presentation to social work students, this same researcher spoke about his life on the street and experience getting into secure housing, and then said, "I realize that I am doing now what I always wanted to before I got ill. I am reading, doing research, and contributing to public debates and changes in my community" (personal communication, July 2008). The University of Toronto researcher prepared special course certificates for each member of the group in recognition of their learning and accomplishments. Several members said it meant more to them than their college or university diplomas.

Hopeful Findings

During discussions of the relevance of recovery to the project, the team repeatedly connected the study's findings with the importance of hope in the lives of people with mental health issues (Jacobson & Greenley, 2001; Lunt, 2000). The study's central observation is that tenants in the two supportive housing buildings are assets to their neighbourhoods (for a full description of the study, see de Wolff, 2008). The stories we encountered in the course of our interviews show that many tenants are more than tolerated in their neighbourhoods, and that many are active contributors to strengthening their neighbourhoods. The study also found that property values and crime rates around each building had not been negatively affected. We found tenants involved in neighbourhood improvement petitions, gardening, pet networks, and informal neighbourhood watches. "It's not just that people learn to tolerate us—it's that we are good for neighbourhoods! Developers should be required to put in supportive housing in all new complexes and neighbourhoods!" (research group member, personal communication, October 2008).

Another researcher emphasized a more personal vision of hope that she found in this study, saying, "As a person with mental illness, it gives me hope that I can live in a normal neighbourhood—that I don't have to stay in shelters in not very nice parts of the city—and that people will treat me like anyone else" (personal communication, October 2008).

The research group's reflections on recovery broadened our collective understanding of the study's consequences. These reflections have not produced a series of stories about individuals' recovery as much as a story of the growth, strengthening, and accomplishment of a collective. "We have grown as a group. Our personal stories are still powerful, but now we can speak with authority about something more" (research group member, personal communication, October 2008). Reflections on recovery emphasized the hope and encouragement captured in the idea that as individuals in supportive housing begin to live more confidently, they strengthen local communities, and that the incorporation of supportive housing can be an asset to and a component of the recovery of neighbourhoods themselves.

RÉSUMÉ

La recherche communautaire participative est une pratique qui augmente le pouvoir d'agir, basée sur des principes qui chevauchent ceux du rétablissement en santé mentale. Un groupe de défense d'intérêts dont les membres vivent avec une maladie mentale en logement supervisé, *Dream Team* (l'équipe du rêve), a planifié et conduit une étude de l'impact sur le quartier de deux logements supervisés à Toronto, tout en utilisant une approche participative. L'étude a trouvé que les locataires n'ont aucun impact négatif sur la valeur immobilière des maisons, n'augmentent pas le taux de criminalité et apportent une contribution significative

à la vigueur de leur quartier. Cet article démontre la puissance d’une association collective autogérée dont les membres sont disposés à contester le stigmate et la discrimination, et documente la recherche-action participative comme stratégie pour apporter leur connaissance aux discussions qui forment leurs communautés, leurs services et les processus politiques qui les impliquent.

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