



Children's and Young People's Housing Experiences: Issues and Scoping Paper

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**Report prepared for:
Centre for Housing Research Aotearoa New Zealand**

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EXECUTIVE SUMMARY

This scoping report recommends a research programme to increase current knowledge about the connections between children's and young people's social and economic outcomes and their housing circumstances. The report is focused on children and young people aged between newborn and 24 years, who make up over one third of our population.

Information is presented about children's and young people's housing characteristics in New Zealand in relation to: housing affordability, crowding, dwelling condition and performance, tenure, tenure security and residential movement, temporary dwellings, and homelessness. The report then examines housing impacts and outcomes in relation to children and young people's health, education, safety and offending, and transitions to adulthood. While New Zealand research literature is focused on, references are made to relevant overseas research as there are some large gaps in the New Zealand evidence base.

Health outcomes

An international body of work, including New Zealand studies, considers the effects of housing on health outcomes in relation to children and young people's current and future health status. Although the causal links between housing and wellbeing outcomes are not always well understood there is general agreement that residential housing is an agent of health or illness. Housing impacts on health include:

- Excessive housing costs can reduce the amount able to be spent on other items contributing to health such as food and recreational activities.
- Household crowding is a risk factor for infectious diseases, especially those spread through respiratory means. The rates for many infectious diseases associated with crowding in New Zealand, such as meningococcal disease and acute rheumatic fever, are highest amongst children. There is association between household crowding and children's non-infectious illness and injury, and children's mental stress.
- The delayed development of infants and young children can be affected by dwelling condition, as are illnesses due to foetal and early childhood exposures to biologic, chemical and physical agents within the home. Children's unintentional injuries in the home can be linked to a dwelling's structural defects.
- Dwelling performance affects health through cold, damp and mouldy conditions. Damp and mould are associated with a range of illnesses including allergies, asthma, chronic obstructive pulmonary disease, inflammatory disease, gastroenteritis and other infections. There is increasing evidence that mould growth in damp houses is an important risk factor for asthma and respiratory illness.
- Indoor air quality can be affected by poor ventilation, inadequate cooking and heating systems and tobacco smoke. Emissions of pollutants indoors have been linked to respiratory disease, respiratory infections and increased susceptibility to asthma.
- High residential mobility can disconnect people from health services and is associated with disruption to children's immunisation and health checks.
- Homeless children have poor nutrition and show a high incidence of asthma and other respiratory problems, trauma-related injuries, tooth decay, delayed immunisations, ear and skin infections and conjunctivitis. They have been found to experience more anxiety, depression and behavioural problems than poor housed children. Homeless youth are more vulnerable to untreated health disorders, drug abuse, psychological stress, youth suicide and sexually transmitted diseases.

Education Outcomes

There is less New Zealand literature on the links between housing and educational outcomes than on housing and health, and findings appear to be less certain about causal associations. Key research findings include:

- Two large international studies in which New Zealand participates have found a strong link between achievement and home educational resources, irrespective of gender or ethnic background. The home educational resources variables include several that relate to dwelling space and crowding: a study desk/table for the student's use, a room of the student's own and a quiet place to study.
- Tenure security through home ownership has been associated in overseas studies with educational attainment, fewer child behaviour problems, and less likelihood of dropping out of school. Studies have also noted that home ownership equity is an important means by which families can finance higher education for their children. Tenure security in public housing has been associated with improvements in children's educational performance.
- Overseas literature suggests that frequent residential movement may be detrimental to children's school attendance, to their learning and to their educational achievement. New Zealand studies suggest that frequent changes of school can create learning difficulties. Only a few studies have analysed achievement data in relation to residential movement, and they have found differences between frequent movers and other students to be small and influenced by other factors.
- Overseas studies show concentrations in poor neighbourhoods of lagging school performance and behavioural problems. However, two reviews of international research found that evidence is unclear for neighbourhood effects, little is known about these effects and they are difficult to quantify. Nevertheless, there appears to be increasing consensus that broader neighbourhood effects are important for children's outcomes. There is some evidence that neighbourhood deprivation has a negative impact on children's achievement, especially in early childhood, although one review noted that New Zealand data is inconclusive.

Children and young people at risk: safety and offending

Only a limited number of studies were found on the effects of housing on children and young people's vulnerability to victimisation or offending. Very little New Zealand research was identified. Key points are:

- There is some evidence of links between poor quality housing and children's involvement in property offences and aggressive behaviour; housing problems and child neglect; homelessness, and child maltreatment and exposure to violence; overcrowding and poor parenting practices, interpersonal conflicts, alcohol abuse, family violence and suicide.
- Some research suggests that neighbourhoods characterised by poor housing, physical decay and deterioration have higher than average levels of violence, higher rates of reported child abuse and neglect, and children's problem behaviour.
- For young people, poor housing and homelessness have been found to be major risk factors in offending, alcohol and drug misuse, and vulnerability to sexual abuse and exploitation. Stable housing has been identified as critical for helping young people avoid or reduce offending, and access mental health and addiction services.

Transitions to adult roles

In New Zealand, there is very little research about the dynamics, drivers and barriers influencing young people's formation of their own households, although it appears that for many, the transition is increasingly delayed. Overseas studies show that housing plays an essential role in young people's successful transitions to adult roles and is a key factor in overcoming social exclusion. Main findings include:

- Families can play a key role in facilitating young people into housing (rental or owned), through intergenerational wealth transfers.
- The availability of affordable rental stock is a key influence on successful transitions.
- Some countries recognise the importance of housing assistance for young people, as part of supporting them to become responsible citizens, enter the labour force and take up further education and training.

Critical Housing Issues and Knowledge Gaps

Agencies interviewed for this report expressed interest in the generation of a body of New Zealand research on children and young people's housing that is relevant to policy development and implementation and provides a strong evidence base on the housing determinants of positive outcomes for children and young people. Analysis and evaluation of overseas and (where they exist) New Zealand policies and programmes would be useful in order to identify effective responses to children's and young people's housing issues.

Overall, agencies expressed concern that children's and young people's perspectives on housing are missing from research and policy. Issues and knowledge gaps identified were:

- Children and young people facing homelessness and insecure tenure is seen as a key priority area. No New Zealand research specifically on homeless children and young people was identified.
- The critical role that access to affordable, safe and suitable housing plays in successful transitions was identified by most agencies. They highlighted housing support for at risk and vulnerable young people as a critical gap in services. There is also a concern that young people in general (not just those at risk) are finding it increasingly difficult to get affordable and suitable accommodation.
- Housing that promotes children and young people's health and wellbeing. Household crowding, poor dwelling condition and performance and insecure tenure, with resulting impacts on education, health and access to local services, are seen as key issues.
- Children and young people through their housing and neighbourhoods are exposed to unsafe situations and negative peer group influences, and face increased vulnerability to both victimisation and being caught up in offending.

Addressing the Knowledge Gaps

Based on the literature review and discussions with agencies, two research streams are proposed, in which a range of discrete projects providing a comprehensive coverage might be developed. They are:

- ***Young people: positive housing for positive outcomes.*** Three research themes are suggested:
 - Housing that supports all young people to make a positive transition to adult roles.
 - Housing as a pathway to positive outcomes for vulnerable and at risk young people.
 - Access to safe and secure housing.
- ***Improving children's wellbeing through housing.*** Four research themes are suggested:
 - Housing determinants of children's wellbeing.
 - Housing, change and crisis.
 - The influences of housing and neighbourhoods on children's wellbeing.
 - Addressing the circumstances of children with specialised housing needs.

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1. Introduction

This report is concerned with the connections between children and young people's social and economic outcomes and their housing¹ circumstances. It is a preliminary and scoping report intended to:

- Identify the policy issues raised by the housing status of New Zealand's children and young people.
- Present an overview of the available research evidence base and data sources in New Zealand that provide some insight into the determinants and impacts of children and young people's housing conditions.
- Consider our current knowledge base and the extent to which it can facilitate and underpin improving the outcomes of children and young people through addressing their housing needs.
- Identify ways in which our knowledge base might be improved through a coherent and systematic programme of research into the housing dynamics impacting on children and young people.

This scoping report is based on three activities: First, a review of New Zealand research, high-level policy documents, and official statistics that identify connections between children and young people's social and economic outcomes and their housing circumstances. Second, a review of a selected and limited range of international research and policy related documents. Third, interviews with a range of government and non-government agencies with key responsibilities for and interests in children, young people or housing. Organisations participating in the interview process were: Child Youth and Family (CYF), Office of the Children's Commissioner, Families Commission, Housing New Zealand Corporation (HNZC), Ministry of Education, Ministry of Health, Ministry of Social Development, Ministry of Youth Development, Office for Disability Issues, Barnardos, Child Poverty Action Group, Plunket, National Collective of Independent Women's Refuges (NCIWR), and Salvation Army.

The discussion is structured as follows.

- Section 2 outlines the housing status of New Zealand's children and young people.
- Section 3 discusses housing impacts on New Zealand's children and young people. Impacts are considered on health, education, safety and victimisation outcomes, and on the successful transition to adult roles.
- Section 4 presents the critical housing issues and knowledge gaps relevant to New Zealand's children and young people and suggests two research priority areas for addressing the knowledge gap.

Based on the literature review and discussions with agencies, two research streams are proposed, in which a range of discrete projects providing a comprehensive coverage might be developed. They are:

- Young people: positive housing for positive outcomes. All young people face significant decisions about housing as part of life course changes between childhood and adulthood, and to an extent, share common transition challenges. For some young people who are particularly vulnerable or at risk of negative outcomes, housing circumstances are critical to achieving independent living, and

¹ This report uses both the terms 'housing' and 'dwelling'. Housing is a generic term relating to housing issues (such as affordability and quality), consumption and markets. The term 'house' excludes units, apartments or flats. For that reason, this report uses the term dwelling for any type of building used for private accommodation. Dwelling refers to a particular building or structure used as an abode; it can be of a permanent or temporary nature.

engaging in further education or employment. For another group of troubled young people, suitable and stable housing can be a critical pathway out of trouble. Youth homelessness (broadly defined) is identified as a growing issue, potentially affecting many young people. Whatever their situations, more needs to be known about the dynamics, drivers and barriers influencing young people's housing circumstances, and the connections between housing and their social and economic outcomes.

- Improving children's wellbeing through housing. There is some New Zealand literature on the housing impacts on outcomes for children, but it is patchy and there is not a strong evidence base. While there is a growing evidence base in relation to housing effects on health, the effects of housing on other outcomes are not well understood. More needs to be done to collate and analyse existing New Zealand data and research on the housing determinants of children's wellbeing, to fill in gaps in knowledge and identify key housing interventions that may deliver positive cross-sectoral outcomes. The critical role of housing in supporting children experiencing change and crisis needs to be explored. Very little is known in New Zealand about the combined influences of housing and neighbourhoods on children's wellbeing. Finally, some children have specialised housing needs that are currently not well identified, nor addressed.

2. The Housing Status of New Zealand's Children and Young People

New Zealand is still a young society. Over a third (36 percent) of New Zealand's population is aged between newborn and 24 years of age. In 2006, that group constituted 1,438,752 people. The proportion of the population in New Zealand that is less than fifteen years of age is 15 percent. Among some population groups, the proportion of young people is even higher. Both the Maori and Pacific populations have a younger age structure than the New Zealand population as a whole. The median age of Maori was 22.7 years in the 2006 census. The Maori population under 15 years of age was 35.4 percent. Data related to the age structure of the Pacific population in the 2006 census has yet to be reported. The median age for Pacific people was 21 years in 2001, and almost 40 percent were aged under 15 years (Statistics New Zealand 2002d:17).

Despite the significant numbers of children and young people living in New Zealand, the housing status of New Zealand's children and young people has been largely subsumed in a broader concern with the housing status and rights of New Zealand families. In this section, we consider the extent to which New Zealand recognises children and young people as having housing rights and the extent to which New Zealand's current policy framework has identified housing as critical determinant of wellbeing. An overview of the statistical and research data describing the current housing characteristics of New Zealand's young people and children is also presented.

2.1 UNCROC and New Zealand Children's Right to Housing

New Zealand is a signatory to the UN Convention on the Rights of the Child (UNCROC). UNCROC recognises housing as important for children's wellbeing in Article 27, which is concerned with the right of every child to *"a standard of living adequate for the child's physical, mental, spiritual, moral and social development"*. Article 27 states that parties: *"in accordance with rational conditions and within their means, shall take appropriate measures to assist parents and others responsible for the child to implement this right and shall in the case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing"*. However, Article 27 also makes it clear that parent(s) or others responsible for the child have the primary responsibility to secure, within their abilities and

financial capabilities, the conditions of living necessary for the child's development, such as housing.

UNCROC defines a child as a person less than 18 years of age unless, under the law, majority is attained earlier. In New Zealand the situation in relation to defining children and young people is complex. There are a variety of ages that define the rights and responsibilities of children and young people in New Zealand.

- Sixteen years of age is the legal age that governs many activities associated with adulthood. A person may leave school at 16 years of age, leave home and support oneself, have sexual intercourse and contract a marriage (with parental consent).
- Where the State has legal guardianship of a child, that guardianship ceases at the child's seventeenth birthday. Similarly, young people are required to appear before an adult court at 17 years of age if defending a criminal charge.
- Eighteen year olds are permitted to vote.
- The age of majority in New Zealand is 20 years of age.
- To access student financial support, young people are considered dependents requiring parental financial support until the age of 25 years when access to the student allowance is not contingent on parental means testing.

Not surprisingly, there is some ambiguity around the definitions of children and young people in New Zealand's official statistics and policy settings. For example, Statistics New Zealand defines a dependent child as a child in a family aged under 18 years and not in full time employment. The Research Agenda for Children defines children from birth to 17 years (Smithies and Bidrose, 2000). The Ministry of Youth Development focuses on young people from 12 – 24 years, while the Children's Commissioner is interested in those from birth – 18, based on the UNCROC definition of a child.

While most children in New Zealand would be considered as falling under UNCROC, not all the people that we consider as 'young people' fall within the convention, because they are over 18. Moreover, there are some children and young people living in New Zealand who may not be covered by UNCROC. This is because New Zealand has one general reservation on articles to the Convention whereby it states that *"nothing in the Convention shall affect the right of New Zealand to continue to distinguish as it considers appropriate in law and practice between persons according to the nature of their authority to be in New Zealand, including, but not limited to their entitlements to benefits and other protections described in the Convention, and the Government reserves the right to interpret and apply the Convention accordingly"*. It is clear, however, that persons (including children) who are unlawfully² in New Zealand cannot access the full range of state social services, including public housing. Where they cannot afford to access housing on the private market, they are likely to be reliant on friends, relatives and providers of emergency housing services. Cabinet has agreed that the general reservation will be withdrawn following the enactment of a new Immigration Act, anticipated by mid 2008. This decision was made following considerable investigation of education and health policy settings.

² This group includes children who come with parents on work or visitors permits, and those parents then apply for permanent residency and in the meantime those permits are not renewed. Those families are effectively in limbo. This group also includes children in families that have been declined residency and remain in the country as illegal 'overstayers'. The Children's Commissioner is conducting an investigation into immigration, with a report expected in May 2007.

2.2 Recognising Children's and Young People's Right to Housing

Overseas, UNCROC has prompted, or is given expression in, a myriad of responses around the housing of children and young people. There is an enormously rich and varied overseas literature and research on the connections between children and young people's social and economic outcomes (both long and short term) and their housing circumstances. There is widespread acknowledgement of the critical roles of affordable, quality housing and safe neighbourhoods in supporting positive child development and successful future outcomes.

Overseas, a significant body of research has underpinned a general recognition that:

- Poor house condition and overcrowding are major determinants of child health and contribute to perpetuating disadvantage and undermining children's development.
- Parents' homeownership is linked to positive child outcomes and greater success as adults on indicators such as school achievement, completion of secondary school, tertiary education achievement, and eventual entry into home ownership.
- Housing factors such as tenure insecurity, poor house condition and crowding, are major drivers of residential movement, which in turn has implications for school attendance, access to services, and connection to communities.
- Children growing up in impoverished neighbourhoods are at greater risk of developmental problems, offending and victimisation.
- For young people, accessing stable, affordable housing is a key determinant of accessing further education and employment, and successful transition to adulthood.

