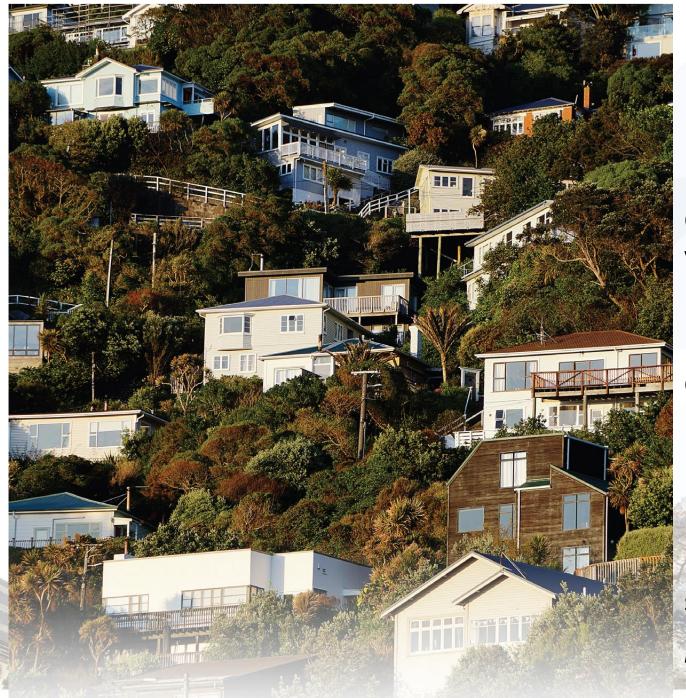


Housing & Health how research can influence policy

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www.sustainablecities.org.nz

www.resilienturbanfutures..org.nz





Philippa Howden-Chapman, Helen Viggers, Michael Keall, Sarah Bierre, Arthur Grimes, Nevil Pierse,

Researchinformed public policy: a case study of housing

Policy Quarterly, 2003, 19, 4, 3-9.

Key points



- Coordinating timing of research & policy difficult strategic planning important
- He Kāinga Oranga funded for 25-years
- Strong multidisciplinary team guided by Te Tiriti
- Relationships with policy makers & analysts, central & local govts Māori, communities
- Importance of frameworks
- Clear goals to reduce inequalities in health & wellbeing by improving housing at population level
- Strong international linkages with WHO & International Science Council

Strategic focus



- Housing main population exposure
- Focus on poor quality of existing housing
- Can cause or exacerbate health problems requiring hospitalisation:
 - Respiratory conditions asthma & COPD
 - Cardiovascular conditions –atrial fibrillation
 - Close-contact contagious disease Rheumatic fever, Meningococcal disease, TB, COVID-19
- Poor quality of rental housing
- 2018 home-ownership: Pakeha 71%; Māori 42%; Pacific peoples 35 %

Research Programme

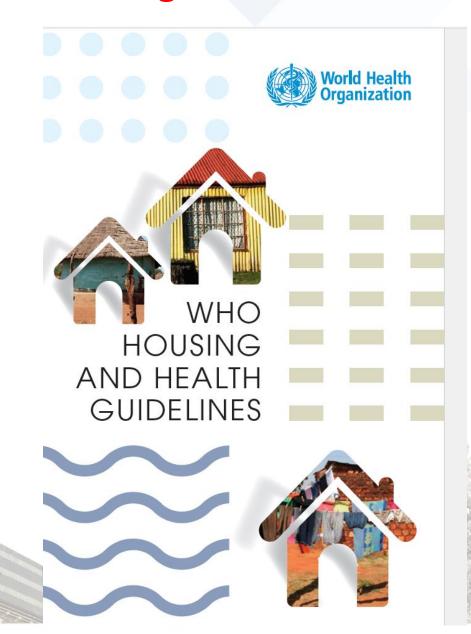


- Critically robust research designs (RCTs, IDI, complemented by qualitative studies)
- Identify effective interventions that can be rolled out as public policies which reduce inequalities
 - Housing, Insulation & Health Study Warm Up NZ programme
 - Housing, Heating & Health Study
 - Housing, Injury Prevention Programme (HIPI)
 - Māori Injury Prevention Programme (MIPI)
 - Crowding design for multi-family housing



Three-generation house for Pacific family, McKillop Crescent, Porirua - collaborative research

