



19 February 2016

Submission to the *Healthy Tasmania Five Year Strategic Plan Community Consultation Draft* .

Shelter Tasmania welcomes the opportunity to respond to the *Healthy Tasmania Five Year Strategic Plan Community Consultation Draft*.

Shelter Tas is the peak body for affordable housing providers, homelessness services, low-income housing consumers, and people experiencing and at risk of homelessness across Tasmania. Our feedback on this *Consultation Draft* reflects the concerns and experiences of our member organisations.

Homelessness, housing affordability and housing quality are critical considerations for achieving the goal of making Tasmania the healthiest population in Australia by 2025. The *Consultation Draft* notes the importance of housing for preventive health (p 19). Shelter Tas calls for housing to be included with health in all policies.

Safe, secure, affordable, appropriate housing is a foundation for the health and well-being of all Tasmanians. However, many Tasmanians lack this foundation. Those who are homeless, couch surfing, living precariously or in sub-standard dwellings are deprived of opportunities to achieve or maintain good health. Due to the lack of affordable housing, people on low incomes can be pushed into housing that is of low quality and located far from services and public transport. Many Tasmanians pay over half their income on housing costs, so that they are left in 'after housing poverty', with inadequate funds for food, medicine, heating and other essentials. There is a clear evidential link between homelessness or inadequate housing and poor health outcomes.

Young people are particularly vulnerable to homelessness. 15% of people experiencing homelessness in Australia are under 12, and 25% are between 12 and 24 years old.¹ Older Tasmanians also have particular concerns relating to aging in place and the suitability of dwellings and locations. Shelter Tas supports the recommendations from COTA Tasmania that specifically relate to improving the health and well-being of older Tasmanians.

Our response focusses on the areas of preventive care including improvement of nutrition, enhancing mental health and well-being, and increasing physical activity. We present a brief overview of the interface between housing and health then respond specifically to 5 of the Consultation questions.

¹ <http://www.homelessnessaustralia.org.au/images/publications/Infographics/TAS - updated Jan 2014.pdf>

Overview

National and international research confirms the multiple interactions between health and housing.² Homelessness and the lack of housing have the worst health outcomes. When a person or family is housed, key areas that impact on health are the environment at home, the amenities available within the home and through its location and connections, and affordability and security of tenure.

Tasmanian households are among the poorest in Australia, and housing is the major cost for most households. In Tasmania, median incomes are approximately \$100 per week less than the national average and 30.7% of households survive on less than \$600 per week. In 2011, approximately one in four Tasmanians relied on income support payments. This means that affordable housing and avoiding housing stress are vital to securing the health and well-being of all members of the Tasmanian community.

Homelessness. Becoming homeless is a critical risk factor for mental and physical health. The Census counted 1579 people as homeless in Tasmania in 2011. Over time, the number of Tasmanians whose health is directly affected by homelessness is much higher than the one night Census count. National statistics indicate that one in 8 Australians experience homelessness in their lifetime, a higher rate than asthma, diabetes or arthritis.³ Homelessness leaves people vulnerable to poor nutrition, poor dental health, and mental health problems such as depression.⁴

The physical environment at home matters. For Tasmanians, a healthy environment at home will be free from damp and mould, will contain appropriate and affordable heating and cooling options including effective insulation, and will minimise avoidable accidents by addressing such things as tripping hazards. For older Tasmanians in particular, minimising avoidable falls and accidents will enhance independent living and reduce the need for medical treatment. Ensuring that all Tasmanians have safe and healthy home environments will assist in reducing the preventable disease burden and will support anticipatory care and primary prevention (*Consultation Draft* p 9, 21). As there is evidence of significant health disparities based on socio-economic status (*Consultation Draft* p 11), people on low incomes living in rental accommodation are an important group to target to ensure the conditions of their dwellings can support health and well-being. Ensuring that the minimum standards in the *Residential Tenancy Amendment Act 2013* are achieved and improved over time will support the Healthy Tasmania Strategy.

Improving nutrition. The *Consultation Draft* refers to a high (93%) and increasing (up from 89.3%) proportion of people with inadequate fruit and vegetable intake in Tasmania (p9). To improve these

² For example, AHURI *The health impacts of housing: towards a policy-relevant research agenda, 2011*; Baker, E., Mason, K. Bentley, R., and Mallett, S. 'Exploring the Bi-directional Relationship between Health and Housing in Australia' *Urban Policy and Research*, 32:1 2013 pp 71-84; UK Houses of Parliament Parliamentary Office of Science and Technology, 'Housing and Health Postnote' No 371 2011.