As a consequence, internationally a variety of national, state, regional and city responses have emerged that focus on children and young people as target groups of housing policy. Several countries:

- Consider children and young people as separate target groups in housing policy formation.³
- Have established inter-sectoral responses in which housing policy and programmes are key levers for achieving positive outcomes for children and young people.⁴

New Zealand has not responded as actively or as coherently to the needs of children and young people as many of our fellow signatories to UNCROC. In the spheres of research and monitoring, there has been virtually no dedicated attention to the housing needs and experiences of children and young people. This is apparent in:

- The Ministry of Social Development's indicators of children and young people's wellbeing, which include only one indicator related to housing; household crowding (Ministry of Social Development, 2004:120).
- The preparation of an Action Plan emerging from the forum on youth development research held in June 2006. The Action Plan focuses on methodology, engagement with young people and their participation in research. Research priorities do not explicitly refer to housing issues, although a priority research area is youth transitions.

³ For example, Belgium (Verhetsel and Witlox, 2006).

⁴ For example, housing programmes are used as part of early childhood development initiatives (e.g. Greater Minnesota Housing Fund, 2004); initiatives to help reduce student movement include affordable housing programmes (Gilbert, 2005:26); young people's housing programmes are seen as key levers to stop offending and overcome social exclusion (Social Exclusion Unit, 2005) and environmental health programmes include housing initiatives (Licari *et al*, 2005).

- The new Families Commission Research Fund does not explicitly identify housing as a theme area, although it does have two themes that may include housing components. Those are: family-friendly environments and family assets.
- New Zealand's Agenda for Children (2002) does not identify housing as an issue or seek to monitor children and young people's housing related well being.

Some strategies refer to housing, although they do not specify housing objectives for children and young people. For example, the Youth Development Strategy Aotearoa (2002:19) does not identify housing as a key priority, although it does note that neighbourhoods that aid positive development include housing that is in good repair with no overcrowding and stable, long term residents.

Some strategies do have an explicit focus on housing for children and/or young people. Relevant details of those documents are outlined below in Infobox 1. The New Zealand Housing Strategy, through Area 7: meeting diverse needs, identifies children and young people as two of the groups whose housing needs are not always adequately met by the private housing market.⁵ The New Zealand Housing Strategy notes several housing issues facing young people, including the need to live in housing that is in good repair and not overcrowded, a shortage of emergency accommodation for young single men, and the impact of debt on the housing choices of young people (Housing New Zealand Corporation, 2005:47). The New Zealand Housing Strategy also states that housing providers have a special responsibility to address children's needs in housing design and provision. The New Zealand Disability Strategy (2001) states that housing affordability and quality are critical aspects affecting the housing choice of people with disabilities. Several of the strategy's objectives are relevant to housing, in particular, Objective 8.1: Increase opportunities for disabled people to live in the community with choice of affordable, quality housing. Objective 13: Enable children and youth to lead full and active lives, includes several action areas that are relevant to the provision of housing services. Two health strategies – the New Zealand Health Strategy 2000 and the Child Health Strategy (1998) – focus on housing as a health determinant and identify housing quality as a key aspect of public health.

Infobox 1: Strategies and Initiatives relating to Children's and Young People's Housing

Strategy	Initiatives
New Zealand Housing Strategy	<p>Key initiatives to be implemented through the work programme for Area 7 are (HNZC, 2005:68):</p> <ul style="list-style-type: none"> ▪ Routinely address children's needs in housing design to ensure it provides for their wellbeing and health development, and consider the impact of housing policies on child well-being ▪ Investigate youth-specific accommodation programmes, and emergency accommodation for young men and women ▪ Improve the availability of housing for families ▪ Explore ways to meet the housing needs of children and young people with disabilities, including those formerly in institutional care ▪ Hold focus groups with youth including rural, urban, Maori and Pacific youth, sole parents, students and youth at risk to find out their housing needs and develop research

⁵ The other groups are older people, women, disabled people, Maori, Pacific peoples, and other ethnic communities.

	<p>priorities</p> <ul style="list-style-type: none"> ▪ Meet the need for housing and support services for young people leaving state care when they turn 17 ▪ Develop and implement life-skills education programmes and mentoring for young people ▪ Investigate developing a tenant advocacy service for youth ▪ Investigate how government can involve youth in housing policy, and how the sector can involve youth in their local communities' planning and design decisions.
The New Zealand Disability Strategy (2001)	<p>Objective 13: Enable Children and Youth to lead full and active lives</p> <ul style="list-style-type: none"> ▪ Objective 8.1: Increase opportunities for disabled people to live in the community with choice of affordable, quality housing. ▪ 13.8: Develop a range of accommodation options so that disabled young people can live independently.
New Zealand Health Strategy 2000	<p>Goals and Objectives (p.10):</p> <p>Goal 4: A healthy physical environment:</p> <ul style="list-style-type: none"> ▪ Objective 14: Support policies and develop strategies and services that ensure affordable, secure and safe housing. ▪ Objective 17: Support policies and develop strategies and services that ensure all people have access to safe water supplies and effective sanitation services. <p>Public health is a 'service priority' area (p.20). Focus includes: Improved access to public health protection services in rural areas, with a focus on clean water, sewerage and housing.</p>
Child Health Strategy (1998)	<p>Appendix 1: Public Health Goals, Objectives and Targets for Child Health that are relevant to the Strategy include:</p> <ul style="list-style-type: none"> ▪ To ensure a social and physical environment which improves, promotes and protects the public health and whanau public health <ul style="list-style-type: none"> ○ To reduce the adverse health effects of unemployment, income inequalities, housing, transport and illiteracy

In general, both policy and research tend to assume that the housing impacts and experiences of children and young people are similar to and have the same implications as the housing experiences of adults. Children's and young people's housing experiences, needs and aspirations, as voiced by them, are certainly missing. Data have emerged from broader research and evaluation programmes that provide some insight into the housing experiences of, and to a lesser extent, the wellbeing outcomes for children and young people of certain housing conditions. The research programmes which have generated that data have been primarily focused on healthy housing,⁶ energy use and the thermal performance of New Zealand houses,⁷ residential movement,⁸ and rural housing conditions.⁹ The particular experiences of young people and children have been marginal to the research objectives.

⁶ Baker *et al*, 2006.

⁷ Isaacs *et al*, 2006.

⁸ The FRST funded Building Attachment in Communities affected by Transience and Mobility programme.

⁹ HNZC's Rural Housing Programme evaluation.

Similarly, in the policy arena, the Government has recently identified a series of housing interventions to assist 'families young and old' including moves to upgrade the social housing stock, increase the supply of affordable housing and a shared equity scheme for first home owners. However, there is no explicit focus on children or young people¹⁰. Certainly there is some focus on children through social housing, with the current allocation policy in relation to HNZC housing favouring families with children. However, that allocation policy also acts to exclude young people living on their own or in groups as a priority, irrespective of the extent of their unmet housing need. Furthermore, while the New Zealand Housing Strategy identifies young people as experiencing unmet housing need, there appear to be no housing initiatives that encourage community-based or local authority housing providers to target the housing needs of young people¹¹. In short, New Zealand's housing policy settings and programme delivery largely ignore children and young people as a separate target group.

The potential for leveraging children and young people's wellbeing through resolving housing problems is also largely ignored. In other sectors, the resolution of housing need has become recognised as an important pathway by which wider social and economic objectives may be achieved. For instance, the Rural Housing Programme is intended to not only resolve sub-standard housing in rural areas, but also deliver employment, training and business opportunities. Similarly, Government has recently chosen to fund a housing co-ordinator for Marlborough, Nelson and Tasman because housing stress is inhibiting economic growth in those regions. There is little evidence, however, of a similar cross-sectoral approach being adopted in the context of programmes addressing the needs of at risk children and young people or children and young people with special needs.

2.3 Children's and Young People's Housing Characteristics in New Zealand

Although there are no universally agreed standard measures of housing experience, there is general consensus that housing wellbeing is manifest in:

- housing affordability
- crowding
- dwelling condition and performance
- tenure
- tenure security and residential movement
- use of temporary dwellings
- homelessness.

In this section, we consider the current housing status of children and young people in New Zealand in relation to each of those domains. It should be noted, however, that because children and young people are not a separate target group for housing assistance, their housing characteristics and experiences are often not monitored or reported. Consequently, the following discussion presents a brief summary of currently available commentary on each of those domains in so far as the experience of young people and children is reported. While further analysis of the available primary statistical data could be undertaken to describe the experience and housing characteristics of children and young people, such an analysis is outside the parameters of this scoping report¹².

¹⁰ Prime Minister's Statement to Parliament 2007.

¹¹ A recent survey of local authorities identified that no council currently has young people as a target group in their provision of rental housing. The large majority of council rental housing stock is targeted to older people (Saville-Smith *et al*, 2007b).

¹² Where possible, 2006 census data is used in the following discussion. Statistics New Zealand is progressively releasing 2006 census data.

2.3.1 Housing Affordability

Housing affordability is generally accepted as a critical measure of housing stress and can be measured in both the rental market and the owner occupier market. The literature has linked affordability to other financial factors that combined, affect children's health and educational outcomes in particular.

Affordability is about the relationship between expenditure on housing and household income (CHRANZ, 2006). Housing expenditure is not only about the price of accommodation (rent or mortgage), but also includes the capacity of the household to meet ongoing housing costs such as rates, insurance and upkeep. The principle of affordability is that, after expenditure on housing, a household should have enough residual income to cover other basic living costs, as well as irregular but unavoidable costs. Housing expenditure-to-income ratios are very important for low income households, which have very little residual income, whereas for higher income households, high housing outgoings are not as critical because there is still sufficient income for basic needs. CHRANZ notes that a wide range of affordability measures are used, and provides a common benchmark of housing affordability as "those households experiencing 'housing stress' which are in the lower 40% of the household income distribution and pay more than 30% of their gross income on housing costs, whether renting, buying or existing homeowners" (CHRANZ, 2006:3).¹³

In 2004, 22 percent of New Zealand households spent more than 30 percent of their income on housing costs (Ministry of Social Development, 2006:66). This was a slight decline compared with 24 percent in 2001. Since 1988 the proportion of households spending more than 30 percent of their income on housing costs has doubled. Low income households are most affected, and Maori and Pacific people are disproportionately represented in that category. Among the lowest income quintile of households, 35 percent were spending more than 30 percent of their income on housing costs in 2004. This was a drop from the high of around 42 percent over the period 1996-2001. For households with at least one Pacific adult, the proportion of households with housing costs greater than 30 percent of income was 23 percent in 2004. However, a high of 48 percent was reached in 1997. For households with at least one Maori adult, the proportion of households with housing costs greater than 30 percent of income was 21 percent in 2004. For Maori too, the proportions had been much higher, peaking at 36 percent in 1997 (Ministry of Social Development, 2006:67).

The Ministry of Social Development (2006:67) reports that children and young people under 18 years were more likely than any other age group in 2004 to be in a household with an affordability problem. In 2004, just over 29 percent of those under 18 years of age lived in households with housing costs over 30 percent of income. Although this has declined since 2001, when it was 35 percent, it is still more than double the proportion of this age group in households suffering affordability stress in 1988. The next most affected age group is 18-24 year olds, with 29 percent of people in that age group living in households with housing costs in excess of 30 percent of income.

¹³ In relation to income-related rents for social housing provided by Housing New Zealand Corporation, a formula is used to set a rent based on a definition of low income, which must be less than NZ Superannuation. Any other income such as Family Support payments is also taken into account. The weekly rent is 25 percent of the household's net income.

Affordability varies across the country. Decline in housing affordability has been particularly marked in the Auckland region (DTZ New Zealand, 2007). These affordability problems are not only experienced by those on the lowest incomes, but have broadened to affect an increasing number of households. There has been a significant decline in the home ownership rate of 'couples with children' households. In the Auckland region, 21 percent of owner occupier households experience housing stress (paying more than 30 percent of their gross income in housing costs) compared with 32.7 percent of renter households. DTZ New Zealand (2007) comment that the traditional housing career based on movement from private sector rental to home ownership may have been delayed or denied for many Auckland households. They suggest that the lack of movement on to home ownership may result in more competition on the rental market. Households that have relied on the private rental sector will increasingly find it unaffordable and this may result in an increase in over crowding and demand for housing assistance.

2.3.2 Household crowding

Having enough space in a dwelling is a core component of quality of life (Ministry of Social Development, 2006:68). Internationally and in New Zealand research has shown crowding to be associated with negative health and educational outcomes. There is, however, no definitive and accepted definition of crowding. Statistics New Zealand provides a variety of methods to measure and index occupancy and/or crowding. It is not uncommon for the Canadian Crowding Index to be used to define unacceptable levels of crowding. The Canadian measure defines crowding to be unacceptable where a household is living in a dwelling in which one or more additional bedrooms are required.¹⁴

Using the Canadian Crowding Index, 10 percent of New Zealand's resident population were in crowded households (requiring at least one more bedroom) in 2001, a reduction from 1991 when 12 percent of the population were in crowded conditions. In 2001, 3.2 percent of the population lived in houses where they needed two or more bedrooms (Ministry of Social Development, 2006:68).

Compared to non-crowded households, crowded households are more likely to be larger, to contain extended families, and younger people (Statistics New Zealand, 2003). Crowding is more likely in low income households, and in rental accommodation. Pacific (43 percent), Maori (23 percent) and "Other"¹⁵ ethnic groups (25 percent) are far more likely to be living in crowded households. In 2001, 22 percent of children under 18 lived in a household with six or more people; 50 percent of Pacific children and 31 percent of Maori children lived in such households (Ministry of Social Development, 2002).

Crowding is more typical in some regions than others. Manukau City has by far the highest level of household crowding, followed by Opotiki District and Porirua City (Ministry of Social Development, 2006:69). Crowded households are more likely to be in rental accommodation than are non-crowded households – in 2001 only 37.6 percent of owner-occupied households were crowded. Furthermore, crowded households are also more likely to have lower incomes and to be paying a higher proportion of weekly rent in relation to income (Statistics New Zealand, 2003).

Using the Canadian Crowding Index, children and young people are more likely to live in crowded dwellings than are older people. In 2001, 17 percent of children under

¹⁴ The Canadian Crowding Index uses a formula to allocate a separate bedroom to household members based on age and sex.

¹⁵ This group contains many recent migrants who are not covered by other ethnic categories.

10 years and 15 percent of 10-14 year olds lived in households requiring at least one more bedroom. For 15-24 year olds, the proportion was 16 percent (Ministry of Social Development, 2006:68). If those proportions were applied to the 2006 census population, this would mean that over 95,000 children under 10 years old, over 45,000 in the 10-14 years age group, and over 91,000 in the 15-24 years age group were living in crowded households.

There is a significant bias which emerges from the application of the Canadian Crowding Index with the rule as currently stated. That is, it tends to cover up crowding in small families and households. It tends to reinforce views that overcrowding is generated by large families and is an urban, rather than a rural, phenomenon. Saville-Smith and Amey's (1999) formulation of crowding involves three variables: family type, number of family members, and number of bedrooms. Applied to 1996 census data, that formulation showed that at least 1.9 percent of all one-parent families and 0.9 percent of all couple-with-children families resided in overcrowded households. Almost 27,000 children were affected. That analysis also found that crowding was unevenly distributed across the country, and that rural as well as urban areas had overcrowding. The areas with the largest proportion of one-parent families in overcrowded conditions were Opotiki District and Far North District. They also found that some areas had comparatively high proportions of couple-with-children families in overcrowded conditions.

Across both couple and single parent families, the areas with the highest proportions experiencing overcrowding were Auckland City, Manukau City and Wellington City. The situation of one-parent families with one child was examined, with their experience of overcrowding being particularly apparent in urban areas. This analysis showed that it is not only large households or large families that are affected by crowding. The housing stock does not cater well for the size of dwelling most suitable and affordable for one-parent with one child families, such as one or two bedroom dwellings (Saville-Smith and Amey, 1999:4). Other New Zealand studies have also subsequently demonstrated that one parent families are at risk of overcrowding (Statistics New Zealand, 2003:28).

