

Healthy Housing Initiative Wins Supreme Award

A programme aimed at reducing the risk of diseases associated with overcrowding has taken out the supreme award at the 2005 New Zealand Health Innovation Awards, held in Wellington last night.

The Healthy Housing programme is a joint project between Housing New Zealand Corporation, and Counties Manukau, Auckland, and Northland District Health Boards. It targets localities with high health needs and with high concentrations of Housing New Zealand properties. It aims to assist families with high rates of hospital admissions for preventable infectious diseases.

"We are really proud to have won this award, and to be part of a joint programme that makes such a big difference to people's lives," says Alan Bernacchi, Housing New Zealand Healthy Housing programme manager.

"It's a great way to celebrate the success of the programme over the last four years, which has reduced overcrowding and the risk of diseases associated with it - such as meningococcal disease, cellulitis and rheumatic fever. It proves that improving people's health is not the sole responsibility of the health sector - and that Housing New Zealand can play a role."

"The DHB's role in Healthy Housing is to conduct health assessments of the families, and link them to the health and social services they need, while their housing needs are being addressed. The families we have supported now have better health, are better connected with primary and community services, and are less dependent on hospital services. It's a win for everybody," says Chris Mules, Counties Manukau DHB chief planning and funding officer.

Counties Manukau Healthy Housing Statistics ONLY

Since the programme began in 2001, and up to May 2005, 2200 housing and health assessments have been completed. Housing New Zealand has assisted 2000 families, in ways which included:

- Extending 244 houses
- Buying or building 30 new houses
- Helping approximately 68 families into more suitable housing in the private sector
- Transferring 225 families to housing that better suit their needs
- Modifications have been made to 37 houses
- Insulating about 750 houses
- Installing ventilation in 1271 homes
- Installing heating in 107 homes

Initially an 18 month pilot that began in Manukau City, it is now a fully operational programme extended to central Auckland and to Whangarei.

Background Information:

The programme focuses on reducing the risk of diseases associated with overcrowding such as respiratory diseases, cellulitis, meningococcal disease, rheumatic fever and tuberculosis, and generally improving housing conditions in HNZC properties in specific areas within New Zealand.

It does this by:

- reducing overcrowding
- improving access to healthcare services
- raising community awareness about health/housing issues

The Healthy Housing programme started in the Mangere, Otara, Glen Innes and Onehunga areas in Auckland in January 2001. In 2003/04 it was extended to include Point England (an extension of Glen Innes), Wiri in South Auckland, and Tikipunga in Whangarei. Since then in Northland it has extended to Otangarei in Whangarei, and Kaitaia.

HNZC staff work directly with health professionals to identify families that are living in conditions that may affect their health, and then an assessment is carried out to see what can be done. This can include a range of things - from educating families about health risks and putting them in touch with local health providers, to making the house dryer and warmer by installing insulation, or in some cases making the house physically bigger.

For those houses that are modified, this can include:

- Building additional bedrooms, larger living areas, bathrooms and decks
- Laying new durable flooring, wall and ceiling linings in all wet areas (kitchen, laundry, bathroom)
- Refurbishing the kitchen and existing bathrooms and installing an extractor fan to minimise moisture
- Providing ceiling and under-floor insulation
- Remodelling the interior to create a larger communal open plan living area offset by a new deck
- Increasing air circulation through passive security ventilators
- Venting the dryer to reduce internal humidity and moisture
- Providing extra storage space within the home.

Evaluation Results:

When compared against the geographically matched control group, using information from 12 months before and 12 months after the joint assessment, outpatient visits and use of the emergency department increased but admissions dropped by 33%.

The changes in secondary care utilisation suggest the Healthy Housing pilot increased early care seeking with a resulting decrease in hospital admissions.

Health interventions

The survey of GP records found a 9% increase in GP visits in the 12 months after the first joint assessments. There was a 55% increase in visits specifically for immunisation, and increases in visits for skin infections (41% for cellulitis and abscesses) and diabetes care (55%). These conditions had been specifically targeted during the joint assessments. The largest decrease in visits was for pharyngitis (down 22%) and middle ear infection (down 15%). The number of recorded visits for asthma did not change.