

PROVIDING HOUSING AND SUPPORT TO PEOPLE WHO ARE HOMELESS - MENTAL HEALTH IMPLICATIONS

WHAT DID THE RESEARCH INVOLVE?

This study examined the effectiveness and cost-effectiveness of five Western Australian NPAH programs aimed at supporting formerly homeless people access and maintain social tenancies. Health and hospital data of individuals accessing public housing between 2009-2013 was linked to Department of Housing data (all data de-identified) and health-service utilisation 1 year prior to public housing tenancy entry with 1 year after public housing tenancy entry was compared.

WHOLE STUDY POPULATION



3,383 PREVIOUSLY HOMELESS PUBLIC HOUSING TENANTS IN WA



35.6% MALE
64.4% FEMALE

29% housed via an NPAH* program, 71% housed via priority homelessness pathway

41 average age

29.4 months average length of tenancy

30% Aboriginal and Torres Strait Islander

MENTAL HEALTH PROFILE

17% had been admitted to hospital with a mental health diagnosis within a two year period

6% diagnosed with schizophrenia or schizotypal disorder in study period Compared to less than 1% in general Australian population (1)

45% had high or very high levels of psychological distress according to K10 (subset of 277 tenant survey respondents) Compared to 10% in general Australian population (2)

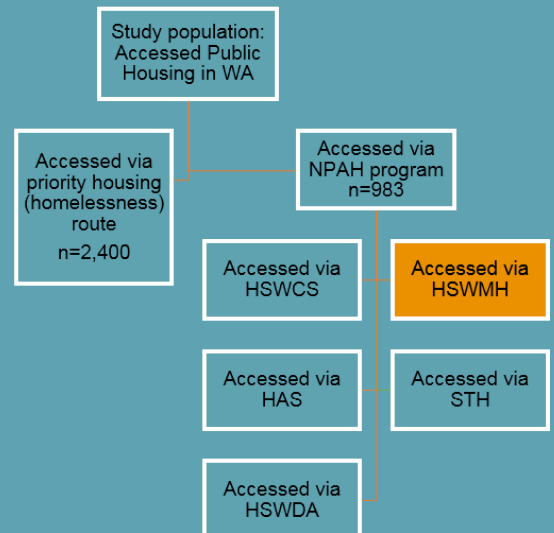
NPAH PARTICIPANTS

983 individuals supported by an NPAH program

The National Partnership Agreement on Homelessness (NPAH) is a joint Australian Commonwealth/ state and territory initiative which includes a number of programs that support people to access and sustain public housing.

This study assessed the impact of the following five NPAH programs: Housing Support Worker Corrective Services (HSWCS), Housing Support Worker Mental Health (HSWMH), Homelessness Accommodation Support (HAS), Street to Home (STH) & Housing Support Worker Drug and Alcohol (HSWDA).

STUDY POPULATION



“ I was panicked and constantly living in fear living in private rental. It was playing havoc with my anxiety with the three monthly inspections and also my bipolar. I was also panicked about the rental going up and was finding the situation very difficult with living on a disability pension. ”

- Tenant Survey respondent

Findings in this summary are generated from: Wood, L., Flatau, P., Zaretsky, K., Foster, S., Vallesi, S. and Miscenko, D. (2016) What are the health and social and economic benefits of providing housing and support to formerly homeless people? AHURI Final Report No. 265. <http://www.ahuri.edu.au/research/final-reports/265>

IMPLICATIONS FOR THOSE SUPPORTED BY AN NPAH PROGRAM FOR MENTAL HEALTH

HOUSING SUPPORT WORKER MENTAL HEALTH; A SUBSAMPLE

Housing Support Worker Mental Health (HSWMH) is an NPAH program which provides dedicated support for people with severe and persistent mental illness who are either homeless or at risk of homelessness when they are discharged from a Mental Health Inpatient Unit.

HSWMH SUB-POPULATION

124 PREVIOUSLY HOMELESS PUBLIC HOUSING TENANTS RECEIVING SUPPORT FROM HSWMH



43.5% MALE
56.5% FEMALE

MENTAL HEALTH PROFILE

75% had been admitted to hospital with a mental health diagnosis within a two year period

43% diagnosed with schizophrenia or schizotypal disorder in study period Compared to less than 1% in general Australian population (1)

“When I received my home it was fantastic and great it gives you self esteem and confidence. It helped with stabilising my mental issues and ongoing health issues.”

- Tenant Survey respondent

MENTAL HEALTH IMPLICATIONS

Mental health should be a high priority rationale for:

- Helping people experiencing homelessness access and sustain public housing
- Connecting people to mental health (prior & after tenancy commences)
- Long term support as mental health issues often become both more apparent and more treatable once stable housing has been obtained



39%

decrease in the proportion of people accessing an emergency department



44%

decrease in the proportion of people staying overnight in the hospital, and, for those who did stay, there was a reduction in length of stay by an average of **21.1** days



61%

decrease in the proportion of people admitted for psychiatric care, and for those who did stay there was a reduction in length of stay by an average of **15.3** days



Reduced health service utilisation amongst HSWMH clients resulted in health system cost savings of \$10,432,748 in one year. Equivalent to **\$84k** per person/per year.

FINDINGS FOR INDIVIDUALS SUPPORTED BY HSWMH

in the year after entry into public housing (n=124)



CENTRE
for SOCIAL
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Australian Housing
and Urban Research Institute

REFERENCES

- (1) Morgan, V.A., Waterreus, A., Jablensky, A., et al. (2011). People living with psychotic illness 2010 Report on the second national survey. Canberra, Australia.
(2) ABS, (2013a) Profiles of Health, Australia, 2011–2013 Psychological Distress, cat. no. 4338.0, Australian Bureau of Statistics, <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/4338.0main+features42011-13>.