2.3.3 Dwelling condition and performance

Dwelling condition refers to the external and internal physical condition of the housing stock. At the most basic level, a dwelling should provide shelter and adequate space for its occupants. Key aspects of dwelling condition are its structure, ventilation, and the provision of basic amenities such as water, heating and cooking. It is widely recognised in many countries that physical defects in the housing stock and dwellings in poor repair or lacking essential amenities not only impose financial and social costs on residents, but also impose considerable financial and social costs on the community. The international literature associates poor dwelling condition in particular with poor health outcomes (Milligan *et al.*, 2006:118) but there is also emerging evidence of negative impacts on social and familial interaction (Saville-Smith *et al.*, 2006).

The most comprehensive database on New Zealand dwelling condition has been compiled from three studies of the condition of New Zealand dwellings by BRANZ in 1994, 1999 and 2005. In the 2005 study, physical inspection covered 565 homes in Auckland, Wellington and Christchurch (Clark *et al.*, 2005). In 1999 and in 2005 an additional telephone survey was conducted with homeowners, including those in the inspected homes. Although there are indications that the overall average condition of surveyed houses has improved over the three studies, common defects were observed, including poor subfloor ventilation, inadequate clearance of wall claddings

from the ground, poor or missing subfloor fasteners, poor ventilation of bedrooms and kitchens, and lack of earthquake restraints on hot water cylinders and header tanks.

Subfloor dampness was identified as a particular problem, with 60 percent of the surveyed dwellings having substandard ventilation. With regard to insulation, the study found that a large proportion of homes do not meet building standards – 30 percent of houses in the study built in the 1980s and 1990s do not meet the 1977 ceiling insulation standard, and 60 percent of houses built in the 2000s do not meet the 1996 ceiling insulation standard. The study also found that dampness is a problem in the surveyed homes, with 12 percent being assessed as damp or smelling musty. In addition, more than 20 percent of homes used dehumidifiers, and the study estimated that without those, 30 percent of homes would be damp. Finally, the study found that insufficient maintenance is being undertaken by householders to maintain housing stock in a satisfactory condition.

Issues concerning substandard and poor quality housing, especially in rural areas with proportionately high Maori populations, have been highlighted for many years. For example, a survey of 106 homes in Opotiki District with mainly Maori residents using a variant of the BRANZ survey instrument showed that the overall condition of those houses was between one half and one full grade lower than the national housing stock (Saville-Smith, 1999). Publicity over sub standard rural housing and deaths associated with fires in temporary dwellings have constituted a key driver for the establishment of HNZA's rural housing programme to reduce substandard housing in Northland, East Coast and Eastern Bay of Plenty. In that programme, substandard houses are defined as unsafe dwellings where people may rely on open flames for light, heat or cooking. The houses may also lack basic services and utilities.

In New Zealand, the most comprehensive information on dwelling performance is provided by the Household Energy End-Use Project (HEEP). HEEP, which studied energy use in a sample of households for 10 years, provides a unique set of data on indoor temperatures and households' ability to afford comfortable domestic warmth (Isaacs *et al*, 2006). That research confirms that New Zealand houses have lower temperatures in winter than houses in other countries with similar temperate climates. Many houses fail to achieve the WHO optimum indoor temperature range of between 18 – 24 degrees C (Isaacs *et al*, 2006:53). The Year 10 HEEP report shows that winter living room temperatures average 17.9 degrees C. The maximum mean temperature is 23.8 degrees C and the minimum mean temperature is 10 degrees C. On average, over the three winter months living rooms are below 20 degrees C for 83 percent of the time. Newer houses (built after 1978 when all new houses have been required to be insulated) have slightly warmer winter living room temperatures, at 18.6 degrees C. Typically, the living room is the warmest room in the dwelling. Only 15 percent of households heat their bedrooms during the night.

The HEEP report also shows that, while low income houses appear to value increased warmth, they cannot achieve warm indoor temperatures. Also, the higher proportionate expenditure of low income householders does not assure a warm house or even a warm living room. Households in houses with winter indoor temperatures under 16 degrees C (which is very cold) appear to spend a greater proportion of their income on energy than the HEEP households overall. Maori households¹⁶ in the HEEP study use less than average heating energy and are over-

¹⁶ The number of Maori households in HEEP is small, so no general New Zealand results can be provided.

represented in the 'cold' evening living room temperature category. This indicates that fuel poverty is an issue in New Zealand, particularly for low income families (Isaacs *et al*, 2006:107).

Recent research on disabled people's housing needs showed that there is considerable unmet need for accessible, warm, comfortable housing that works well for disabled people whose mobility is impaired. Almost a quarter of people participating in the survey of disabled individuals and the same proportion in the survey of parents with disabled children found it difficult to attain satisfactory indoor temperatures during winter (Saville-Smith *et al*, 2007a). Furthermore, a majority of disabled individuals and parents with disabled children described significant performance problems with their dwellings, including cold, damp and mould. The ability to keep warm is frequently reduced for disabled people and as many remain within their houses for long periods, the ambient temperature must be comfortable and stable day and night. Consequently, the performance of the dwelling in generating stable and comfortable indoor environments over the 24 hours is even more important for disabled people and their families than for other people.

In addition to the direct impact of dwelling condition and dwelling performance on the children living in those dwellings, there is emerging evidence overseas that dwelling condition is a critical contributor to what are frequently referred to as neighbourhood effects. Internationally, there is a view that neighbourhoods with certain characteristics such as residential stability, home ownership, dwellings in good physical condition, no vacant dwellings, a range of facilities and services, good social networks between residents, and residents with high socio-economic status provide better conditions for achieving positive outcomes for children and young people.¹⁷ There is virtually no neighbourhood based research in New Zealand although there is a developing evidential base arising from the evaluation of the community renewal programmes instituted by HNZC. The burden of neighbourhood effects on New Zealand children and young people is, consequently, currently unknown. However, some research studies may have some potential to provide some insights into these dynamics. They include: Beacon Neighbourhoods Research Programme and the FRST Building Attachment in Communities Affected by Transience and Mobility.

2.3.4 Tenure

The two broad types of tenure are owner-occupied accommodation and rental accommodation. Owner-occupied refers to accommodation that the usual residents own outright or make mortgage payments. Rental accommodation refers to

¹⁷ Explanations of those linkages have been grouped into the following categories by Jencks and Mayer (1990), whose overview has been referred to in many studies:

- Neighbourhood resource models focus on the quantity and quality of services available to residents. Such services include recreation, health, police and child development services. The implication is that the availability of such services will lead to enhanced opportunities for development, reduction in problems and enrichment of the individual's local experiences.
- 'Contagion' or epidemic' models assume communities have a dominant set of social norms. This may result in imitation or modelling of certain behaviours being accepted and passed from generation to generation. Those behaviours may be positive, such as valuing education; or negative such as youth offending.
- Collective socialisation models consider the influences of all adult residents of a neighbourhood on children. Adults may provide positive or negative role models, as well as informally exerting social control on children's behaviour.
- Competition and relative deprivation models focus on the possible effects of basing perceptions about success or failure through comparisons with nearby individuals.

accommodation that is not owned by the usual tenants, and is owned by a landlord. Rental accommodation may be owned by the private or public sector. In New Zealand the 2006 census includes a third type of tenure, dwelling held in a family trust by usual residents. That constitutes a change in classification in comparison to earlier censuses.

Home ownership is regarded as being associated with material wellbeing and with positive child outcomes; in part because it offers long term tenure security, and also because equity in home ownership can create the potential for inter-generational wealth transfer including future home ownership (Milligan *et al*, 2006; Greater Minnesota Housing Fund, 2004; Haurin *et al*, 2001; Arcus and Nana, 2005). Rental tenure is more likely to be associated with factors detrimental to wellbeing (such as unemployment), and with higher mortality rates, compared to those of home owners (Milligan *et al*, 2006).

In itself, rental tenure does not necessarily result in negative outcomes. Public sector rental accommodation and other forms of social housing have been demonstrated as generating positive outcomes that are related to both quality of dwelling and security of tenure (Phibbs, 2005; Baker *et al*, 2006). The association of tenure with negative or positive outcomes is very much dependent on:

- The extent to which rental or owner occupation is the prevailing tenure norm within a society.
- The relative condition of rental and owner occupied stock.
- The extent to which each tenure type provides tenure security and the degree to which tenants are protected.

New Zealand experienced a decline in home ownership over the 2001 – 2006 period, which is not the norm in comparison with other OECD countries. Nevertheless, New Zealand's home ownership rate of around 67 percent in 2006 compares with Australia's of around 66 percent in 2001, Canada's at 62 percent (2001), the United States at around 67 percent (2001) and the United Kingdom's at 69 percent (2001) (DTZ New Zealand, 2007:6)¹⁸.

In New Zealand, since World War II, rental tenure has been increasingly associated with some degree of marginality to home ownership. Home ownership is still New Zealanders' tenure of choice despite some decline in rate of owner occupation (DTZ Research, 2005:5). That appears to be held by all sectors of the population, including Maori (Waldegrave *et al*, 2006:32), Pacific (Housing New Zealand Corporation, 2005; Koloto & Associates *et al*, 2007) and low income earners (Smith and Robinson, 2005:16).

In 2006, two-thirds of all private dwellings were either owned by their occupants (54.5 percent) or held in a family trust (12.3 percent). One third of private dwellings were not owned by their occupants. This was similar to the proportions reported in the 2001 census, but a drop in home ownership of 73.8 percent from the 1991 census (Statistics New Zealand, 2006a). The 2006 census showed that there is considerable variation in tenure between regions, with home ownership rates highest in Tasman District, West Coast Region, and Waimakariri District (Statistics New Zealand, 2007b). Auckland Region has the lowest proportion of home owners.

The private sector dominates the rental housing market. In 2006 81.8 percent of households paid rent to a private sector landlord, an increase from 78.4 percent in

¹⁸ Note that there is a lack of consistency in the way home ownership rates are derived and reported, which make country comparisons difficult (DTZ New Zealand, 2007:6).

2001 (Statistics New Zealand, 2007b). Maori and Pacific peoples are less likely to own their own homes. In 2006, 66.8 percent of Maori and 72.5 percent of Pacific people lived in a dwelling they did not own (Statistics New Zealand, 2007b). This proportion appears to have risen since the 2001 census for Pacific people, when 62 percent lived in a dwelling they did not own (Statistics New Zealand, 2002c; 2002d). Maori and Pacific people face particular challenges to achieving home ownership that are not only related to, on average, lower earnings. Maori households tend to be larger than average, and with a younger average age, which impacts on the size of house needed. Complexities of Maori land tenure, combined with some local authority planning regimes have made it difficult to access loans and build on Maori land. It has also been suggested that, as Maori tend to have children at a younger age, this reduces the ability to amass financial resources to enable a family to purchase a home (Waldegrave *et al*, 2006). Pacific households are significantly larger than average; many include extended family members; and there are cultural traditions of hospitality, family rituals and provision of long-term accommodation for family members and new arrivals that affect the size and functionality of the home needed (Koloto & Associates *et al*, 2007).

In relation to children and young people, it should be noted that while in 2001 most households (71.4 percent) lived in a dwelling that was owned by a usual resident (with or without a mortgage).¹⁹

- Sole parent families with dependent children have a relatively low ownership rate, at 42.4 percent of all one parent families with dependent children in 2001.
- 64.5 percent of all families with dependent children are in owner occupier households.

In short, households with dependant children are less likely to own a home than households without dependent children. This is often due to the age of the household head; older age groups are more likely to own their home.

2.3.5 Tenure security and residential movement

Tenure security refers to the length and certainty of remaining in a dwelling. It is generally assumed that rental tenure provides less tenure security than owner occupation. This, typically, is the case. However, in many countries strong tenure security protection is imposed on the rental market. Similarly, it must be noted that where there is high debt loading, an over-heated housing market and limited protections for borrowers, owner occupiers may also be vulnerable to problems of tenure security.

Low tenure security can be associated with high residential movement. But this must be seen within the cultural context of the frequency of movement within particular societies. New Zealanders are mobile, compared to residents in north western Europe, USA, Australia, Japan, Great Britain and Ireland (Long, 1991). Shifting house is 'normal' for New Zealanders. In the 2006 census, over half (57.7 percent) of the total usually resident population had changed their usual address at least once in the previous five years, and almost one in four (24.8 percent) had moved within the past year (Statistics New Zealand, 2007a). This was slightly up on the 2001 census (55.4 percent and 24.2 percent respectively).

Younger age groups are more mobile than the average. Almost two thirds of children aged 5-9 years moved at least once in the five years prior to the 2006 census. Fifty-

¹⁹ Data on tenure is collected at the household and dwelling not the family level. This means that data may not necessarily reflect the circumstance of a family living in a household with other families, or with other people (Statistics New Zealand 2002b).

eight percent of the 10-14 years age group moved at least once in the previous five years. Almost 60 percent of the 15-19 age group shifted at least once in the previous five years. In the 20-24 age group, over 78 percent moved at least once in the previous five years.

The implications of movement for children and young people can be immensely varied, and are often difficult to grasp because of a lack of standardised measures. A wide range of definitions of frequent movement are used in overseas research, depending on the age group or issue under investigation. Some examples of definitions are:

- “Highly mobile families”: Changing residences two or more times in the year prior to kindergarten (Civitan International Research, 2000).
- “High mobility”: Six or more residential moves during a student’s school years (Stutzky *et al*, 2001).
- “Mobile students”: any move within the six month period under study (Family Housing Fund, 2001).
- “Highly mobile children”: Those who have moved more than twice in five years (Lonner *et al*, 1994).
- “Frequent mover”: Changing residences three or more times a year (Richardson and Corbishley, 1999).

It is also recognised that the impacts of residential movement may vary according to the extent to which movement is planned, voluntary and used as a means of improving economic and social conditions. It is generally assumed that unplanned and unpredictable movement which is in reaction to stressors will be, in turn a source of stress for families. Residential movement may reflect unresolved or attempts to resolve housing stresses. Unaffordable housing, household crowding, poor dwelling condition, rental tenure insecurity, problems with the landlord and dissatisfaction with the neighbourhood are all major ‘push’ factors precipitating moves that are commonly discussed in the literature (Family Housing Fund, 2001; Richardson and Corbishley, 1999; Greater Minnesota Housing Fund, 2004). Though less common, key housing ‘pull’ factors driving a shift are better quality housing, and buying a home (Schafft, 2005; Dieleman, 2001; Gilbert, 2005:24). Persistent shifting and a series of rapid residential shifts may mask incipient homelessness entailing temporary living arrangements or reliance on other families for accommodation. Such situations have been identified in the literature as detrimental to children’s and young people’s wellbeing.

2.3.6 Temporary dwellings

In the 2006 census data on temporary dwellings is classified under ‘other occupied private dwelling’, which includes mobile and improvised dwellings, roofless or rough sleepers and dwellings in a motor camp.

Temporary dwellings are not necessarily built to the building standards required of permanent dwellings or provide the amenities and facilities associated with permanent dwellings. In addition, suppliers of temporary dwellings such as holiday camp dwellings are not treated as landlords and are not constrained by legislation relating to tenant protection. As such, living in temporary dwellings can be characterised by problems arising from poor dwelling performance and problems of tenure security.

In 2006 the proportion of ‘other occupied private dwellings’ was very small, at only 0.7 percent of all private occupied dwellings (Statistics New Zealand, 2007b). This was an increase from 2001, when temporary private dwellings only represented 0.4

percent of all private occupied dwellings (Statistics New Zealand, 2002b). Only a very small proportion of families (0.2 percent) lived in temporary dwellings in 2001, although this was still a substantial number of families – 1,620 (Statistics New Zealand, 2002a, 2002b). Almost half of these families were concentrated in the Auckland, Northland and Bay of Plenty regions. Just under half of the families living in temporary dwellings were couples-with-children. While the majority of residents in temporary dwellings were European, Māori were overrepresented and made up 18.2 percent of residents in temporary dwellings in 2001.