WHO Housing & Health Guidelines 2018





Healthy housing:

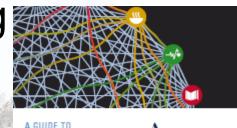
- Not crowded
- Not too hot
- Not too cold
- Not damp & mouldy
- Not polluted
- No hazards for falls

Sustainable Development Goals



- Urban land use, housing, energy & transport have strong interaction effects so need to be planned together
- Benefit-cost analyses should consider co-benefits e.g. health & wellbeing
- Important to evaluate policy experiments

Howden-Chapman, P, Siri, J., Chisholm, E., Chapman, R., Doll, C. N. H., & Capon, A. SDG3: Ensure healthy lives and promote well-being for all at all ages. In D. J. Griggs, M. Nilsson, A. Stevance & D. McCollum (Eds.), A Guide to SDG Interactions: From Science to Implementation. (pp. 84-126). Paris, France: International Council for Science, 2017. doi: 10.24948/2017.01









Research Impacts



- Compulsory Healthy House Standards for rental housing 2019 insulation, heating, ventilation, draught-stopping & requirement for smoke alarms
- Public Housing & Urban Regeneration Programme using Wellbeing Framework to show outcomes in tenant wellbeing, quality of housing, suitability for Māori households, energy transport patterns

NZ Wellbeing Framework OTAGO



- Designed to "prompt thinking" about policy impacts across different dimensions of wellbeing & long-term & distributional issues & implications of policy.
- Three dimensions:
 - Our Individual and Collective Wellbeing
 - Our Institutions and Governance
 - The Wealth of Aotearoa New Zealand

Public Housing and Urban Regeneration Research Programme

Our vision:

To improve the wellbeing of public housing tenants & their communities by providing evidence that leads to healthier & more environmentally sustainable development

- 5-year, MBIE Endeavour-funded programme:
 \$12.3m
- Compares approaches of 7 public housing providers to housing & urban regeneration
 - Matauranga Māori
 - Governance
 - Quality of housing
 - Energy
 - Transport
 - Tenant & community wellbeing



Britomart Street social housing. Image credit: Studio Pacific Architecture and Andy Hanson photography

Positive evidence about tenure impact of tenure of housing on wellbeing & market: first results



- Wellbeing in public and community housing tenants similar to owner occupiers - significantly higher than tenants in private rentals in NZ
- Subsidised public housing increases private housing values (9.1% 14.7%) in NZ & USA

Grimes et al, *Micro-geography and public housing tenant wellbeing*, Motu Working Paper 23-08.

Watt, On the Effect of Social Housing in New Zealand, MA Canterbury University, 2022. Stacy & Davis, Assessing the Impact of affordable housing on nearby property values, Urban Institute, 2022



Homelessness



1 in 100 people in severe housing deprivation

- crowding
- sub-standard housing
- homeless

Amore K, Viggers H, Howden-Chapman P. Severe housing deprivation in Aotearoa New Zealand, 2018 June 2021 update. Report commissioned by MHUD. He Kāinga Oranga / Housing & Health Research Programme

Viggers H, Amore K, Howden-Chapman P. Housing That Lacks Basic Amenities in Aotearoa New Zealand. A supplement to the 2018 Census Estimate of Severe Housing Deprivation commissioned by Te Tūāpapa Kura Kāinga - Ministry of Housing and Urban Development. Wellington, University of Otago. 2021



Conclusions



- Housing key

 determinant of wellbeing
 - Social, economic
 - environmental
 - cultural
- Importance of reducing inequalities by raising standards & sustainability of housing
- Broad systemic cobenefits
- Important that research underpins policy



