

SUSTAINED HEALTH AND WELLBEING IMPACTS OF THE HEALTHY HOUSING PROGRAMME

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Presentation Aim

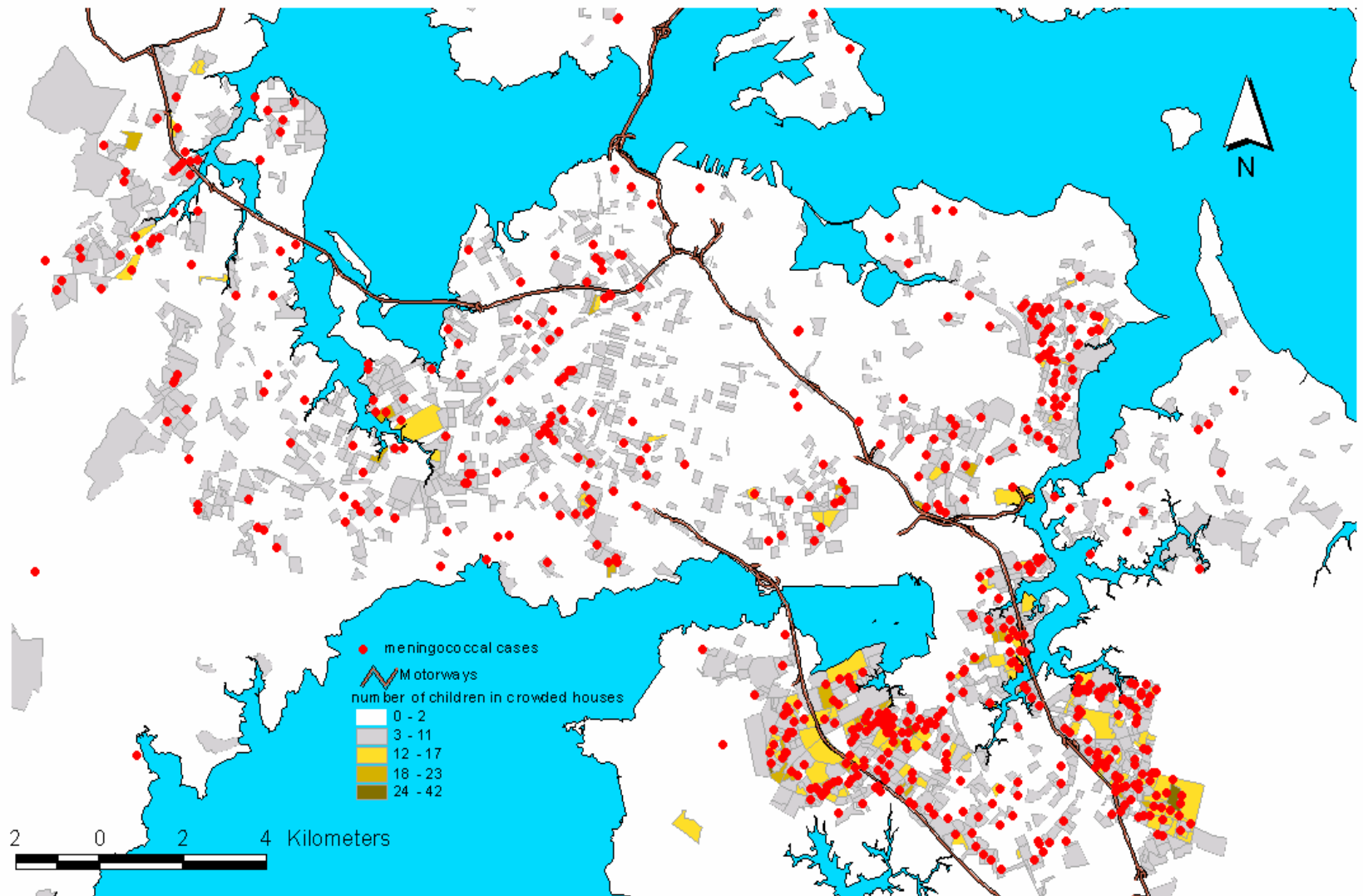
- To provide Healthy Housing Programme background
 - Programme goals
 - Why the Programme came about
- To present an overview of the Programme
- To present the findings of the evaluation focussing on sustainable health and wellbeing for the households.

Florence Nightingale 1820-1910

“The connection between health and the dwellings of the population is one of the most important that exists”



Meningococcal disease cases



Map Created By Auckland Public Health Service - August 2000

Why Healthy Housing came about

- “Household crowding is the most important risk factor for meningococcal disease in Auckland children during the current epidemic”
- Other crowding related preventable diseases
 - Immunisation preventable
 - Tuberculosis
 - Rheumatic Fever
 - Skin infections (Cellulitis)
 - Asthma
 - Respiratory (acute Bronchiolitis, Pneumonia)

Healthy Housing Programme Goals

- To increase awareness of infectious diseases
- To improve access to health and social services
- To reduce the risk of housing-related health problems
- To reduce overcrowding

The Joint Assessment of the homes

- HNZC Area Co-ordinators
 - Property condition report
 - Presence of mould
 - Adequacy of fences
 - Disability requirements
 - Number of occupants (adults, children)
 - Number of bedrooms
- Public Health Nurses
 - Usage and access of medical services
 - Immunisation records
 - Pre school and school attendance
 - Diagnosed illness
 - Access to social services
 - Identification health and disability needs