2.3.7 Homelessness

Homelessness is not a precise term, with definitions varying from country to country. However, many studies suggest that homelessness relates to market failure, and cannot be explained as simply due to individual inadequacy. In Australia, homelessness is broadly defined as having inadequate access to safe and secure housing. This is further specified to include accommodation that is threatening to the health or safety of its occupants, or marginalises them. Other countries, such as Sweden and the Netherlands employ a narrow definition of homelessness that equates to sleeping rough (Communities and Local Government, 2006:4). The newly established National Homelessness Coalition of New Zealand (CHAI, 2007) distinguishes between different situations:

- Primary homelessness: people without conventional accommodation (e.g. living on the streets)
- Secondary homelessness: people moving between various forms of temporary shelter (e.g. staying with friends or relatives, emergency accommodation)
- Tertiary homelessness: people living in single rooms in private boarding houses on a long term basis, without their own bathroom, kitchen or security of tenure.

The literature reviewed indicates a growing concern in Australia, USA, Canada and UK about homeless youth and children living in homeless families. Several countries including Australia (Mission Australia Research and Social Policy Unit, 2000), Canada (Cooper, 2001) and the USA (HCH Clinicians Network, 2003) have noted the rapid growth of families among the homeless.

No New Zealand research specifically on homeless children and young people was identified. Nor were any estimates of the number of homeless children and young people in New Zealand found, although there is a general view among some community and social service providers that the number of homeless in New Zealand is increasing (e.g. Tenants Protection Association (Christchurch) Inc, 2000). There is also some evidence from the Building Attachment research that some communities have young people of no fixed abode that are unattached to stable family networks, support systems, education/training or employment (James, 2005).

Several government agencies identified homeless youth and children in homeless families as key priority areas, including Child Youth and Family, the Children's Commissioner, Ministry of Youth Development, Office for Disability Issues Barnardos, Plunket, Salvation Army and NCIWR.

NCIWR statistics indicate that there is a level of hidden homelessness among women and their children. This is evident through the many enquiries refugees receive from women with families urgently seeking accommodation²⁰. But it is most apparent in the increasing length of stay reported by refuge safe houses. Because of a lack of

²⁰ NCIWR reported that, because they offer crisis accommodation, women with children approach refugees with housing problems that are often unrelated to any domestic violence incident.

affordable housing, the average length of stay in safe houses has almost doubled between 2000/01 – 2005/06, from an average length of stay of 20 bed nights to 37 bed nights. Most refuges are continually full and NCIWR expects that trend to increase. Sometimes women and children have to be moved to another area because the refuge closest to them is full; this results in disruptions to the family's schooling, employment and support networks. NCIWR observed that there is a general lack of emergency accommodation, particularly that which is suitable for women and children who have experienced violence. There is also a dearth of transitional housing for women and children moving out of violent situations.

3. Impacts from Children and Young People's Housing Experiences

There is a wealth of research overseas that connects children and young people's housing experiences with health, education, safety, offending patterns and the success of young people's transitions to adulthood. This section focuses on the New Zealand research literature that focuses on those connections. References to overseas research are made where that research illuminates the limitations of New Zealand research or provides some additional insight into the nature of the impacts of housing on children and young people's wellbeing.

There is a much more extensive literature about the relationships between housing and health (particularly the physical characteristics of the dwelling) than on the connections between housing and other outcomes for children and young people. The links between housing characteristics outlined in section 2.3 and specific well-being outcomes for children and young people are summarised in Annex 1.

3.1 Health outcomes

The World Health Organisation (WHO) recognises poor housing as one of the main determinants of health status. It considers healthy housing to cover the provision of functional and adequate physical, social and mental conditions for health, safety, hygiene, comfort and privacy (Bonney *et al*, 2004). In 2004 the WHO European region committed to specific actions relating to health and environment, including actions concerning building standards and safe indoor environments, to ensure a better future for children. That commitment was seen as important because:

- environmental factors play a critical role during the embryonic, foetal and early years of life in the development of the child;
- children do not control their environment and are largely dependent on adults to determine where and how they live;
- many safety standards are based on criteria used for adults; and
- prevention of exposure to health risks in childhood helps to avoid poor health in later life (e.g. cardiovascular disorders) and intergenerational effects such as birth defects (Licari *et al*, 2005).

In New Zealand it is also widely accepted that housing can have both direct and indirect effects on physical health, and to a lesser extent, mental health. New Zealand's Child Health Strategy (Ministry of Health, 1998:13 – 14) associates a range of socio-economic factors, including housing factors such as poor housing, overcrowding, poor neighbourhoods and high residential mobility, with poor health. Similarly, the New Zealand Health Strategy 2000 (Ministry of Health, 2000:3) notes that some people in New Zealand live in "unhealthy housing" with limited access to clean water and sewerage systems.

Evidence of the links between housing and wellbeing outcomes are most robust for health outcomes, although the causal links are not always well understood. People

who live in overcrowded, poor housing conditions and are confronted by unaffordable housing often experience a range of deprivations, and therefore isolating and analysing the effects of any one factor is very difficult. Nevertheless, there is general agreement across many overseas studies that:

Although all of the mechanisms are not yet well studied and described, the built environment, including residential housing, is an agent of health (or illness) for children". (Breysse et al, 2004:1587).

An international body of work, including New Zealand studies, considers the effects of housing on health outcomes specifically in relation to children. This work is important in understanding the considerable impacts that housing can have, not only on children's current wellbeing, but also on their future health status. There is extensive research on crowding and dwelling condition and performance as determinants of health status. There is also a large literature on the health impacts of homelessness. There is less research on the health impacts of affordability and tenure security.

3.1.1 Crowding's impact on health outcomes

Household crowding is shown to be a risk factor for infectious diseases, especially those spread through respiratory means, in a wide range of overseas and New Zealand studies (Statistics New Zealand, 2003:59). International research shows that crowding increases the number of contacts for the individual and therefore the 'reproduction number' for infection in the population is increased (Baker, 2007). The links between infectious disease and crowding include bacterial meningitis and septicaemia in children. Furthermore, a strong association has been found between crowding and meningococcal disease, Hib disease, bronchiolitis in children, enteric infections in children, tuberculosis and pandemic influenza. There is suggestive evidence for other infectious diseases such as rheumatic fever, skin infections and cellulitis (Baker, 2007).

In New Zealand, analysis of census area unit data and Ministry of Health notification data found higher rates of infectious diseases in areas with higher proportions of crowded households, most consistently for tuberculosis, acute rheumatic fever, meningococcal and pneumococcal meningitis and meningococcal disease (Statistics New Zealand, 2003:79). For all those diseases, rates are higher for Maori and Pacific people (Statistics New Zealand, 2003:62-79).

The rates for many infectious diseases associated with crowding in New Zealand are highest amongst children. Rates of meningococcal disease are highest in children under 15 years, with particularly high rates under five years, and rates increase markedly in areas with higher proportions of crowded households. Similarly acute rheumatic fever rates are highest in children 5-14 years of age. Those rates increase markedly in areas with higher proportions of crowded households. Rates of tuberculosis are highest in the over 60 years of age group, however, the age group with the second highest rates are those 15-24 years. Babies and young children are the most vulnerable to this tuberculosis in crowded conditions. When areas with high household crowding are considered, tuberculosis rates increased 25-fold for the youngest age group (0-4 year olds). For all those diseases, rates are higher for Maori and Pacific people (Statistics New Zealand, 2003:62 – 79).

A small number of studies have identified an association between household crowding and non-infectious illness and injury, including mortality from myocardial infarction, and burns in children. One New Zealand study of cot death found that

while the risk of cot death increased with an increase in household density, this effect lost statistical significance when other risk factors were included in the analysis (Statistics New Zealand, 2003:61).

There is some international evidence that children's poor mental health is linked to poor quality housing, with both physical dwelling factors and crowding involved (Canada Mortgage and Housing Corporation, 2003; Statistics New Zealand, 2003:61; Clinton *et al*, 2005:13). Crowded conditions also adversely affect children's mental health through increased household noise. Background noise has been found to interfere with sleep, cause psychological stress, contribute to a reduction in cooperative behaviour and trigger aggressive behaviour (Licari *et al*, 2005:20). In New Zealand there is no systematic research into the relationship between mental health and crowding, although mental illness and stress symptoms are cited in several studies as being exacerbated by crowding and poor physical dwelling conditions (Statistics New Zealand, 2003:61). Nor is there any research that focuses directly on the mental health of children and crowding.

Issues identified by government and non-government agencies

Several of the government and non-government agencies interviewed for this report identified household crowding as a key health concern, including Child Youth and Family, Ministry of Health, Ministry of Social Development, Barnardos, Child Poverty Action Group and Plunket. The Ministry of Health noted that children are more likely to experience overcrowded conditions, particularly Maori and Pacific children. Plunket commented that their workers find it very difficult to promote health messages, such as stopping smoking, good nutrition and child safety in the home, when people are living in crowded conditions. In a situation where young parents are living with relatives it is difficult for them to have their own space and to control the behaviour of others in the household (e.g. smoking, or feeding children inappropriate food). Plunket also considers that crowded conditions are more likely to place children at risk of injury.

3.1.2 Dwelling condition and performance

The physical condition and performance of the dwelling can affect health in many ways, including structural condition, presence of mould, indoor temperature, and exposure to toxic substances. The greatest level of evidence for health effects of housing is for biological, chemical and physical exposures. These are the easiest factors to measure and they have well understood mechanisms of action. The strongest evidence for causal relationships exists for lead, radon, asbestos, allergens (e.g. house dust mites and cockroaches), and environmental tobacco smoke (Moloughney, 2004). The delayed development of infants and young children is thought to be affected by dwelling condition, as are illnesses due to foetal and early childhood exposures to biologic, chemical and physical agents within the home (Breysse *et al*, 2004; Jackson and Roberts, 2001).

Cold, damp and mould

The World Health Organisation recommends that 20 degrees C should be the minimum domestic air temperature for the very young, the very old and for people who are ill or disabled. Temperatures lower than 16 degrees C appear to impair respiratory function, while temperatures below 12 degrees C affect the cardiovascular system (Saville-Smith *et al*, 2006). As section 2.3.3 shows, New Zealand houses have lower temperatures in winter than houses in other countries with similar climates, and many houses fail to achieve the WHO minimum indoor temperature range.

Dwelling performance has a negative impact on health through cold and damp conditions. Condensation, damp and mould are associated with low temperatures, and dust mites are also known to be associated with damp houses. Damp and mould are associated with a range of illnesses including allergies, asthma, chronic obstructive pulmonary disease, inflammatory disease, gastroenteritis and other infections (Bonnefoy *et al*, 2004; Clinton *et al*, 2005:12).

There is increasing evidence both internationally and in New Zealand that mould growth in damp houses is an important risk factor for asthma and respiratory illness. Although asthma is caused by both genetic and environmental factors, the link between poor quality dwellings and asthma is indicated, through chronic exposure to allergens in the indoor environment (Breysse *et al*, 2004; Clinton *et al*, 2005; Bonnefoy *et al*, 2004).

Indoor air quality

Indoor air quality is another aspect of dwelling condition and performance that can be affected by poor ventilation and inadequate cooking and heating systems. Overseas studies show that emissions of pollutants from using unflued gas cooking and heating appliances have been linked to respiratory disease, respiratory infections, increased susceptibility to asthma and changes in lung function (Bonnefoy *et al*, 2004). A major review by the US Institute of Medicine concluded that there was sufficient evidence that brief high-level exposure to NO₂ (one of the major combustion products of gas heaters), such as when gas appliances are used in poorly ventilated kitchens, is associated with increased airway responses among people with asthma to both non-specific chemical irritants and inhaled allergens (Institute of Medicine, 2000). A cohort study in Australia found that home gas appliance use was significantly associated with developing sensitisation to house dust mite and poor lung function tests (Ponsonby *et al*, 2001). Increased rates of wheezing in the first year of life of infants in homes using gas space heating has also been found (Triche *et al*, 2002).

There has been a marked increase in the use of unflued gas heaters in New Zealand over the last two decades. Currently underway is a study of the health effects of indoor air quality, including the use of unflued heaters, in 400 houses. Otago School of Medicine and Massey University are undertaking this work, which includes a financial contribution from the LPG Association. Results from the study are expected by the end of 2007.²¹

Tobacco smoke affects indoor air quality and has been identified as harmful to health, particularly the health of children. Children are more likely to be affected by smoke as they have smaller airways, higher respiratory rates and immature immune systems. Second hand smoke is one of the most common indoor pollutants and is by far the leading cause of preventable deaths in New Zealand (Woodward and Laugesen, 2000). Poor ventilation can exacerbate the effects of tobacco smoke.

Overseas studies show that health effects for children that are linked to tobacco smoke include asthma, sudden infant death syndrome (SIDS), bronchitis, pneumonia and other respiratory diseases. Tobacco smoke has also been linked to adverse effects on the developing foetus (Bonnefoy *et al*, 2004). One New Zealand review of exposure to second hand tobacco smoke reported that over 250 deaths per year are attributable to second hand smoke exposure at home. That review also reported two national surveys of years 10 and 12 students, which found over 30 percent were

²¹ Information about this study provided by the Ministry of Health.

exposed at home to tobacco smoke (Thomson *et al*, 2005). Woodward and Laugesen (2000) estimate that those 250 deaths include 50 infants from cot death. They also estimate that second hand smoke causes more than 500 hospital admissions of children under two years old with chest infections, almost 15,000 episodes of childhood asthma, 1,500 hospital admissions for glue ear and more than 27,000 GP consultations for asthma and other respiratory problems in childhood.

Unintentional injury

Children's unintentional injuries in the home can be linked to such factors as structural defects, poor design, poor maintenance, insufficient lighting and lack of gates (Breyse *et al*, 2004; Bonnefoy *et al*, 2004). Falls are a leading cause of home injuries in children. Unintentional injury in the home is especially high for babies and young children up to four years of age, as they spend most of the time in the home.

Impacts of improved dwelling condition

The benefits of addressing problems of house condition and performance can be seen in the outcomes of HNZC's Healthy Housing Programme, a collaborative initiative involving HNZC and the three Auckland District Health Boards. Evaluation of the programme found a number of positive outcomes for HNZC tenants. Focused on joint health and housing objectives, the programme's main interventions included addressing house condition, performance and crowding. Actions included design improvements, extensions to accommodate the size of the family, installing insulation, ventilation and energy efficiency heating systems, as well as referrals to health and social services and transfer to another house, where required. Overall positive results reported were a reduction in illnesses such as asthma, improved comfort in the home and improved sense of wellbeing. The strongest connection made between the programme and tenants' health referred to psychological and social dimensions of wellbeing, such as reduction in stress, increase in happiness and connection to family (Clinton *et al*, 2005:8).

Data from a randomised control study of 1350 New Zealand households that received insulation found an increase in indoor temperature, and decreased relative humidity. Self-rated health improved, with reductions in reporting of wheezing, visits to the doctor, and residents taking days off school or work. This study concluded that fitting insulation in programmes, which focus on lower income communities and poor quality housing, have the potential to reduce health inequalities (Howden-Chapman *et al*, 2007). Some qualitative evidence of the health and wellbeing benefits from insulation is available from an evaluation of a retrofit insulation programme in the Eastern Bay of Plenty for low income households. Participants in the evaluation reported increased comfort, increased wellbeing and an increased sense of health. Families reported socialising longer together in the evenings, inviting visitors, and perceived reductions in cold and flu, asthma attacks in children, reduced coughing, and reduced visits to the doctor. One family that home schooled their children reported starting lessons earlier in winter because of the warm house (Saville-Smith *et al*, 2001).

Issues identified by government and non-government agencies

Those government and non-government agencies that identified dwelling condition and performance as a determinant of health included the Ministry of Health, Child Youth and Family, Ministry of Social Development, HNZC, Children's Commissioner, Barnardos, Child Poverty Action Group and Plunket.

Child Youth and Family noted that crowded, cold and damp conditions of placement homes are of concern. Similarly, when returning children to their parental homes, having suitable housing is part of the plan, however this can be difficult for some families to achieve because of affordability. Plunket pointed out a range of dwelling problems that they consider results in children's poor health, including mould and damp, cold indoor environment, use of heating appliances that degrade air quality and pose safety risks, and unsanitary and inadequate bathroom, washing and rubbish disposal facilities. HNZA would like to see national measures of housing quality established.

