

Supporting the housing of people with complex needs

PEOPLE WITH COMPLEX NEEDS ENCOUNTER ADDITIONAL BARRIERS IN ACCESSING AND MAINTAINING STABLE HOUSING. GOOD LOCAL PARTNERSHIPS AND COLLABORATION BETWEEN HOUSING AND SUPPORT PROVIDERS CREATE MUCH BETTER OUTCOMES FOR PEOPLE WITH COMPLEX NEEDS, REGARDLESS OF THEIR TYPE OF DISABILITY.

KEY POINTS

- While all states and territories recognise a similar set of issues regarding housing and support for people with complex needs, there is currently no unified, national approach.
- Open market housing options, such as private rental and purchased housing, are less accessible and affordable for people with complex needs, and so there is increasing pressure on the public and community housing sectors to meet their housing needs.
- Provision of housing and support to people with intellectual disability in Western Australia is facilitated by strong cooperation between Homeswest and the Disability Services Commission, local area arrangements and individualised support arrangements, but resources are limited.
- The growth of the community housing sector in Victoria has assisted people with mental illness to obtain stable housing, but rationalisation of scarce housing resources poses further challenges to these arrangements.
- Housing that is accessible, affordable and located close to supports is in short supply for people with physical disability in New South Wales, and there are few specific initiatives focused on widening the range of housing options for this group.

*This bulletin is based on research by **Michael Bleasdale** of the AHURI UNSW/UWS Research Centre. The research focused on the provision of housing and support to people with complex needs, specifically people with physical disability, people with intellectual disability, and people with mental illness. It explored the ways in which States and Territories in Australia are addressing the twin issues of providing suitable and affordable housing, and ensuring that the supports required to maintain a person with complex needs in their accommodation are in place.*

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CONTEXT

People with complex needs encounter additional barriers in accessing suitable housing and maintaining a stable housing environment. Current provision of accommodation to people with a disability or mental illness tends to be focused on service provision, with the development of housing and accommodation “models” built around specialist service supports. This approach can limit the way that stakeholders think of housing for people with disability and mental illness, and in the past has limited the range of housing options to those associated with “cared accommodation”, such as group homes and small residences.

The current approach runs contrary to the rights-based principles of the ‘social model’ of disability, which points to the community’s need to make available housing and other opportunities to reverse the policies of exclusion that have prevailed for so long. This research looked at the extent to which the Australian policy context enables people in the three target groups to access and maintain ‘regular’ housing, as opposed to special, supported or cared housing, and what makes these arrangements succeed.

METHODOLOGY

Telephone interviews were conducted with housing and disability/mental health service officials in the majority of states and territories of Australia during 2005, to understand what initiatives were in place to provide housing and support to people in the three groups. In-depth interviews were conducted during 2005 and 2006 with officials, service providers and other stakeholders in Western Australia, Victoria and New South Wales, looking at issues relating to the housing and support of people with intellectual disability, people with mental illness and people with physical disability respectively.

Other key stakeholders were interviewed to gain perspectives beyond those of providers and administrators who were addressing the issue directly. Telephone interviews were undertaken with respondents from the United Kingdom (UK), to ascertain how the Supporting People Program in that country was assisting people in the three target groups to access housing and support. A total of 65 interviews in total were conducted.

A literature review of current documentation relevant to housing and support was undertaken, and transcripts of the interviews were analysed in conjunction with the information in key policy documents.

The research focused on policy responses to the issue of housing and support provision among the three target groups, and did not include interviews with clients of either housing or support services. However, peak bodies that represent consumer views were interviewed, and overall a strong consumer perspective was promoted through the adoption of the social model of disability as a key theoretical reference point.

KEY FINDINGS

The states and territories of Australia have varying methods of addressing the housing and support needs of people with disability and mental illness, due largely to the historical autonomy of each jurisdiction.

The following findings are based on the fieldwork and interviews undertaken in three states (Western Australia, Victoria and New South Wales) with a focus on different types of disability in each jurisdiction. It also includes a case study from the UK that uses a social exclusion approach to the delivery of housing and support assistance.

The research found that the success of many initiatives is due to their ability to respond to both local and individual needs. However, this also limits their replication in other circumstances where the same conditions do not apply. The principle of local area negotiation and collective decision-making can be emphasised and worked towards at a national level.

WA case study: people with intellectual disability

In Western Australia the system of Local Area Coordination (LAC), together with individual funding of support for people with intellectual disability, has assisted those who receive support to access a wide range of housing options within their price range.

The availability of housing has been assisted by a longstanding cooperative relationship between Homeswest and the Disability Services Commission (DSC). Interviews with service providers revealed a strong philosophical basis to the approach adopted as outlined in the Community Living Principles. These principles were aimed at supporting individuals with disability into housing and other options that are valued in the community, and were also evident within the practices of the DSC and Homeswest. Regional areas in Western Australia were well served by the LAC system, and there was evidence of strong local cooperation driving successful individual housing and support arrangements.

Current limitations to housing options are due to the restriction of resources in the service system, such that many people with intellectual disability do not receive funding to purchase the supports they need. Those who are not in crisis, or whose needs are not as high, are unlikely to succeed in obtaining formal support packages.