Housing First-Implementation and Impact



Method



Aotearoa NZ, programme, and comparison of four cases

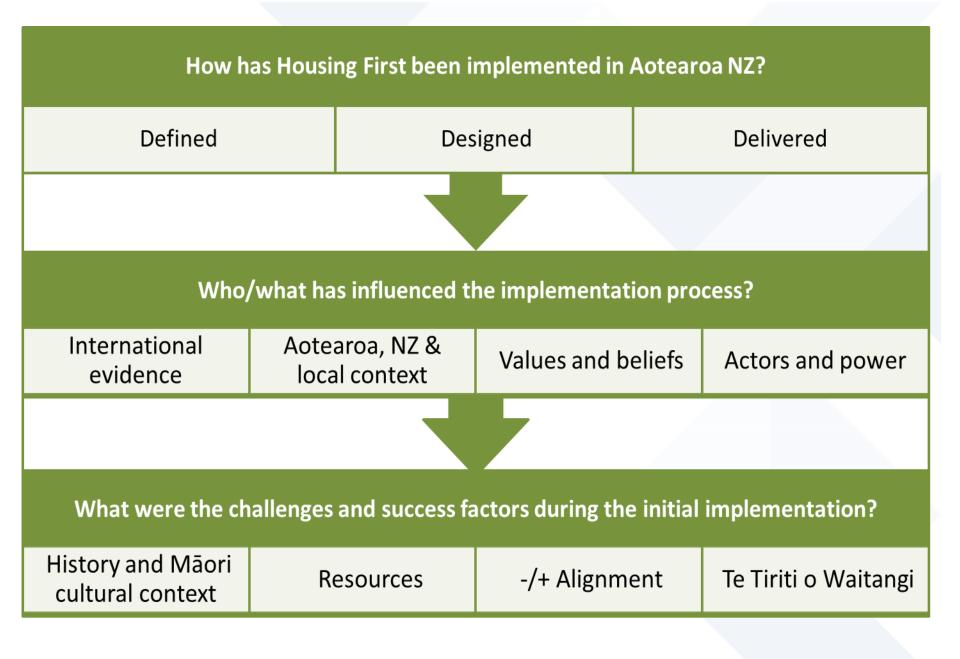
Review of the international HF implementation literature

- Key informant interviews government and community agencies involved in HF implementation
- Documents analysis (policy, HF programme, service design, delivery, practice, and website media).









Dynamic context



- Housing First was not government-funded pre-2017 by 2019 the programme budget \$197m
- Homelessness (severe housing deprivation)- 2001-2013-2018 censuses; an increasing and accelerating trend (Amore et al. 2021)
- Equity homelessness disproportionately impacts
 Māori
- Rapid introduction and upscale of policy and service delivery (Transitional Housing, Emergency Housing, EHSNG, Sustaining Tenancies, and Housing First).

Macro-Policy and Programme Context



International: signed and ratified UNDHR 1948, ICESC 1978, UNCROC 1993, UNCRPD 2008, UNDRIP 2010, Social Development Goals.

National: Te Tiriti o Waitangi; Iwi CF 2015

Official definition of homelessness (Severe Housing Deprivation)



First data and demographics Severe Housing Deprivation.

Winter of Discontent

\$ Transitional & Emergency Housing < provision \$ 354 m 4 years

HF Pilot Central Auckland 60 < 250 places

Christchurch, Tauranga and Wellington total 550 places

HF < to nine areas 1450 places

HF < 2700 places 197m

Rapid upscale of implementation then COVID!

Findings show: pre-existing challenges



- Type and nature of unmet needs, level of social exclusion,
- Negative consequences of homelessness
- Inverse care law operating in three cities
- Drivers of exclusion evident at multiple levels (individual/whānau, community, systemic, and structural)
- History of colonisation and contemporary colonialism, ongoing breaches of Te Tiriti o Waitangi, and conservatism

Housing First in each case



Defined

- Housing First and Māori cultural principles (informed by-based on)
- Programme entry criteria= 12
 months in last 3 years + without
 shelter, emergency housing; and high
 level of complex need

Designed

- Local lead providers, networks, and varied inclusion mana whenua, Māori-led, and people experiencing homelessness
- Systemic response (was and remains a work in progress)

Delivered Housing

- Scattered site+ some single-site (more planned 5 years E.g. 2023/4)
- Indirect via CHPs and private landlords, + IRRS, Direct via HNZ/KO; OR AS and private landlords shared + CHP shared accommodation, EH
- Consequently tenure security varied but all offered re-housing

Delivered Support

- Varied: Intensive Case Management with some Multi-Disciplinary Team "like" did not match need
- Varied intensity, caseloads 1:10, 1:20 (without adequate funding and resources 1:40 and/or key roles/relationships missing; e.g., health expertise critical)

Housing First's initial implementation



Successful; to an extent,

- Strengths of partnerships (team, networks, sectors, iwi, Māori-led, health)
- New government funding and resources critical for housing and support
- Renegotiation of relationships: with landlords; based on/informed by HF and Māori cultural principles; and voices of people experiencing homelessness

Challenges; planning and initial implementation

- Māori excluded from policy decisions resulting in political and cultural tensions WAI2750 Kaupapa Inquiry
- Lack of clarity terms, narrow entry criteria (policy dropped, music stopped)
- Insufficient resources (coordination, housing, and support)
- Lack of health expertise (mental health, addictions, and primary care)
- Limited system capacity due to novelty
- Lack of strategic focus across government and sectors.