The Ministry of Health identified poor dwelling condition and performance as having major impacts on children's health, noting that children are particularly prone to accidents in the home, such as burns, falls and poisonings that are due to domestic hazards. Those hazards are often related to the dwelling structure or materials, such as lead paint. The Ministry noted that there is growing societal concern about the health burden posed by relatively high asthma prevalence rates in New Zealand; asthma is associated with poor indoor air quality. The Ministry also commented that, as far as they are aware, there is no published research on the health impacts of children's exposure to illegal drug manufacture in homes ("P" labs). This is a relatively new problem, but a burgeoning one with significant public health risks as contaminants from the manufacturing process penetrate indoor surfaces and pollute indoor air. In the worst cases, exposure to the toxic fumes and wastes generated can be fatal. Young children are particularly vulnerable, partly because of their lower tolerance to chemical exposure, and also because they are more likely to come into contact with contaminated surfaces through crawling and putting objects into their mouths.

Unmet housing needs of disabled children and young people, including unmet needs for housing modifications, were identified as priority issues by the Ministry of Health and Office for Disability Issues. It was noted that lack of home modifications may not only directly affect a child's disability or health, but also contribute to stress on the caregiver as well as negatively impacting on the child's long term development. The Ministry of Health noted that, in general, a higher proportion of disabled children live in areas with a high NZ Deprivation Index, compared to children without disability, and that Maori and Pacific disabled children are particularly likely to live in areas of high deprivation. Consequently, those families are also likely to have other housing problems relating to affordability and housing quality.

3.1.3 Negative health impacts of homelessness

Canadian research indicates that homeless populations have a much greater incidence of poor health and illness, including musculoskeletal problems, chronic breathing problems, headaches, seizures, arthritis, asthma and high blood pressure. There is evidence that homeless children have poor nutrition, which affects their growth and development (Public Health Agency Canada, 2002; Cooper, 2001:10).

United States studies show a high incidence of asthma and other respiratory problems, trauma-related injuries, tooth decay, delayed immunisations, ear and skin infections and conjunctivitis among homeless children (Cooper, 2001:9). Other United States studies of homeless youth have found that they are more vulnerable to untreated health disorders, drug abuse, and are at high risk of contracting sexually transmitted diseases. They also lack adequate food (Fernandes, 2007).

While many studies do not distinguish between mental health disorders present prior to homelessness, and disorders resulting from homelessness, nevertheless, there is

some international evidence that homelessness can affect the mental health of children and young people. Poor housing can both lead to the development of mental health problems, and exacerbate existing mental health conditions. A comprehensive New Zealand overview of international literature pertaining to housing and mental health noted that failures in housing provision are associated with subsequent deterioration in mental health state. Many studies have concluded that housing is critical to assisting recovery from mental illness (Kell and Peace, 2002).

There is Canadian evidence that homeless children experience more anxiety, depression and behavioural problems than poor housed children (Cooper, 2001:10). Similarly in the United States, Zima et al (cited in Kell and Peace, 2002:19) noted the exposure of homeless children to severe psychosocial stressors. Acute homelessness and high residential instability were found to be related to child depressive symptoms, suggesting that homeless families should be conceptualised as two generations at risk of mental health problems.

Australia has a growing literature on the impacts of homelessness on children's and young people's mental health. A review of literature on psychological distress and psychiatric disorders among youth in Australia concluded that homeless youth scored significantly higher on standardised measures of psychological stress, than housed youth. Rates of psychological disorders were also high. Some youth homeless studies have also reported high rates of youth suicide (Kamieniecki, 2001). Another Australian study found that, once homeless, for the majority of young people, there is an increase in the number of psychological diagnoses including drug and alcohol diagnoses (Martijn and Sharpe, 2006). Other Australian research has found that homeless children often experience psychological problems, with anxiety being the most common (Mission Australia Research and Social Policy Unit, 2000). Various Australian reports have indicated improvements in children's behaviour, mental health and family relationships that are attributed to stable housing (St Vincent's Mental Health Service and Craze Lateral Solutions, 2005).

Kell and Peace (2002) observed that there are only a small number of New Zealand studies on the impacts on homelessness on mental health. They commented that very little New Zealand material on housing and mental health focuses on the experiences of specific groups, such as youth. Nevertheless, several of the government and non-government agencies interviewed for this report identified homelessness of children and youth as a key issue, with health problems being identified as part of a range of issues confronting them.

3.1.4 Affordability

Housing affordability affects health in several ways. Excessive housing costs reduce the amount able to be spent on other factors contributing to health such as food and recreational activities (Public Health Agency Canada, 2002; Greater Minnesota Housing Fund, 2004). Cooper (2001:7) reports that studies in Canada and the United States have determined that the high cost of housing contributes to food bank use. Both unhealthy diets and lack of physical activity have been identified as major risk factors for obesity (Licari *et al*, 2005).

No research on the effects of affordability on New Zealand children and young people was identified. Those government and non-government agencies that identified housing affordability as impacting on children's health included Child Youth and Family, the Children's Commissioner, Families Commission, HNZA, Ministry of Social Development, Ministry of Youth Development, Office for Disability Issues, Barnardos, Child Poverty Action Group, Plunket, Salvation Army and NCIWR.

Child Youth and Family noted that many families they work with are experiencing problems with debt due to unaffordable housing. The Children's Commissioner commented that unaffordable housing often resulted in families staying with other families in crowded conditions. The Families Commission reported that unaffordable housing has been identified in their consultations as a factor in families' financial stress. Callers to the Commission have voiced concerns about high rents and rising building costs. Especially affected are low-income families and sole parents. HNZC noted the variation in local housing markets with regard to both affordability and supply. The Ministry of Social Development commented on difficulties for families entering home ownership in sustaining mortgage payments and meeting housing outgoings such as insurance and maintenance.

3.1.5 Tenure, tenure security and residential movement

The international literature has explored links between tenure security and health in several ways:

- The health and wellbeing advantages of those in home ownership relative to those in rental tenure.
- Comparison between the health and wellbeing effects of public and private sector rental housing.
- Negative health impacts of tenure insecurity.
- Negative health impacts of residential movement.

The health advantages of those in home ownership have been noted in several studies, although the relative effects of home ownership and socio-economic status are often difficult to separate (Cooper, 2001). Studies have shown home ownership to be associated with lower all-cause mortality, better cardiovascular health and other beneficial health outcomes (Milligan *et al*, 2006:115). However, Rohe *et al* (2001:22) point out that the limited amount of research on home ownership and health indicate a positive association, only as long as the home owners are up to date on their mortgage payments.

One Australian study found that secure tenure in public housing has led to residents reporting improved health. This appeared to be due to several factors, including better kitchen facilities that helped residents to prepare meals more easily and a move away from crowded conditions (Phibbs, 2005).

An extensive New Zealand study involving approximately 225,000 HNZC applicants and tenants that linked HNZC data to hospitalisation data from 2003 – 2005, provides information on the possible positive health effects of public rental housing (Baker *et al*, 2006)²². That research found that both HNZC tenants and applicants had very high rates of recorded contact with the hospital system. However, the conditions of public tenancy appear to be healthier:

- HNZC tenants had lower levels of crowding (23.6 percent) than applicants (46.1 percent), although both groups were far higher than the crowding level of the New Zealand population (5.1 percent).
- Applicants had significantly higher rates than HNZC tenants for some diseases, particularly infectious, parasitic and respiratory diseases.

²² The authors state that the findings need to be interpreted with considerable caution. In particular, the finding that some disease has higher rates in either applicant or tenant populations does not necessarily imply a causal association. Future analyses will consider whether a change in housing status is associated with a change in health status.

- Hospitalisation rates declined after the first year of HNZN tenancy. The decline was most marked for intestinal infectious diseases, acute bronchiolitis and chronic obstructive pulmonary disease. A decline was also evident for asthma.
- Household crowding was a factor in hospitalisation for HNZN tenants – hospitalisation rates were significantly higher for tenant households classified as crowded. But in contrast, applicants, whether or not they were in households classified as crowded had similar high hospitalisation rates.

Insecure tenure is assumed to lead to frequent residential movement, which in turn increases stress in parents and children and loss of social networks (Lewis, 2006; Clinton *et al*, 2005). Both New Zealand and overseas studies have found that high residential mobility disconnects people from health services and is associated with disruption to children's immunisation and health check up schedules (Milligan *et al*, 2006:116; Bartlett, 1997). A study of youth in Counties Manukau found that residential movement resulted in disengagement from services including school and health services (Fleming, 2006). This study found that most young people out of systems have multiple and complex health problems including substance abuse, mental health issues, sexual health issues and disabilities or chronic illness.

The main agency that identified residential movement as having an impact on health was Plunket, which considered that frequent movement contributes to stress in families and as a consequence can negatively affect health of parents and children. Plunket also observed that frequent movers lose contact with local services, including health professional and schools.

3.2 Education Outcomes

There is a less extensive literature on the links between housing and educational outcomes than there is on housing as a determinant of health. Findings about housing effects on educational outcomes appear to be less certain about causal associations. Research on housing and educational outcomes focuses on the following main areas:

- The effects of poor quality housing on children's learning (quality includes crowding and dwelling condition and performance – these are often not separated out for analytic purposes).
- The link between tenure insecurity, consequential residential movement and educational achievement.
- The effects of homelessness on school attendance and educational achievement.
- Whether the neighbourhood environment may affect educational outcomes.

Government and non-government agencies commenting on the effects of housing on educational participation and achievement included the Ministry of Education, Ministry of Health, Ministry of Youth Development, Child Youth and Family, the Children's Commissioner, Office for Disability Issues and Child Poverty Action Group. Their concerns were mainly around tenure insecurity as a driver of frequent residential movement and resulting impacts on school attendance and educational achievement.²³ Another concern was the impacts of crowding and house condition on learning. The Ministry of Education identified a general perception that five or more moves during a child's schooling is deleterious to children's learning. The Ministry also noted that the level of educational resources in the home, and children's access to community facilities could affect learning.

²³ The Children's Commissioner is holding a forum on student mobility on 1 May 2007 to explore the issue in more depth.

Two studies undertaken for the Ministry of Education focus on the link between a child's environment and educational outcomes (Nechyba *et al*, 1999; Biddulph *et al*, 2003). Both studies synthesise a range of international and New Zealand research that consider family, parental, neighbourhood and community factors. Nechyba *et al* (1999:2) cautioned that observed correlations do not necessarily imply causal relationships. For neighbourhood effects, they found that evidence is unclear, little is known about these effects and they are difficult to quantify. Nevertheless, they commented that there seems to be increasing consensus around the premise that broader neighbourhood effects related to residential, ethnic and cultural communities are important for children's outcomes. Building on this work, Biddulph *et al* (2003 iii-v) concluded that:

- material resources available within families are linked to children's achievement, e.g. space for study facilities;
- frequent mobility may be detrimental to child outcomes; and
- community factors such as social networks and access to local services and facilities can enhance children's achievement.

3.2.1 Crowding, dwelling condition and performance

Many studies that consider housing effects on education look at housing quality, although they do not separate the effects of household crowding from those of dwelling condition or performance.

Canadian longitudinal data collected through the National Longitudinal Survey of Children and Youth (NLSCY) suggests a correlation between housing conditions and educational attainment²⁴. Only 68 percent of children aged 4 – 11 years living in insufficient housing (defined as a dwelling that is both crowded and in need of repair) do well in school, compared to three quarters of children in adequate housing. The same data set reveals significant differences between well and poorly housed children on some measures of social engagement (Cooper, 2001:13).

International research suggests that having a range of home resources, both human and material, make a positive difference for children's learning. Home resources include having space and a quiet area to study. Such resources are difficult to achieve in a crowded household. The Ministry of Social Development's indicators of children and young people's wellbeing include household crowding, which is used as an indicator of whether children are growing up in physical conditions that support their development. The indicator report states that children and young people need a dedicated quality space at home for quality learning (Ministry of Social Development, 2004:120).

Two large international studies in which New Zealand participates – PISA and PIRLS²⁵ – collect data on home educational resources and relate those variables to achievement. The home educational resources variables include several that relate to dwelling space: a study desk/table for the student's use, a room of the student's own and a quiet place to study²⁶. The 2001 PIRLS assessment of reading literacy of 10 year olds found that a higher mean reading achievement in New Zealand was positively associated with the level of educational resourcing in the home, including a

²⁴ The National Longitudinal Survey of Children and Youth (NLSCY) follows a large representative sample of Canada's children from birth to 25 years of age. Data collection started in 1994 (Cooper, 2001).

²⁵ PISA (Programme for International Student Assessment); PIRLS (Progress in International Reading Literacy Study).

²⁶ The other educational resource variables include books in the home, computer, television, access to the internet, musical instruments.

place to study, as well as parents' highest level of education (Caygill and Chamberlain, 2004:5). PISA 2000, a study of 15 year old students' reading literacy, found that overall there is a strong link between achievement and having home educational resources, such as a quiet place to study and a desk for study. This is the case, irrespective of gender or ethnic background. The PISA report noted that similar results of other studies reinforce the importance of students having access to a quiet place to study and other tools to support their learning (Research Division, 2002:8).

Apart from those international studies in which New Zealand participates, there is only fragmentary New Zealand information about the effects of housing on children and young people's learning. The AIMHI (Achievement in Multi-cultural High Schools) project carried out in eight low decile schools with predominantly Maori and Pacific students described living conditions of students with few or no facilities to do their homework, such as having no desk or private space where they can work uninterrupted. That project cited poor housing, overcrowding and lack of private space as among the factors detrimental to learning, and asserted that high residential mobility is disruptive of learning (Hawk *et al*, 1996). The Youth 2000 study reported that more than 1 in 10 Maori youth did not have enough space to do their homework (Adolescent Health Research Group, 2004:18).

These studies do not differentiate between the effects of different types of home educational resources; nor do they explore the links between educational performance, home educational resources and family wealth. Also, it should be kept in mind that, although home educational resources appear important for achievement, evidence indicates that meagre home resources can be supplemented (Biddulph *et al*, 2003).

3.2.2 Tenure, tenure security and residential movement

The international literature suggests that frequent residential movement may be detrimental to children's school attendance, to their learning and to their educational achievement (Dechman, 2003; Greater Minnesota Housing Fund, 2004). There is evidence that children who attend four or more schools by age 10 seem to achieve less well than others on some academic and social measures (Biddulph *et al*, 2003:iv). Large quantitative studies in the USA and Canadian NLSCY data have found that frequent moves are strongly associated with lower attendance rates, repetition of grades (years), school suspensions and expulsions, and emotional and behavioural problems (Cooper, 2001:15; Stutzky *et al*, 2001; Family Housing Fund 2001). Other studies also suggest that constant shifting due to inadequate housing causes disruption to children's education, makes it difficult for them to maintain social relationships and acts as a barrier to re-registering in schools (Bartlett, 1997).

Home ownership is considered to be a key factor in tenure security and thereby in reducing residential movement. Haurin *et al* (2001) found in their analysis of a USA national data set that home ownership leads to 13 – 23 percent higher quality home environment (*ceteris paribus*). Home environment was measured by indexes of the cognitive support/physical environment and the emotional support of children in the household. They found that children of home owners scored higher in maths and reading, and had fewer child behaviour problems compared to children of renters. They commented that home ownership contributed to a higher achieving population, through its contribution to improving child cognition. Some other large British and USA studies have also found that children of home owners perform better on reading and maths tests, and are less likely to drop out of school (Rohe *et al*, 2001:21). Boehm and Schlottman (1999) using the USA Panel Study of Income Dynamics data,

found that the average child of home owners is significantly more likely to achieve a higher level of education, and thereby a higher level of earnings. Other research suggests that by stabilising residence in one place, homeownership may positively affect student's educational performance and reduce behavioural problems (Cooper, 2001:15). It has also been observed that home ownership equity is an important means by which families can finance higher education for their children (Greater Minnesota Housing Fund, 2004).