VIC case study: people with mental illness

In Victoria the Housing and Support Program (HASP) has existed for over ten years, with the result that non-government Psychiatric Disability Rehabilitation and Support Services (PDRSS), which provide support for people with mental illness, are the entry point for support and housing options for this group.

The growth in the community housing sector, and the strong and responsive relationship between community housing providers and non-government agencies, is currently assisting in the allocation of scarce housing. There is evidence of good local collaboration in areas where support and housing are provided to people with mental illness. The capacity of support providers to nominate clients for housing assists in the timely provision of accommodation, and provides a level of housing stability that has contributed greatly to the overall well-being of clients.

Social housing shortages in Victoria, resulting from a reduction in funds for capital acquisition through the Commonwealth State Housing Agreement (CSHA), have led to a rationalisation of tenancies. People with mental illness who had previously been able to live alone in a two-bedroom house may now be required to share with another person, unless the housing provider can subsidise the vacant room. There is concern that this will lead to less stable tenancies and a greater reliance upon service provision.

NSW case study: people with physical disability

At the time of this research, in New South Wales the Home and Community Care (HACC) Program (high-needs pool) and the Attendant Care program were the primary means of assisting people with physical disability into suitably accessible housing. Since then, additional programme spending on family support and supported accommodation to enable children and adults with disabilities to live in the community were announced under the Stronger Together: A New Direction for Disability Services in NSW 2006-2016 plan.

In addition to HACC, some non-government organisations (such as the Royal Rehabilitation Centre) were attempting to develop purpose-built housing that would separate landlord and support functions, with the housing managed by housing organisations and support being provided by an appropriate service provider. This support was to be available either on site or within a 15 minute drive, so that people with physical disability could increase their independence and self-determination by having options other than group living.

Another response was the Motor Accident Authority's Community Participation Project (CPP), which case manages people with spinal cord injuries leaving hospital, using existing resources to coordinate the simultaneous delivery of support and housing. However, lack of accessible and affordable housing in areas close to supports posed a significant barrier to obtaining regular housing. The issue of regulating future housing development and ensuring adequate supply for the future was identified as a major challenge for people with physical disability.

UK case study: addressing social exclusion

The Supporting People Program (SPP) in the UK is one of a range of initiatives addressing problems of social exclusion for people with complex needs. The SPP provides funds to enable people with housing needs, including those in the three target groups considered by this research, to access the support they need in order to continue living in their own homes. The case study indicated that the initiative had achieved some success in achieving this aim; however, the two-year time limit on funding had had a negative impact for some clients who had to move out of their accommodation after this period. Some respondents also felt that the initiative ran counter to other positive, disability-specific initiatives that were being implemented simultaneously in the UK.

Importantly, the SPP was delivered through a social model that recognises the importance of addressing systemic disadvantage faced by people with disability or mental illness as a key part of addressing barriers to housing and other services. The adoption of social model principles in the UK was seen by the research as indicating a strong sense of support for people with disability, and providing a catalyst for new approaches that aim to deliver housing and support to people with complex needs.

POLICY IMPLICATIONS

Although support providers, and to some extent housing providers, acknowledge current paradigms that work towards the rights of people with disability, there has been no overt adoption of the social model approach, to the extent seen in the UK. Adoption of such a model in Australia could assist in removing the barriers to people with disability and mental illness accessing and maintaining appropriate independent housing options.

Strong leadership is required, to implement the regulations necessary to ensure that adequate supplies of suitably accessible accommodation are built and made available for purchase and for private rental, as well as through the social housing systems, for people with disability and mental illness.

There is a need for meaningful data on the extent to which people with disability and people with mental illness can access and maintain appropriate housing. This would provide one of many quality-of-life indicators that could represent the extent to which individuals and groups can be said to be participating as members of the community.

While the states and territories will continue to implement policies responsive to the needs of people with disability and people with mental illness in their jurisdictions, there is a role for the Australian Government to play in articulating a vision of participation and inclusion within the community for these target groups.

Greater integration of strategic and forward planning across portfolios – for example, between CSHA outcomes and those of both the Commonwealth State Territory Disability Agreement (CSTDA) and the National Mental Health Strategy – would lead to a more cohesive approach to the provision of suitable housing and support.

Rather than looking for new 'models' of support and housing, the following existing responses could be enhanced as part of a more integrated national approach:

- the development of strong local area initiatives. These must be based on cooperation and knowledge of the individuals who require specific solutions, and on collective action in providing both housing and creative support arrangements;
- the delivery of flexible support arrangements, which in turn have the capacity to drive individual housing options in the private rental and purchased housing areas;
- support for the evolution of existing programs and initiatives, such as HASP in Victoria and LAC in Western Australia, into national programs that provide more locally responsive arrangements among housing and support providers. These in turn can contribute to the achievement of broadly agreed benchmarks in the provision of housing and support to people with complex needs.

FURTHER INFORMATION

This bulletin is based on AHURI project 70311, *Supporting the housing of people with complex needs*.

Reports from this project can be found on the AHURI website: www.ahuri.edu.au

The following documents are available:

- Positioning Paper
- Final Report

Or contact the AHURI National Office on +61 3 9660 2300.



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