Despite the HF programme's initial implementation

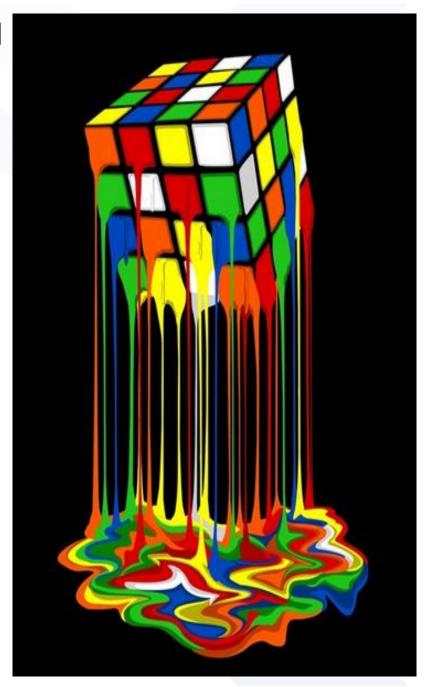
There was a lack of systemic recognition of the drivers of homelessness (framing)

Fragmentation: lack of clarity & buy-in across government; social policy and service delivery siloes remained at multiple levels (COVID-19 2020/2021 further highlighted issues)

Implementing HF and Māori cultural principles was constrained by this context

BUT....

HF and Māori cultural principles can be used to create mechanisms to address these issues effectively **if fully implemented**. (HAP, MAIHI 2020 a start, clear roles, monitoring, enforcement of accountability)



Initial framing and implementation



- Focused on individuals/whānau and service providers' capability in navigating a fragmented policy and service delivery landscape (impossibly superhuman, time-intensive task)
- Pre-existing policy; at worst, exclusion by design (discharge, eviction, deportation), and at best, lack of design (just too hard)
- Clear breaches of Te Tiriti o Waitangi WAI2750 Kaupapa Inquiry
- The implementation drew attention away from the systemic and structural context surrounding this frame (addressing issues that led to people's homelessness.....)
- Whose lens are we looking through? The inclusion of people experiencing homelessness is critical

Recommendations to increase effectiveness



- Acknowledgement; of governance and institutional arrangements that do not realise the Rights of Indigenous Peoples, the Right to Housing, and Te Tiriti o Waitangi
- Focus energy on system alignment/integration at multiple levels towards HF and Māori cultural principles (legislation, policy, service delivery, and practice) across sectors (E.g., housing, social, health and justice sectors) (In each case setting green shoots emerging but much more could be gained)
- Promote cultural safety; and intersecting identities (Irehapiti Ramsden; critical self-reflection and people experiencing homelessness determine what is 'safe')
- Cease policy and practice that excludes, generating homelessness (e.g., improve discharges from in-patient care)

Future

- Strengthen intersecting partnerships
- Advancement of Māori-led, culturally safe practice, multi-disciplinary, based on evidence.
- Provide housing AND support at the scale and intensity required based on people's/whānau preferences (either or dichotomies unhelpful)
- System data/research: local strategy/plan for housing (new supply, reconfiguration, flexible allocation, subsidies) AND support in varied intensities for different groups, MDT, longitudinal data, and outcomes
- Increase capacity; sector(s), workforce education, training, technical assistance, and involving people with experience of AND people experiencing homelessness at all levels (policy, research, MDT practitioners)









Inclusion by design

- Addressing homelessness is not a mystery;
 increasing evidence of what is/is not effective
- Leadership, strategy, inclusive governance (H&S prioritised and resourced)
- Systemic recognition of the Rights and entitlements yet to be realised and needs to be met (MDT, WAI inquiries, and data)
- Principles a Compass: systemic alignment/integration of HF and Māori cultural principles e.g. strategy, legislation, policy, funding, resources, workforce training, service delivery, and practice (Green shoots)
- A renegotiation of relationships: sectors, informed people with experience of homelessness AND people experiencing homelessness