Lewis's Australian research argues that tenure security, particularly of home owners and public housing tenants, assists family stability by reducing residential moves. In turn, "Residential stability enables people to feel more in control, settled, less stressed, and gives people the 'mental room' to focus on longer term goals such as family relationships and children's education" (Lewis, 2006:3). She further noted that high levels of residential movement are associated with poor educational performance and reduced completion of secondary school. Another Australian study (Phibbs, 2005) attributed improvements in children's educational performance to secure tenure in public housing. The educational benefits of such housing were identified as a better quality dwelling, decrease in residents' stress and having a quiet place to do homework.

The rates of student movement reported in New Zealand are a good deal higher than those found in overseas studies (Gilbert, 2005:14).²⁷ The Competent Children Study²⁸ found that 69 percent of children had moved house at least once by age 12 (Wyllie, 2004). New Zealand's 2001 census showed around a fifth of primary aged children moved in the 12 months prior to the census (reasons for movement were not explored).

The New Zealand literature on highly mobile students²⁹ and the effects of movement on their schooling consists of several small studies, some attempts at measuring national movement rates, and some information on how schools view highly mobile students. Although methodologies are debated and findings across studies are not consistent or comparable, it appears that some communities and schools experience very high movements of students. All studies have found high student movement rates to be linked to low socio-economic areas (Gilbert, 2005:16). With regard to the implications of residential movement for educational participation, Fleming's (2006) study has estimated that at least 500 young people in Counties Manukau are not in any form of education. Most are likely to be 13 years or older, however, some are as young as eight years old.

Very few New Zealand studies have specifically examined the role of housing as a driver of movement, although several give some insights. The Education Review Office's (ERO) study of 397 schools in 1996 – 1997 included investigation of attendance, truancy and frequent changes of schools. The report noted that by far the majority of primary and junior secondary school students leaving a school during the year did so because of family relocation. In particular, a change of primary

²⁷ Gilbert (2005:24) cites a comprehensive United Kingdom study which found average student mobility rates of between 10 – 20 percent for primary schools and between 8 – 10 percent for secondary schools. A minority of schools have mobility rates in excess of 20 percent.

²⁸ This study is a longitudinal one that has followed 500 Wellington region children from age five.

²⁹ In New Zealand there is no officially agreed on term referring to student mobility. The most common term used to describe students moving schools is 'transience', and this term has negative connotations as it is used to refer to students who move schools often enough to disrupt their progress. (Gilbert, 2005:9).

caregiver triggers a move. This is often as a result of parental separation, changes in custody arrangements or a move to other care arrangements in the wider family, or through Child Youth and Family. Schools also reported families moving in search of cheaper housing and for work opportunities. Only a small number of students left specifically to attend another school. A further ERO report on transience in 2007 that focused on 11 primary schools identified housing problems and domestic changes as common reasons for families moving (Education Review Office 2007).

Johnson's (2002) survey of South Auckland Primary schools attributed students' residential movement to insecure tenure and saw families' frequent shifts as a strategy to manage unaffordable rents and household debts. That study found that teachers identified a core group of very mobile children and believed that residential mobility was increasing. Gilbert (2005:64) collected information on principals' perceptions of why students moved a lot. Housing reasons were important; many families were moving to find a better or cheaper house. Associated with this was movement related to debt. Other significant reasons were to do with family circumstances, such as illness of an extended family member, returning to a family home, or family break-up. Principals in three of the areas that have substantial proportions of Pacific or Maori families observed student movement independent of their families. This was concerned with families sending children to live with other relatives.

Although several of the studies suggest that residential movement affects educational attainment, and record teachers' and principals' perceptions of the impacts of movement on attainment, very few have analysed achievement data in relation to residential movement. The ERO (1997) report commented that frequent changes of school and interrupted attendance can create learning difficulties. ERO found that in some cases, changes of school results in students not picking up essential skills. The report noted that transient students have low levels of attendance and may have special learning needs, such as the need for reading assistance, that are exacerbated by their intermittent schooling. In particular, the report commented that principals regard "high levels of transience" as a "significant reason for student failure". Asked to rate the extent to which student mobility is a barrier to children's learning in their school, 87 percent of teachers in Johnson's (2002) survey rated the situation in their school as 'very serious' or quite serious'. Teachers noted that sometimes students were unable to access remedial reading programmes because they had moved on before they were able to get on to the programme. No student achievement data was obtained in this study. Neighbour (cited in Gilbert, 2005:18) found that principals considered students who move frequently need a lot of extra support for their learning, and consequently schools need to provide extra resources for them, such as extra teacher time, teacher aides or counsellors. The principals reported that those students were commonly behind their peers in learning and often did not function well at school. Other recent studies of New Zealand primary school teachers have reported similar findings (Gilbert, 2005:19).

One study that linked attainment data with residential movement is the Competent Children study, which found that children's competency levels generally favoured those who had either stayed in the same house or moved only once or twice, compared to those who had moved five or more times (Wyllie 2004). This study found that children who moved house five or more times were more likely to have lower average scores on maths and social skills with peers. However, the study concluded that a high level of maternal qualifications and family income appear to be buffers to high residential movement. The most comprehensive study of students' residential mobility and attainment data is Gilbert's (2005:73) conducted in four

communities,³⁰ where non-standard movement rates among the 20 schools studied ranged between 9 and 45 percent. Rates were higher in primary than secondary schools, and the low decile schools had similar rates to low decile schools in other areas of New Zealand. Because of the occupational basis of the area with medium-high decile schools (dairying), the rates in that area were higher than those in other decile schools in New Zealand.

Most of the principals interviewed thought that high student mobility is an issue for their school, for the local community and of the students involved (Gilbert 2005:62). Like in other New Zealand studies, these principals talked about the administrative load associated with dealing with students on the move, disruption to school programmes and routines, difficulties in children settling in and low motivation. Primary school principals emphasised the funding difficulties experienced when children with special needs arrive during the year. The principals also considered that educational performance did suffer, and thought it “unfair that the overall performance of their school is measured in ways that include the results of frequent movers” (Gilbert, 2005:63).

Gilbert also looked at data provided by the schools. When frequently moving students were compared with other students in the study schools, very few differences were found in educational attainment and attendance. There were differences in mathematics achievement and secondary school subject choice, but overall these differences were small (Gilbert, 2005:76). Gilbert cautioned that the numbers in the study were small and there were gaps in the data available. Nevertheless, she pointed out that findings are very similar to those of several overseas studies. In summary, high student mobility rates have implications for school management, planning and resourcing, but the direct effects on student achievement appear to be small. Furthermore, mobility effects may be compounded by other factors. Many of the children identified by principals in this study as highly mobile were also identified by them as having multiple needs (Gilbert, 2005:77).

3.2.3 Homelessness

Various overseas studies suggest that homeless children fare worse in education than other children in low-income families housed in more stable situations. Canadian research has found that, compared to poor housed children, homeless children have lower educational attainment (Cooper, 2001:17; Canada Mortgage and Housing Corporation, 2001). A USA study that compared homeless children with mobile children from low income families found that both groups had large proportions that were performing below grade level in reading and maths achievement, and that had behavioural problems. For both groups, the proportions exceeded those for other low income children (Ziesemer and Marcoux, 1994).

3.2.4 Housing, neighbourhoods and educational outcomes

There is extensive documentation in Canadian studies about children’s lowered educational attendance and attainment, which is attributed to neighbourhood environments characterised by drug dealing, crime and poverty. However, those studies have also shown that neighbourhood factors alone make up only a small part of the differences among child outcomes – stronger predictors of poor child outcomes are one-parent family structure and low socio-economic status (Cooper, 2001; Boyle and Lipman, 1998). Another Canadian study using national longitudinal data argued

³⁰ This project is part of the Building Attachment in Families and Communities Affected by Transience and Residential Movement. The four communities are Cannons Creek/Waitangirua, Opotiki, Kawerau and Amuri (North Canterbury).

that neighbourhood effects are significant for getting pre-school children ready for school, by influencing three competency areas: motor and social development, receptive verbal abilities and behaviour problems. They concluded that neighbourhood factors of affluence and cohesion were particularly associated with children's competencies. Neighbourhood effects remained significant over and above family characteristics (Kohen *et al*,1998). Pebley (2003) cites neighbourhood effects studies showing concentrations in poor neighbourhoods of lagging school performance and behavioural problems, although notes the difficulties of separating out neighbourhood effects from family characteristics and other environmental variables.

Nechyba *et al's* (1999) assessment of international literature noted that despite some suggestive findings, large statistical studies do not consistently suggest that living in higher socio-economic status areas tends to increase children's academic achievement. However, there is slightly stronger evidence of neighbourhood effects being important for secondary students, and of students in 'better' neighbourhoods more likely to stay in school. Also, the "Moving to Opportunity" experiments in the USA suggested that for the families who moved to high socio-economic status neighbourhoods, their children were more likely to complete secondary school and go on to tertiary education. Results also found significant reductions in children's behaviour problems.

But Nechyba *et al* caution that these findings may have no causal significance. Furthermore, Nechyba *et al* pointed out that almost without exception, the studies of neighbourhood effects they looked at did not include school variables, yet there is considerable empirical evidence, at least in the USA, that schools in poor neighbourhoods also tend to have fewer resources, including quality teachers. This is important because school factors are likely to be associated with educational outcomes for children and young people.

Biddulph *et al's* best evidence synthesis (2003:175) identified neighbourhood deprivation as having a negative impact in children's achievement, especially in early childhood, although noted that New Zealand data is inconclusive. However, they also suggested that community factors can support learning. For example:

- social networks that provide opportunities for children's learning, develop identity and sense of belonging and support parents in rearing their children;
- local community facilities and services such as libraries, health services and support agencies, that can enhance children's achievement; and
- collaboration between home and school can lift children's' achievement significantly (Biddulph *et al* 2003:v-vi)

3.3 Children and young people at risk: safety and offending

This section looks at children's and young people's safety³¹ and offending together, as much of the research on these areas notes the connections between these. There is an extensive literature on children's and young people's risk of maltreatment and exposure to violence in families and communities. Similarly, there is an extensive literature concerned with children and young people at risk of offending. There is much less research on the effects of housing on children and young people's safety, and on their likelihood of offending.

³¹ Safety includes public and personal safety from crime, violence and abuse. Safety not only includes physical aspects, but also psychological and perceptual aspects. Safety includes the subjective feeling of being safe.

Those government and non-government agencies that identified links between housing and children and young people's experiences of maltreatment or being at risk of offending included Child Youth and Family, Children's Commissioner, Ministry of Education, Ministry of Health, Ministry of Social Development, Plunket, Salvation Army and NCIWR. Agencies commented on problems facing children and young people in unsafe neighbourhoods (where they are exposed to crime, aggressive or violent behaviour or negative peer group influences), and the importance of homes being connected to local services, social networks and facilities. Particular concerns were noted about young people's exposure through their housing, to unsafe situations and negative peer group influences, and their increased vulnerability to both victimisation and being caught up in offending because of insecure tenure or homelessness. These issues are further discussed in Section 4.

The literature discussed in this section is mainly concerned with overseas studies, as no New Zealand research examining the links between housing and children and young people's crime and safety outcomes was found. However, some insights into housing factors that increase children's and young people's vulnerability to victimisation or offending are provided by a few sources. The study of Counties Manukau 'out of systems' youth who were typically frequent movers indicated that as well as health problems, most of those young people have also experienced abuse and neglect and have behavioural problems (Fleming, 2006). One study of residential movement reported that social service organisations in Cannons Creek/Waitangirua noted that young people who have left Child Youth and Family care at 17 and are unsupported by either a family or community organisations have housing difficulties and are particularly vulnerable to getting caught up in offending or self-harm (James, 2005).

Furthermore, NCIWR data show that women affected by domestic violence and their children are among those most vulnerable to homelessness. NCIWR commented that the lack of affordable rental accommodation is a key problem for women wanting to leave a refuge safe house or needing to leave an abusive relationship. Lack of affordable accommodation leads some women to remain in an abusive relationship or enter into an abusive relationship in order to get accommodation for their family. Such situations put the children as well as the woman at risk of violence. NCIWR also highlighted particular housing problems experienced by young women, who comprise an increasing proportion of women seeking refuge services³². Young single mothers often have no or a poor credit rating, which makes it difficult for them to access private rental accommodation.

The research discussed below identifies dwelling condition, household crowding, temporary housing, homelessness and the neighbourhood environment as possible determinants of child abuse and neglect, behavioural problems and offending.

3.3.1 Dwelling condition, crowding and temporary housing

The Canadian NLSCY data set reveals significant differences between well and poorly³³ housed children on some measures of social engagement, including poorly housed children scoring higher on involvement in property offences and aggressive behaviour. That research also noted evidence of links between housing problems and child neglect. It suggested that overcrowding makes it more difficult to practise good parenting, and has been linked to interpersonal conflicts, alcohol abuse, family

³² In 2005/06, 27 percent of women accessing refuge services were under 25 years.

³³ NLSCY refers to poor housing as a combination of factors such as quality, cost, tenure and stability.

violence and suicide (Cooper, 2001). Other research in two Canadian cities found that children's problem behaviour is significantly related to dwelling condition, particularly to the condition of the child's bedroom, the kitchen, living room, the main bathroom and overall condition of the dwelling's interior (Canada Mortgage and Housing Corporation, 2003).

British research has also made links between poor housing, victimisation and offending. One study of almost 7,000 families found that children living in acutely bad housing³⁴ were more likely than other children to have parents who have contact with police, and to have run away from home, as well as having poorer health and educational outcomes (Barnes *et al*, 2006). Another national survey of the involvement of over 14,000 secondary school students in crime, alcohol and drug misuse and other antisocial activities, found that poor housing was one of the key risk factors (Beinart *et al*, 2002). An in-depth study of youth in a disadvantaged Teeside neighbourhood found that changes in housing circumstances, as well as changes in family or work could either precipitate criminality or facilitate disengagement from crime and drug use (Johnston *et al*, 2000).

Links between housing problems and temporary placement of children into care has also been identified. A Toronto survey revealed that, while housing problems alone are not sufficient grounds to find a child in need of protection, in 18 percent of cases, the family's housing situation was one of the factors that resulted in the temporary placement of a child in care. Furthermore, housing problems were identified in a large number of cases as a key factor in preventing or delaying a child's return home from care (Cooper, 2001:9).

3.3.2 Homelessness

Various overseas studies linking homelessness with children and young people's victimisation or offending were found. In the United States, children in homeless families are regarded as particularly vulnerable to experiencing maltreatment, and to witnessing violence. In turn they experience emotional and behavioural problems including aggressiveness, anti-social behaviour, problems in bonding with the parent and sadness (HCH Clinicians Network, 2003). US studies of homeless youth report that they are particularly vulnerable to sexual abuse and exploitation, and to engaging in illegal activities for survival (Fernandes, 2007).

One Australian review of national and international literature on youth homelessness and mental health found that a lack of appropriate housing increased the likelihood of contact with the criminal justice system (St Vincent's Mental Health Service and Craze Lateral Solutions, 2005). Another Australian study also found that the involvement of young people in criminal activity was common following homelessness (Martijn and Sharpe, 2006).

3.3.3 Housing, neighbourhoods and safety

The international literature linking neighbourhood environment and child wellbeing outcomes is focused on the quality and habitability of the houses and neighbourhood context in which children live.

³⁴ Acutely bad housing was defined in the study as having more than one of the following three conditions present – temporary accommodation, overcrowded accommodation or accommodation in poor repair; or where one condition was persistent or severe.

The Canadian NLSCY data suggest that neighbourhoods in which poor housing is the norm show higher than average levels of violence, and higher rates of reported child abuse and neglect (Cooper, 2001). Another study of two Canadian cities found the general physical decay and deterioration of the neighbourhood was linked to children's problem behaviour. The study concluded that "as neighbourhood quality falls below average, behaviour problems rise rapidly" (Canada Mortgage and Housing Corporation, 2003:3). A review of literature noted that many studies link adolescent violence and violence in schools to neighbourhood conditions such as poor quality housing, high density housing and high rates of population turnover. These factors are assumed to decrease the likelihood of people getting to know their neighbours and thus reduce 'guardianship' behaviours such as monitoring child and youth behaviours and keeping an eye on neighbours' property (PMP Capstone Team, 2006:79).