³ <http://www.homelessnessaustralia.org.au/index.php/publications/latest-news/42-news/133-2-35-million-australians-have-been-homeless-in-their-lifetime> <https://www.rmit.edu.au/news/all-news/media-releases/2015/september/rmit-finds-14-million-australians-have-slept/>

⁴ http://www.homelessnessaustralia.org.au/images/publications/Fact_Sheets/Homelessness%20in%20Australiav2.pdf _accessed 15 Feb 2016.

figures, people require access to a kitchen that is suitable for preparation and storage of fresh food. Many Tasmanians, including those experiencing or at risk of homelessness, those in temporary dwellings and couch surfing will not be able to store and cook fresh food. Tasmania's rate of couch surfing (30% of the homeless population) is almost twice the rate of the national average (17%).⁵ The location of homes can also facilitate access to fresh food, transport and exercise opportunities (*Consultation Draft* p9) or can make it hard or impossible to access these. Access to activities and exercise in safe and secure areas through walking or public transport is a vital part of the housing/health environment (see *Consultation Draft* p 9, 21). Reducing homelessness, minimum standards for rental accommodation, and planning for all new residential developments have a part to play in fostering the conditions that support people to make healthy choices for nutrition and activity.

Affordable, appropriate, safe and secure housing can improve mental health and social well-being.

Access to affordable housing and avoiding housing stress has direct and indirect effects on mental well-being and mental health. Good healthy habits such as nutritious food and exercise will be almost impossible to maintain for a person experiencing housing stress, precarious housing or homelessness. According to 2011 Census data, 14,618 Tasmanian households were in housing stress, which itself is a risk to mental well-being. Housing stress describes a household in the lowest 40% by income that spends more than 30% of its income on rent or mortgage payments. The 2016 *Report on Government Services* shows that approximately 30% of Tasmanians receiving Commonwealth Rent Assistance were in housing stress.⁶ A lack of affordable, appropriate, safe and secure housing can cause a significant decline in physical and mental health.

Loneliness and social inclusion are also affected by housing location. Family and community connections can be disrupted if a person is forced to move for financial or other reasons. Appropriate location, and access to supportive communities and to transport, allow people to maintain and protect their mental health and social well-being.

Addressing selected consultation questions

Where do you see that the most effective changes could be made in terms of overall population health benefit?

Any effective preventive health strategy must include housing as one of the critical social determinants of health. Along with the cost of housing, the location and amenity of a person or family's home can improve mental health and social well-being, enable better nutrition and improve opportunities for physical activity.

⁵ <http://www.homelessnessaustralia.org.au/images/publications/Infographics/TAS - updated Jan 2014.pdf>

⁶ SCRGSP (Steering Committee for the Review of Government Service Provision) 2016, *Report on Government Services 2016*, vol. G, *Housing and homelessness*, Productivity Commission, Canberra, section G-6.

Are there any alternative governance principles, strategies or enablers that would better support the shift to a more cost-effective model for preventive health in Tasmania?

Shelter Tas recommends as an enabler that the community housing and homelessness sectors be included as “responsible partnerships” to promote health (*Consultation draft* p12). Participation by members of vulnerable groups – including those living in poverty, housing stress, and those experiencing or at risk of homelessness – is essential. Expertise in the affordable housing sector and homelessness sector and consumer participation in the processes of devising policies and actions to improve the health in their communities needs to be embedded in the governance framework for the Five Year Strategic Plan. This will be consistent with the ‘focus on people and communities’ and will ‘strengthen prevention by building the evidence-base and understanding of what works’ (p12).

Do you see value in pursuing a health-in-all policies approach in Tasmania? What are the costs, benefits, opportunities and risks?

Like health, adequate housing and shelter is a human right. Shelter Tas sees value in pursuing a ‘health in all policies’ approach in Tasmania and recommends extending it to a ‘health and housing in all policies’ approach. The opportunity is to take a holistic approach to the social determinants of health that, for example, includes the resources to cook and eat well and improve fruit and vegetable intake (*Consultation draft* p 9). The risk of leaving housing out of the picture is that the desired outcomes, such as improved nutrition cannot be achieved. Critical enablers such as having the resources to cook and store fresh food must not be neglected in the approach. People with poor kitchen facilities are 3 times more likely to become food insecure compared to those who have adequate kitchens⁷. Overlooking issues like the impact of housing stress and homelessness on mental health will undermine the preventive focus of the Five Year Strategic Plan.

What other models for Health Impact Assessments could the Tasmanian Government consider?

Shelter Tas recommends the development of a Health Impact Assessment Tool that could be applied to housing policy, such as the Affordable Housing Strategy 2015-2025, legislation such as the *Residential Tenancy Act* and the Statewide Planning System. This would ensure developments in these areas are consistent with the *Healthy Tasmania Five Year Strategic Plan*. (*Consultation Draft* p 14, p19).

Appropriate, affordable, safe and secure housing and an end to homelessness are vital to achieving a healthy Tasmania.

Shelter Tas is happy to discuss any of the recommendations in this submission. If you have any queries, please contact:

Pattie Chugg, Executive Officer

Ph: 03 6224 5488

E: eo@shelertas.org.au

⁷ http://www.hc-sc.gc.ca/fn-an/alt_formats/pdf/nutrition/child-enfant/cfps-acc-synthes-eng.pdf page 16.

Accessed 15 Feb 2016.