Thank you

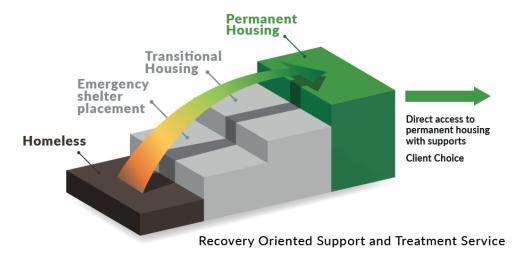


- Study participants
- Ministry of Business Innovation and Employment for the funding
- Research partners, The People's Project, Dwell Housing Trust, Waikato University, Dr Polly Atatoa-Carr, Carol McMinn, Kerry Hawkes, Julie Nelson,
- Supervisors: Professor Nevil Pierse, Professor Philippa Howden-Chapman, and advisor Jenny Ombler
- University of Otago and colleagues

Contact: Clare.aspinall@otago.ac.nz

The People's Project – A Housing First response to homelessness in Hamilton

The Housing First Approach



Reference: Sam Tsemberis, Founder, Pathways to Housin

Housing First Principles

(from Pleace)

- Housing is a human right
- Commitment to openended service
- Scattered-site housing
- Separation of housing from services
- Self-determination
- Recovery orientation
- Harm reduction





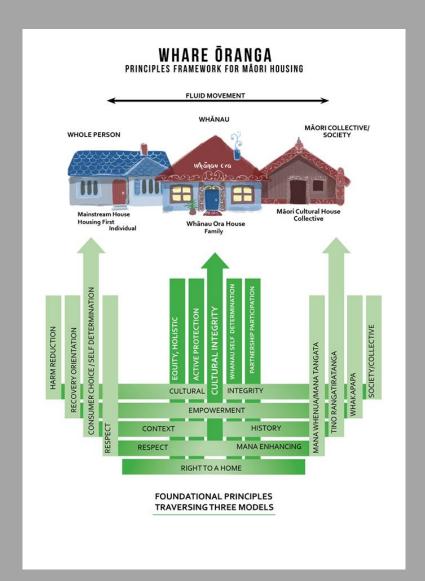
Homelessness About us → People's stories Results For landlords Support us News Contact us



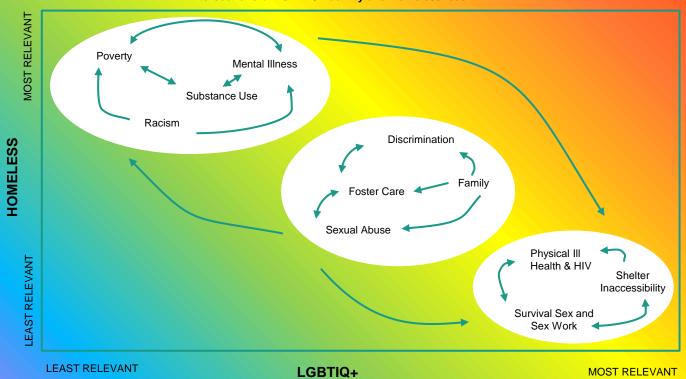
Homelessness is a complex issue but it can be solved when communities and agencies work together; when people work together.

Research Streams

- IDI: Outcomes for people housed (Otago)
- Risk factors and experiences (Waikato)
- Takatāpui/LGBTIQ+ and homelessness (Otago)
- Transferability (Otago)
- Te Tiriti o Waitangi and Housing First (Otago)



Intersections of LGBTIQ+ Identity and Homelessness



IDI process

- Limited high priority data collected
- NHI used as identifier
- Consent obtained
- Early engagement with Stats NZ
- Currently used as the model by Social Well Being Agency.
- Used for HHI's and new programme

390 people

Slightly imbalanced by sex: 54% female.

'Working-age': 52% between 25-44 years in age, 32% 45-64.

Overrepresentation of Māori: 73% Māori, compared to 41% Pākehā, 7% Pasifika, 3% Asian, and 5% MELAA.