While there is some international evidence that neighbourhoods do have an impact on child problem behaviour, the nature of those effects is not clear, and more research is needed to differentiate between family and neighbourhood factors than influence behaviour (Boyle and Lipman, 1998).

One of the main neighbourhood characteristics affecting child wellbeing is the real and perceived safety of the local area. If parents perceive that their neighbourhood is unsafe, they are likely to keep their children indoors, with consequent reduction in exercise, and consequences for child health. Sedentarism is considered to be a very strong causal mechanism in obese children and adolescents becoming obese adults (Bonney *et al*, 2004). Obesity is a known risk factor for major chronic diseases in adulthood including type 2 diabetes, cardiovascular disease, and cancer. Internationally, the prevalence of type 2 diabetes among children and adolescents is increasing (Bonney *et al*, 2004). As home and neighbourhood are viewed as critical sites by public health advocates to address nutrition practices and physical activity, the safety of local neighbourhoods is central to effective health strategies.

As well as health studies that highlight the importance of homes being located in safe neighbourhoods, there are a number of ecological studies of child abuse and neglect that attempt to identify aggregate characteristics of neighbourhoods that determine child maltreatment. Neighbourhood economic and support variables (such as poverty measures, low personal incomes, weak provision of neighbourhood services and lack of support networks) are generally considered to be characteristics of high-risk neighbourhood environments for child maltreatment. Housing factors also appear to play a part. Some studies have used housing-related measures such as housing quality, housing affordability, dwelling type or frequency of movement, to assess the likelihood of child maltreatment (Saville-Smith, 1999:8).

For example, Zuravin's Baltimore study (1989) found that the following housing-related neighbourhood characteristics were significant and independent correlates of child neglect: large percentage of single family dwellings³⁵; large percentage of families who had moved into the neighbourhood within the previous year; large percentage of vacant dwellings³⁶. (A large percentage of low income families was

³⁵ The study assumes that living in single family dwellings tends to isolate families from each other, and as a result, decreases the opportunities to develop informal support networks (Zuravin 1989:110). In contrast, others have found the single family dwelling variable a factor in areas with low-risk child maltreatment rates (Garbarino, 1985).

³⁶ Zuravin (1989:108) uses vacant dwellings as an indicator of inadequate family support. Other research has used vacant dwellings as an indicator of neighbourhood safety. Vacant

also a significant variable). The housing-related characteristics that were significant and independent correlates of child abuse were: single family dwellings, vacant dwellings. (A large percentage of low income families was also a significant variable). Other studies have pointed to the association of housing factors with high neighbourhood rates of child maltreatment, such as large proportions of newly arrived residents (Young and Gately, 1988) and high resident dissatisfaction with housing (Garbarino, 1985).

3.4 Becoming productive citizens: transitions to adult roles

The literature on youth transitions provides strong evidence on the essential role of housing in making successful transitions to adult roles that include financial independence, productive employment based on human capital developed through advanced education, household and family formation, homeownership and participation in society.

Pathways of young people to independence vary across cultures and countries. Prolonged residence in the parental home is characteristic of southern Europe, while in northern Europe and North America, transitional phases (living with flatmates or relatives), frequent shifts and high frequency of returns to the parental home are well documented (Holdsworth and Solda, 2002).

The overseas literature indicates that the pathway is not easy, even for young people well supported by families. A report on youth transitions in the United Kingdom observes that the period of transition from childhood to adulthood is becoming increasingly complex, difficult and risky (Social Exclusion Unit, 2005). It is complex because definitions of what constitutes adulthood are becoming more fluid, and for many the transition to adulthood extends over a long period, where they may be adult in one area, such as employment, but they may still live in the family home. The report noted that the pattern of a relatively early move from school into work and possibly family formation that was common in the past is now severely disadvantaging (Social Exclusion Unit, 2005:54). Those young people who 'fast track' through early school leaving risk unemployment or insecure and badly paid work. Early family formation is often typical of this group. Because of their financial vulnerability, they often cannot sustain their own household, and are also more likely to be at risk of problematic behaviour such as substance abuse and offending. Those who go through an accelerated transition are a significant minority in the United Kingdom; most young people are on a 'slow track' in tertiary education with delayed earning and family formation. Those young people are usually financially dependent on family, but for those without such economic support, their successful transition may also be at risk.

The Social Exclusion Unit points out that many services designed to support young people stop earlier than needed or are not well aligned with actual need. In particular young adults in their early 20s are often ignored by policy makers and are not being catered for by services. The report concludes that there are significant problems associated with arbitrary age boundaries for policies and programmes, there are relatively few support services to help young people make a successful transition, and those with multiple needs are especially vulnerable to falling through the gaps. The report warned that those young people who remain excluded from productive adult roles are likely to pass that exclusion on to the next generation. To assist

dwellings are vulnerable to dilapidation and graffiti, which are associated with residents' perceptions that a neighbourhood is unsafe.

successful transitions, the report identifies a need for stronger links between housing and other services (Social Exclusion Unit, 2005:77).

Many of these concerns were echoed in the interviews with government and non-government agencies. The critical role that access to suitable housing plays in successful transitions for all young people, not only those who are vulnerable or at risk, was identified by Child Youth and Family, Children's Commissioner, HNZC, Office for Disability Issues, Ministry of Social Development, Ministry of Youth Development, Barnardos, and the Salvation Army. They were mainly concerned with barriers to the achievement of personal and financial independence and inclusion in society. They identified housing support for at risk and vulnerable young people as a critical gap in services. Particular groups of young people who are vulnerable to exclusion from productive and fulfilling adult roles were identified: young people leaving care, disabled young people and homeless youth. In addition to those particularly vulnerable groups, there was a concern that young people in general (not just those at risk) are finding it increasingly difficult to access affordable and suitable accommodation, notably those in low paid jobs and in areas where rents are high.

3.4.1 A place of one's own?

In New Zealand, very little is known about the dynamics, drivers and barriers influencing young people's move out of their family home and the formation of their own households, although it appears that, like in the United Kingdom, most young people are on the 'slow track' transition. Young adults are now living at home longer, more are studying at tertiary institutions and delaying their entry into full time employment, and at the same time, marriage and childbirth are being delayed (Statistics New Zealand, 2006b:2). Proportionately fewer young people flat away from home than they did a decade ago (Housing New Zealand Corporation, 2005:26). While these general trends are apparent, there are clear differences within the youth population and an accelerated transition is experienced by some. For example, Maori women are more likely to have children at a young age and to cohabit than are non-Maori women (Statistics New Zealand, 2006b:2).

Both family and market factors are critical to assisting young people to make the move into their own accommodation. Families can play a key role in facilitating young people into housing, whether it is rental or owned (Holdsworth and Solda, 2002:6). Internationally, studies point out that intergenerational wealth transfers, particularly housing wealth, make up a large part of wealth of the next generation, and these have a significant influence on the ability of households to purchase a home. Those recipients of intergenerational wealth transfers achieve much higher home ownership levels (Arcus and Nana, 2005).

Key market influencers on successful transition include the availability of affordable rental stock (Holdsworth and Solda, 2002). One Australian study found that the single biggest housing problem for young adults is rental affordability (Burke *et al*, 2002). Similarly, a study of rural youth in England identified several major housing issues for young people. Financial barriers to accessing housing and the ongoing costs of running a home were significant. Other key issues were the availability of suitable housing, damp and cold housing, lack of availability of housing information and advice, and reluctance of landlords to rent to young people (Ford *et al*, 1997).

One New Zealand study also suggests that young people experience difficulties in accessing rental accommodation. The national landlords survey conducted in 2003 with 818 private sector landlords drawn from the tenancy bond database found that landlords explicitly identified young people as 'not preferred' tenants. They were

perceived to be unreliable and likely to damage property. Young men were especially disliked as tenants (Saville-Smith and Fraser, 2004). That study also found that large families and sole parent families were among the groups not preferred by private sector landlords.

Several government and non-government agencies interviewed for this report also identified negative perceptions and discrimination by private sector landlords as a major barrier facing young people. HNZA commented that youth transition to independent living is particularly difficult as they are generally low income earners faced with relatively high housing costs that leave them with little residual income. Most young people under 18 do not meet the criteria to be assisted through HNZA stock. Nor are community housing providers focused on the accommodation needs of young people; in part this is because there do not appear to be any funding sources to support the establishment of youth housing initiatives.

3.4.2 Housing to support successful transitions

Countries such as Australia and the United Kingdom appear to recognise the importance of housing assistance for young people, as part of supporting them to become responsible citizens. Studies suggest that a stable housing situation is essential for assisting young people to move from school into employment or further education (Johnston *et al*, 2000; Beinart *et al*, 2002). Housing is seen as a key issue in overcoming social exclusion.

Housing services are pivotal to making a difference, as often the first contact young people make with a social service is due to a housing need or homelessness (Social Exclusion Unit, 2005:22). Stable housing has been identified as an essential component in helping young people at risk of offending. A British report on reducing re-offending among young people found that 15 percent were lacking stable accommodation, being either in bed-and-breakfast accommodation, staying with friends, 'sofa-surfing' or sleeping rough. The report stated that the presence of stable accommodation can mean a reduction of more than 20 percent in re-offending rates. Lack of stable accommodation makes it very difficult for young people to engage in or benefit fully from programmes that are critical to their effective rehabilitation, such as entering education, training or employment, addressing substance misuse and addressing offending behaviour (Youth Justice Board, 2006).

An Australian review of national and international literature on homelessness and mental health identified a lack of stable housing as the most significant barrier to young people accessing drug and alcohol rehabilitation and mental health services (St Vincent's Mental Health Service and Craze Lateral Solutions, 2005).

3.4.3 Young people leaving state care

The need to better prepare young people for independent living after leaving state care is attracting increasing attention internationally. At least in the United States, there is a general view that many of the housing needs of young people leaving care remain unaddressed and that consequently their outcomes are poor. A national study of former foster youth found that one quarter have experienced homelessness (Fernandes, 2007). Initiatives are developing to provide more housing, education and training support to young people leaving care (Casey Family Services, 2001). In England too, housing has been found to play a big part in supporting a successful transition to adult roles and responsibilities. Research by the Social Exclusion Unit has shown that young people leaving care are particularly vulnerable to social exclusion and less likely to be involved in education, training and employment. One

study found that being in settled accommodation and having support with practical aspects of independent living was crucial to entering and remaining in education, training or employment (Allen, 2003).

In New Zealand, Child Youth and Family (CYF) has identified young people's transition out of state care as a priority policy issue. Evidence from CYF's work in the Transition from Care to Independence work stream has found that the lack of stable and affordable accommodation contributes to poor outcomes for young people leaving care. A pilot programme has highlighted that there is a major shortage of suitable and safe accommodation for young adults moving from care into independent circumstances. This group is typically vulnerable, at risk and with limited incomes. They are more likely to lack formal qualifications, have little family support and have higher risk of health and social problems. They often rely on temporary and transitional accommodation such as boarding houses. In such accommodation they are often exposed to people with multiple problems, which often places them in unsafe situations. Young people leaving care are also highly mobile. Some young people in the pilot have moved 3-4 times a year. Lack of secure tenure means that they have difficulty remaining in school, and addressing any personal issues they need to work on. Furthermore, young people leaving care are not well catered for in the rental market. They are often viewed unfavourably by private landlords, and there are limited circumstances in which HNZA may provide accommodation to people under 18 years. The CYF Transition from Care to Independence work stream is focusing on housing options for vulnerable youth as a priority area for improvement. It has identified a pressing need for supported accommodation that provides a range of services, including accommodation search. A supportive neighbourhood environment is also critical for this group.

One study of homelessness in Wellington has also identified the transition from CYF care as a gap in service provision. They observe "this is a critical point of intervention, as during this window, one could fall into homelessness, especially those young adults with complex needs" (Al-Nasrallah *et al*, 2005:50).

3.4.4 Disabled young people

There is a considerable overseas literature on the transition of young disabled people to independent living (e.g Hendy and Pascall, 2002; Stalker, 2002; Morris, 2002; Christophides, 2006). That literature points out the fundamental role of housing in supporting a successful transition for young disabled people. Some barriers they face include difficulties in finding information on housing, lack of appropriate housing and choice of housing (e.g supported housing options, housing with accessibility modifications), lack of finances and lack of accessible transport. They also find difficulties in combining personal assistance needs with suitable housing. Often, housing and social service providers are unaware of the specific housing needs of young disabled people and the special housing requirements of young people with high levels of support needs.

The Office for Disability Issues noted similar issues facing young disabled people in New Zealand. The Office reported that there are few advocacy and support services for young disabled people, there is resistance to supported housing in residential areas, and disabled people face considerable additional housing costs due to such factors as home modifications and health and safety compliance costs of community housing. The Office commented that young intellectually disabled and mental health service users are particularly vulnerable to homelessness and housing situations that place their personal safety at risk. Other issues relating to young disabled people mentioned by agencies were:

- Stress on family caregivers, especially where home modifications are lacking or are inadequate.
- Complex issues confronting young people wishing to move away from home, when they need a support package and appropriate housing.

There is very little New Zealand research on the housing needs of disabled young people. A recent study on the housing needs of disabled people included young people, who identified that they need a range of supports if they are to achieve their aspirations to live independently as adults. Appropriate housing is critical for their transition to independence, but it is not the only requirement. Young people and their parents noted that personal assistance needs, in some instances for overnight care, complicate options for living independently. Also noted was that the young disabled adult may want to remain in the parental home somewhat longer than their non-disabled peers (or not leave at all), but that this does not mean they wish to forego independence within the family environment. Attaining a greater measure of independence within the parental home may require specific and additional house modifications, such as modifications to kitchen benches or automatic doors. Some young people and their parents spoke of living in small towns where accommodation options for disabled people are very limited; in a few instances families had been told to look at a rest home as an accommodation option for their young person (Saville-Smith *et al*, 2007a).

3.4.5 Homeless youth

Internationally, homeless youth have been identified as one of the most vulnerable and marginalised groups. A recent report to the US Congress emphasised that homeless youth are particularly at risk of becoming disconnected from community services, housing, employment, education/training, financial assistance or emotional support. These so-called “disconnected youth” and their expected poor outcomes in adulthood are an emerging concern among US policy makers.(Fernandes, 2007).

A number of other countries have also identified increasing youth homelessness as a critical social issue, and key priority area for housing assistance including Australia (Chamberlain 2004; Beer 2006; Chamberlain and McKenzie 2002) and the United Kingdom (Communities and Local Government, 2007). A national inquiry into youth homelessness has recently been set up in Australia to examine why youth homelessness continues to be a problem and to identify actions to address the problem. The inquiry expects to make its findings public in September 2007.

Some insights into the movement of young people are provided by a current FRST-funded research project on residential movement. In that study, residents in three areas, Cannons Creek/Waitangirua, Opotiki and Kawerau noted the movement of young people into the area and circulating around the area (James, 2005). While such movement was often a decision made by the family and the young person stays with family or friends, in other situations, young people have no fixed place of abode. Organisations working with young people in Cannons Creek/Waitangirua identified a small proportion of very mobile youth who are not linked into any stable family base, education/training or employment. Sometimes they are moving around to escape unsafe home environments. In both Opotiki and Kawerau, considerable movement of young people independent of their families was noted. This involved not only local youth moving around families and friends, but also young people from out of town moving in with friends or relatives. Even within the course of a week, a young person may stay in more than one house. Some of these young people are not enrolled at school, or attend only infrequently. Some are vulnerable to violence and abuse. In

Kawerau lack of emergency accommodation for young people was identified by local social service providers as a big gap.

One study of homelessness in Wellington noted a need to provide services specifically for young people experiencing homelessness, because if their needs are not met, they will comprise the future homeless population (Al-Nasrallah *et al*, 2005).

