Measuring Engagement: Developing Metrics for Relational Outcomes in Supportive Housing

Authors
Frederick Shack, LMSW[1,4]
Mardoche Sidor, MD[1,2,3]
Jose Cotto, LCSW[1,5]
Karen Dubin, PhD, LCSW[2,4]
Lesmore Willis Jr, MPA, MHA[1]
Gary Jenkins, MPA[1]

Affiliations
[1]Urban Pathways, New York, NY
[2]SWEET Institute, New York, NY
[3]Columbia University Center for Psychoanalytic Study and Research, New York, NY
[4]Columbia University, School of Social Work, New York, NY
[5]New York University, Department of Social Work, New York, NY

Correspondence concerning this article should be addressed to Mardoche Sidor, MD, Urban Pathways, at **msidor@urbanpathways.org**

Abstract
Traditional metrics in supportive housing and community mental health emphasize compliance (appointments kept, medications taken, housing retention). Yet these measures fail to capture the relational core of engagement. This article proposes a framework for measuring engagement through relational outcomes such as trust, safety, collaboration, and resident-reported experience. Drawing from implementation science, alliance research, and trauma-informed care, we present the Engagement Stage Self-Assessment Checklist as both a fidelity and outcome measure. Composite case studies from Urban Pathways are starting to demonstrate how shifting measurement priorities has the potential to support systemic accountability to relational practice.

Introduction
"You can't improve what you don't measure." In mental health and housing, metrics drive funding, policy, and practice priorities. Historically, systems have measured compliance behaviors (e.g., medication adherence) rather than relational outcomes (Stanhope & Dunn, 2011). However, research across psychotherapy and health services shows that alliance and trust predict long-term outcomes more strongly than compliance (Flückiger et al., 2018; Wampold & Imel, 2015). The Four-Stage Engagement Model requires metrics that reflect its relational foundation.

Theoretical Framework

Relational metrics are supported by:

1. Therapeutic Alliance Research: Alliance predicts outcomes across modalities (Horvath et al., 2011).
2. Trauma-Informed Care: Safety and trustworthiness ought to be measured to ensure trauma-informed fidelity (SAMHSA, 2014).
3. Implementation Science: Fidelity tools are essential for sustaining practice change (Fixsen et al., 2005).
4. Recovery-Oriented Care: Outcomes need to include empowerment, choice, and satisfaction (Davidson et al., 2006).

Application/Analysis

At Urban Pathways, engagement metrics will include:
- **Resident-Reported Trust**: Surveys asking residents if they feel listened to, respected, and safe.
- **Staff Fidelity Assessments**: Use of the Engagement Stage Self-Assessment Checklist during supervision.
- **Collaborative Goal Setting**: Tracking how many goals were resident-led vs. staff-driven.
- **Composite Case Example**: A site with high rates of incidents would improve outcomes after adding resident trust surveys. Staff would shift from compliance focus to listening and empathizing, resulting in fewer conflicts and higher stability.

Implications
- **Practice**: Staff need to be accountable not only for tasks completed but for relationships built.
- **Supervision**: Supervisors can use fidelity tools to identify staff growth areas.
- **Policy**: Funders need to incentivize relational metrics alongside compliance outcomes.
- **Research**: Studies need to compare relational metrics with traditional metrics in predicting long-term outcomes.
- **Systems**: Measuring engagement reframes accountability around dignity, trust, and empowerment.

Conclusion

Measuring engagement through relational outcomes ensures accountability to what matters most: trust, safety, and collaboration. By expanding metrics beyond compliance, supportive housing and community mental health systems can realign practice with recovery-oriented, trauma-informed principles.

References
- Davidson, Larry, et al. "Creating a Recovery-Oriented System of Behavioral Health Care: Moving from Concept to Reality." *Psychiatric Rehabilitation Journal*, vol. 29, no. 4, 2006, pp. 315–321.

- Fixsen, Dean L., et al. *Implementation Research: A Synthesis of the Literature*. University of South Florida, 2005.
- Flückiger, Christoph, et al. "The Alliance in Adult Psychotherapy: A Meta-Analytic Synthesis." *Psychotherapy*, vol. 55, no. 4, 2018, pp. 316–340.
- Horvath, Adam O., et al. "Alliance in Individual Psychotherapy." *Psychotherapy*, vol. 48, no. 1, 2011, pp. 9–16.
- SAMHSA. *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. U.S. Department of Health and Human Services, 2014.
- Stanhope, Victoria, and Kathleen Dunn. "The Curious Case of the 'Working Alliance' in Assertive Community Treatment: A Review of the Literature." *Administration and Policy in Mental Health*, vol. 38, no. 5, 2011, pp. 301–310.
- Wampold, Bruce E., and Zac E. Imel. *The Great Psychotherapy Debate: The Evidence for What Makes Psychotherapy Work*. 2nd ed., Routledge, 2015.