Healthy Housing Interventions

- Healthy environments
 - insulation, ventilation, heating
- Design improvements
 - mobility, poor configuration
- Maintenance
 - health and safety issues
- Transfers, new houses, extensions
 - overcrowding
- Referrals to health and social services

Common Health and Social Services Referrals

- **Health**

- General Practice (primary care)
- Immunisation
- Well-child health providers
- Asthma (treatment, education services)
- Diabetes (treatment, management and education services)
- Breast and cervical screening
- Dental services (targeting children)
- Smoking cessation

- **Social Service:**

- Work and Income (benefit entitlements)
- Budgeting/food parcels

Hospitalisation study

- 1276 households in Mangere, Manurewa, Otara
- 6966 people (5357 people with NHI matches)
 - 49% 0 – 14 years
 - 39% 15 - 44 years
 - 12% 45 years and over
- Found **37% fall** in acute housing related hospitalisations in the first year following intervention in the HHP households compared with non-HHP households
- In 2003-04 this was equivalent to 110 acute admissions prevented by HHP
- All HHP modifications resulted in significantly ($p < 0.001$) fewer housing related potentially avoidable hospitalisations.

Reduction in hospitalisation demonstrated

	Case rate	Control rate	Rate reduction	% change
All acute	101	107	6	6%
Potentially Avoidable Hospitalisations (PAH)	42	51	8	17%
Housing Related PAH (HrPAH)	22	36	13	37%

Hospitalisation rates per 1000 people per year, 2003-2004

Housing Related –Potentially Avoidable Hospitalisation x intervention

	Case	Control	Rate ratio (95% CI)	p chi-squared
Environment modifications	26	37	0.68 (0.53 – 0.89)	0.003
Housing crowding modifications	19	32	0.61 (0.43 – 0.86)	0.002
All modifications	22	36	0.63 (0.49 – 0.80)	<0.001

Success Case Methodology

- What works ?

'Great successes, like diamonds, are not diminished by their rarity' 'One can best learn from those who succeed with a new approach, not from those who fail'

Robert Brinkerhoff (2003)

- SCM Fundamentals

- What is really happening?
- What results are being achieved?
- What is the value of the results?
- How can it be improved?

Household examples of success

- Increased connection with the community
- Easier day-to-day functioning
- Engagement in educational activities
- Family connectedness
- House proud
- Improved health
- Increased comfort in home
- Increased financial control
- Improved mobility/ function for residents with disability
- Improved safety - reduced injury
- Improved sibling relationships

Household A: Overcrowding

- The issues
 - Overcrowded Pacific family
 - Not conducive to home life for young ones
- Housing solutions
 - Extension
 - Dining area large enough to accommodate all
 - *‘She really wanted her connection with the family and it’s been a real winner’. The kids aren’t out on the street. I can drive by the house now and see in pride of place, the huge dining table, through the open doors of the new deck.’*

Household B: Overcrowding

- The issues:
 - Overcrowding -15 occupants
 - Expectant mum needing ongoing family support
 - House unable to be extended
- Housing and health solutions
 - *“Whilst it would make sense to transfer that small new family unit out, it was realised that she needed the close support of the extended family. Solution came by using two homes on a corner section across the road and extended both homes into a single unit with the result of addressing both the overcrowding and keeping all the family together.”*

Household C: Disability

- The issues:
 - Health and mobility problems
 - Unable to attend to hygiene
- Housing and health solutions
 - Design modification – open up living area, add deck
 - Modify bathroom – level access shower
- Outcome
 - Reintegration into community

Household D: Health

- The issues:
 - Cold and wet dwelling
 - Small twins frequently admitted to hospital
 - Dad had to give up work to help with child care
- Housing and health solutions
 - Transfer to new home
- Outcome
 - Twins quickly become active happy toddlers
 - No further hospitalisations
 - Father returns to workforce

Household E: Educational achievement

- **The issues**

- Overcrowded home
- Children in trouble

- **Housing and health solutions**

- *“A family where home in a mess, kids unruly, truanting and on the streets. They were transferred out of area into larger home with a purpose built sleep-out for big kids. Twelve months later the home is immaculate kids are out of trouble and no longer truanting.”*
- *“Couple with six children, the kids didn't want to go home when there was no space, so they would go out and mix with the 'wrong sort of kids'. The home was extended by two bedrooms and a living room. Now the kids are at home, doing their study and now the mother is studying as well. Now they have space at home.”*

Household F: Improved relationships

- The issues
 - Overcrowded home
 - Family stress
 - Children unwell
 - Neighbourhood discord
 - Safety concerns outside
- Housing and health solutions
 - Home extended – bedrooms, larger living area, extra bathroom
 - The relationship between members of the family had improved immensely and everyone was happy
 - Family members have more space to do own thing

Summary

- Addressing overcrowding, ventilation, insulation and health and social issues has positive and sustained impact
- Evidence from a range of perspectives that HHP has been effective at improving health & wellbeing
- Collaboration can work to achieve synergy
- Ongoing work in Auckland and new areas
- Principles taken up by District Health Boards.
- Positive spin-offs – housing policies, knowledge of householder needs

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