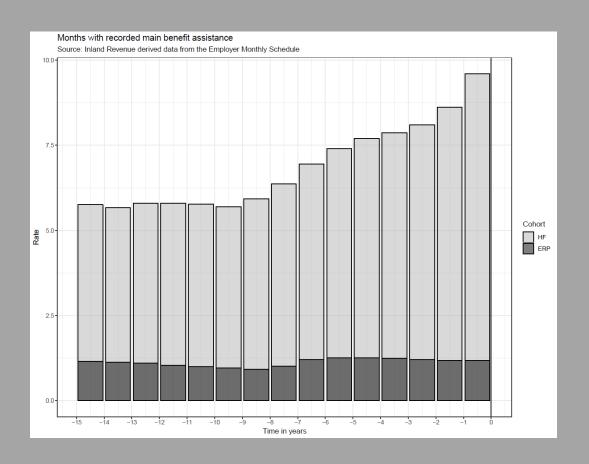
"Hard to reach"?

Health 99.2% 96.2%

Justice 83.8% 23.6%
97.7% 92.5%

Social Development and Tax

MAIN BENEFIT ASSISTANCE



5 years before baseline

Health

- Hospitalisations: 3.2 / 0.9
- Mental health inpatient bed nights: 26.8 / 1.3

Justice

- Police offences: 3.7 / 0.3
- Criminal charges: 3.5 / 0.3

Social development and tax

- Months, wages & salaries: 9.2 / 29.9
- Months, welfare receipt: 41.9 / 6.1

Data domain	Data source	Rate of change between years before and 5 years after
	Hospitalisations	-44.4%**
	Injuries	-11.08%
	Pharmaceuticals- Dispensed	2.9%**
	Mental Health—Community-based activities	-24.05**
	Mental Health—Inpatient unit bed-nights	- 63.28%

Justice		
	Police offences	-36.12%**
	Criminal charges	-43.13%**
	Victimisations	15.73%
Income and Social Development	Months in which tax paid on wages and salaries	46.45%**
	Income received from wages and salaries (cumulative over the whole period)	138%**
	Months in which a benefit was received	-1.57%
	Income received from benefits	17.48%**
	(cumulative over the whole period)	

Conclusions

- Homelessness is the result of systems failure
- Visible to government and asking for help
- High rates of asking for help for 15 years
- Too many gaps in mainstream services

- Housing First works
- Housing enable better functioning of everything
- Mental Health led recovery

Impacts

- Ka mua, ka muri -walking backwards into the future
- Used as exemplar in well-being budget
- Significant impact on Government Policy
- Upskilling of Government
- Homelessness Actions Plan (Author and majority of NZ evidence)
- Waitangi Tribunal (leading the housing claim)
- UN special rapporteur
- European Homeless Comparisons

Disclaimer

The results presented here are not official statistics. They have been created for research purposes from the Integrated Data Infrastructure (IDI), managed by Statistics New Zealand. The opinions, findings, recommendations, and conclusions expressed in herein are those of the author(s), not Statistics NZ, or any other government agency. Access to the anonymised data used in this study was provided by Statistics NZ under the security and confidentiality provisions of the Statistics Act 1975. Only people authorised by the Statistics Act 1975 are allowed to see data about a particular person, household, business, or organisation, and these results have been confidentialised to protect these groups from identification and to keep their data safe. Careful consideration has been given to the privacy, security, and confidentiality issues associated with using administrative and survey data in the IDI. Further detail can be found in the Privacy impact assessment for the Integrated Data Infrastructure available from www.stats.govt.nz. The results are based in part on tax data supplied by Inland Revenue to Statistics NZ under the Tax Administration Act 1994. This tax data must be used only for statistical purposes, and no individual information may be published or disclosed in any other form, or provided to Inland Revenue for administrative or regulatory purposes. Any person who has had access to the unit record data has certified that they have been shown, have read, and have understood section 81 of the Tax Administration Act 1994, which relates to secrecy. Any discussion of data limitations or weaknesses is in the context of using the IDI for statistical purposes, and is not related to the data's ability to support Inland Revenue's core operational requirements.

Ngā mihi mō tā koutou whakarongo. He pātai?

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Aspinall C, Ombler J, Pierse N, Howden-Chapman P 2017, One Housing First to Rule Them All? *Parity*, vol. 30, no. 8, October 2017, pp. 30–31.