The Children's Commissioner noted that a range of young people find it particularly difficult to access safe and suitable housing, including young people leaving state care, young mothers under 18, unaccompanied young people in the refugee population and young offenders leaving institutions. Youth homelessness was identified as a largely 'hidden' problem, evidenced by the circulation of young people around the houses of friends and relatives. The Ministry of Youth Development identified similar vulnerable groups. The Ministry also noted issues affecting young people in general seeking accommodation, such as the reliance on potentially unsafe accommodation such as boarding houses, landlord discrimination and exploitation, lack of parity between the student accommodation benefit and the Accommodation Supplement, and legal problems faced by under 18 year olds wanting to take on tenancies. The Salvation Army further identified young mental health service users, young women and young people unconnected to services as experiencing housing problems. The Salvation Army noted the need for supported living programmes for at risk youth, and observed a general lack of funding for the non-government sector to provide accommodation for young people.

4. Critical Housing Issues and Knowledge Gaps

This section outlines the policy issues and knowledge gaps relating to children, young people and housing that have been highlighted by the government and non-government agencies interviewed for this report. It then suggests two research priority areas.

A range of policy issues have been identified through the research presented in this report, and the interviews with government and non-government agencies. These are:

- Housing experiences impacting differently on children and young people, compared to adults in the household.
- The need for housing interventions to meet the needs of children and young people that are distinct from the needs of adults in the household.
- Housing issues for young people, either living on their own or in groups.
- Housing assistance needed by children and young people who are younger than 18 years and who are not or cannot live with adults or caregivers.
- Housing affordability for young people.
- A lack of understanding of, and responses to, homelessness among children and young people.
- Access to housing for vulnerable young people who are already marginalised and who may not have support from family.
- The voices of children and young people are missing from policy and service design.

The government and non-government agencies interviewed for this report see research and information as important for policy development, service planning and advocacy purposes. There is interest in:

- Generation of a body of New Zealand research on children's and young people's housing experiences and needs that is relevant to policy development and implementation.

- Generation of a strong New Zealand evidence base on the housing determinants of positive outcomes for children and young people.
- Analysis and evaluation of overseas and (where they exist) New Zealand policies and programmes to establish what are effective responses to children's and young people's housing issues.

Overall, agencies were concerned that children's and young people's perspectives on housing are missing from research and policy. It is not only that most data and research is focused on the household or family level, rather than analysing specific housing effects on children or young people. Most importantly, children's and young people's voices seldom emerge. A seminar on developing a New Zealand research agenda for children advocated for children's voices and rights to be more clearly linked into the design and implementation of research (Smithies and Bidrose, 2000:51).

The issues and knowledge gaps identified by the agencies re-iterate those raised in public meetings and submissions on the New Zealand Housing Strategy (Gravitas Research and Strategy Limited, 2004). Overall, the submissions identified secure housing as essential to the physical and emotional wellbeing of children. Children were seen as over-represented in negative outcomes from poor housing, and particularly vulnerable to unsafe housing and neighbourhoods. It was also considered that children's housing needs were not at the forefront of planning, nor given priority. Specific youth issues identified were: impact of student loans on housing choices; and lack of accommodation for young people in smaller cities and rural areas. There was a call for more research to better understand the housing needs of young people.

Young people's housing is a particularly critical area where government and non-government agencies identified knowledge gaps, and following on from that, a lack of funding and programmes to address issues. While it was identified that young people in general face housing problems, young people particularly vulnerable to inadequate and unsafe housing, and incipient homelessness were identified as including:

- young people leaving state care
- young mothers, particularly those under 18 years
- unaccompanied young people in the refugee population
- young offenders leaving residential institutions
- disabled young people
- young people affected by domestic violence
- young people whose parents are on visitors or work permits
- young people unconnected to services.

Children particularly vulnerable to inadequate and unsafe housing were identified as including:

- disabled children
- children affected by domestic violence
- children whose parents are on visitors or work permits
- children in homeless families.

Issues and gaps are summarised below.

Infobox 2: Agency Identified Issues and Knowledge Gaps

Issues	Knowledge Gaps
Poor quality housing	<ul style="list-style-type: none"> ▪ Impacts of house condition and performance on health and wellbeing ▪ Unmet housing needs of disabled children
Tenure security	<ul style="list-style-type: none"> ▪ Impacts of falling rates of home ownership on children's wellbeing ▪ Impacts of security of rental tenure on children's wellbeing
Housing affordability	<ul style="list-style-type: none"> ▪ What is the relationship of housing affordability to family poverty and financial stress? ▪ Affordable rental ▪ Affordable home ownership ▪ Housing costs for large families, sole parents families
Safe and suitable housing and positive outcomes for children and young people	<ul style="list-style-type: none"> ▪ Housing factors that indicate need for early intervention ▪ Housing impacts on health ▪ Housing impacts on educational outcomes ▪ Housing impacts on good parenting practices ▪ Housing impacts on child safety
Housing, the neighbourhood environment and positive outcomes for children and young people	<ul style="list-style-type: none"> ▪ Safe environments ▪ Social connectedness of houses to neighbourhoods ▪ Resources and support networks for families ▪ Access to local services and facilities ▪ Family-friendly living environments ▪ Neighbourhood effects on educational achievement ▪ Characteristics of urban design and re-development to improve outcomes for children ▪ Housing density effects ▪ Effects of large concentrations of low income families in a particular area ▪ The relative impacts of poor housing and poor neighbourhood characteristics on outcomes
Housing programmes and services for women and children who have experienced family violence	<ul style="list-style-type: none"> ▪ How can housing services help overcome the cycle of violence and reduce intergenerational exposure to violence? ▪ International research and evaluation on effective policies and programmes and lessons learned that could be applied in New Zealand ▪ Stocktake and assessment of New Zealand initiatives
Impacts of frequent residential movement	<ul style="list-style-type: none"> ▪ What is frequent movement? ▪ What causes frequent movement? What are the housing drivers as distinct from other drivers? ▪ What are the consequences of movement for children and young people? E.g. <ul style="list-style-type: none"> ○ Health outcomes ○ Educational outcomes ○ Attachment to and participation in the community
Housing issues for rural families	<p>What are the housing issues faced by rural families?</p> <ul style="list-style-type: none"> ▪ Lack of affordable and suitable housing for families ▪ Lack of housing supply
Emergency and transitional accommodation suitable for families	<ul style="list-style-type: none"> ▪ Establish demand and supply

Families unable to access housing and other services	<ul style="list-style-type: none"> ▪ Who are affected? E.g. those on visitors and work permits ▪ How are they affected?
Youth transitions	<ul style="list-style-type: none"> ▪ Role of housing in facilitating participation of all young people in education, training, employment ▪ Barriers to all young people accessing suitable and affordable housing ▪ Impacts of housing circumstances on vulnerable and 'at risk' young people
Youth homelessness	<ul style="list-style-type: none"> ▪ Lack of data on homeless youth, including regional data ▪ Impacts of homelessness on educational participation ▪ Establish demand for <ul style="list-style-type: none"> ○ Emergency and transitional housing ○ Supported accommodation
Housing programmes and services that support vulnerable youth	<ul style="list-style-type: none"> ▪ International research and evaluation on effective policies and programmes and lessons learned that could be applied in New Zealand ▪ Stocktake and assessment of New Zealand initiatives

4.1 Addressing the Knowledge Gaps

The following research priorities have been identified, taking into account findings from the literature search and the policy issues and research/information gaps identified by government and non-government agencies. Two research streams are suggested. One focuses on young people, and the other on children.

Agencies have commented on the need for research on children and young people's housing to provide information for different ethnic groups, particularly on the experiences of Maori and Pacific children and young people. It was also noted that specific consideration of housing needs in areas with a high number of children and young people, such as South Auckland, would also be helpful.

In both streams, investigation of overseas and (where they exist) New Zealand policies, programmes and evaluations to establish what are effective responses to children's and young people's housing issues would be an essential part of establishing a strong knowledge base that is relevant to policy priorities. However, it should not be assumed that overseas research and policy responses would be automatically applicable in New Zealand, which has its own unique aspects of the housing market, housing stock and population dynamics. These include:

- Localised housing markets.
- A small public sector rental market.
- A small private rental market, predominantly consisting of non-professional landlords with a small number of properties.
- A fledgling community housing sector.
- A housing stock with particular design, construction and age profile characteristics.
- A relatively youthful population age structure, unique ethnic composition, high residential mobility as 'normal' and a low population density over a large land area.
- The roles and responsibilities of local and central government, and the interface between the housing, health, education and welfare sectors have a particular configuration in New Zealand.

4.2 Young people: Research on Positive Housing for Positive Outcomes

There is strong evidence that helping young people access suitable accommodation contributes to good outcomes for all young people, and that poor housing contributes to poor youth outcomes. Three research themes are suggested:

- Housing that supports all young people to make a positive transition to adult roles.
- Housing as a pathway to positive outcomes for vulnerable and at risk young people.
- Access to safe and secure housing.

Housing that supports young people to make a positive transition

All young people face significant decisions about housing as part of life course changes between childhood and adulthood. What are the conditions required to assist young people to:

- Plan for their housing needs
- Meet their own housing needs
- Manage housing costs
- Engage as responsible tenants.

Housing as a pathway to positive outcomes

For some young people, housing circumstances are critical to successful outcomes such as achieving independent living, and engaging in further education or employment. If housing circumstances are unstable, inappropriate or inadequate, this may exacerbate other difficulties that they face. Groups that are particularly vulnerable to poor outcomes if their housing is inadequate may include:

- Disabled young people, including physically disabled, intellectually disabled, mental health service users, and those with behavioural problems.
- Young people leaving state care.
- Early school leavers.
- Teenage parents.
- Young people from deprived backgrounds.
- Young people at risk of offending.

Key questions are:

- Identification of housing needs of vulnerable and at risk young people, including engaging young people in identification of those needs.
- What housing conditions and supports are needed to maximise positive outcomes for vulnerable and at risk young people?
- How are such conditions and supports to be achieved?

In addition to those that are vulnerable or at risk, another group of young people with a range of complex needs may face significant difficulties in accessing suitable housing. These include young offenders and substance abusers. In addition to the key questions above, another critical question is how can safe, appropriate and stable housing help troubled young people to overcome their problems?

Access to safe and secure housing

This theme links to the first two themes. There is a clear gap in research on the barriers to young people accessing affordable, safe and secure housing in New Zealand. Youth homelessness (broadly defined) is indicative of market failure. This research should consider a broad definition of homelessness as inadequate access

to safe and secure housing. This includes young people who experience tenure insecurity and who move between various forms of temporary shelter (e.g. staying with friends or relatives, emergency accommodation). Key questions are:

- What are the barriers to young people accessing affordable, safe and secure housing?
- Who is affected and how are they affected? E.g. effects on education, health, safety and employment.
- What housing services are needed for young people and how are they to be achieved?

4.3 Improving Children's Wellbeing through Housing

There are four components to this priority area:

- Housing determinants of children's wellbeing.
- Housing, change and crisis.
- The influence of housing and neighbourhoods on children's wellbeing.
- Addressing the circumstances of children with specialised housing needs.

Housing determinants of children's wellbeing

While there is a growing New Zealand evidence base in relation to housing effects on health, the effects of housing on other outcomes are not well understood. More needs to be done to collate and analyse existing New Zealand data and research on the housing determinants of children's wellbeing, to fill in gaps in knowledge and identify key housing interventions that may deliver positive cross-sectoral outcomes.

The primary questions are:

- What are the housing factors and conditions required for children's wellbeing?
- To what extent are those factors and conditions met in New Zealand?
- How could those conditions be better met?
- What is the role of housing in supporting early interventions for the wellbeing of vulnerable children?

Housing, change and crisis

Key aspects of change and crisis include:

- Life stage dynamics
- Household dissolution
- Breakdown of parental/caregiver relationship
- Loss of parent/caregiver
- Residential movement (international and domestic)
- Loss of accommodation and homelessness

This research component is directed to addressing a series of critical questions:

- What role does housing play in supporting children through household and family change and crisis?
- What housing factors and conditions are critical for children's wellbeing in periods of change and crisis?
- To what extent does New Zealand's housing provide a buffer, or act as a barrier to, children experiencing change and crisis?
- How can New Zealand's housing be improved to robustly support children experiencing change and crisis?

Tenure insecurity and loss of accommodation can result in crises for children and their families. Like youth homelessness, children's homelessness was identified by several agencies as a significant gap in New Zealand research. It is not known to

what extent children experience homelessness as part of a family, or if there are some children unattached to families who are homeless. Key questions include:

- What are the drivers of homelessness for children and families?
- How are children affected by homelessness? (e.g. effects on their education, health and safety).
- What housing support services are needed for homeless children and families and how are they to be achieved?
- How can New Zealand's housing be improved to address homelessness?

The influence of housing and neighbourhoods on children's wellbeing

This research component focuses on two critical questions:

- How do the dwelling and the neighbourhood work together to contribute to children's wellbeing?
- What needs to change about the relationship between New Zealand's dwellings and neighbourhoods to increase positive outcomes for children?

Addressing the circumstances of children with specialised housing needs

This research component focuses on scoping the housing needs of the following children, and then identifying appropriate options for addressing those needs:

- Disabled children
- Migrant and refugee children (either with parents/families, or unaccompanied)
- Children in frequently moving families.

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ANNEX 1: HOUSING CHARACTERISTICS AND WELLBEING OUTCOMES

Dwelling condition and performance

Health outcomes	<p>Cold, damp and mould: allergies, respiratory illness, asthma, cardiovascular mortality, chronic obstructive pulmonary disease, inflammatory disease, gastroenteritis and other infections (Bonnefoy <i>et al</i>, 2004; Breysse <i>et al</i>, 2004; Clinton <i>et al</i>, 2005).</p> <p>Indoor air pollution: increased incidence and severity of respiratory disorders, asthma; adverse outcomes of pregnancy. Key age groups affected: 0 – 4 yrs (Licari <i>et al</i> 2005).</p> <p>Inadequate building standards and unsafe buildings: injuries in the home; increased incidence of respiratory diseases, allergies, asthma (Licari <i>et al</i>, 2005; Breysse <i>et al</i>, 2004; Bonnefoy <i>et al</i>, 2004).</p> <p>Emissions of pollutants from using unflued gas for cooking and heating: respiratory disease, respiratory infections, increased susceptibility to asthma and changes in lung function (Bonnefoy <i>et al</i>, 2004 Ponsonby <i>et al</i>, 2001; Institute of Medicine, 2000; Triche <i>et al</i>, 2002).</p> <p>Tobacco smoke in the home: asthma, sudden infant death syndrome (SIDS), bronchitis, pneumonia and other respiratory diseases. Adverse effects on the developing foetus (Bonnefoy <i>et al</i>, 2004; Thomson <i>et al</i>, 2005; Woodward and Laugesen, 2000).</p> <p>Delayed development of infants and young children; illnesses due to foetal and early childhood exposures to biologic, chemical and physical agents within the home (Breysse <i>et al</i>,2004; Jackson and Roberts 2001).</p> <p>Noise: sleep disturbances (Licari <i>et al</i> 2005).</p> <p>Poor mental health (Canada Mortgage and Housing Corporation 2003).</p>
Education outcomes	<p>Noise: impaired learning and language development (Licari <i>et al</i> 2005).</p> <p>Meagre home educational resources affects early childhood, primary and secondary achievement, but resources can be supplemented (Biddulph <i>et al</i> 2003).</p>
Safety and offending outcomes	<p>Property offences (Cooper, 2001).</p> <p>Aggressive behaviour (Cooper, 2001).</p> <p>Other research in two Canadian cities found that children's problem behaviour is significantly related to dwelling condition, particularly to the condition of the child's bedroom, the kitchen, living room, the main bathroom and overall condition of the dwelling's interior (Canada Mortgage and Housing Corporation, 2003).</p> <p>Alcohol and drug misuse, crime and other antisocial activities (Beinart <i>et al</i>, 2002; Johnston <i>et al</i>, 2000; Barnes <i>et al</i>, 2006).</p>
Vulnerable groups	<p>NZ Housing Strategy – Housing providers have a special responsibility to address children's needs in housing design and provision.</p> <p>Youth Development Strategy Aotearoa – noted the need for young people to live in housing that is in good repair.</p> <p>New Zealand Disability Strategy states that housing affordability and quality are critical aspects affecting the housing choice of people with disabilities.</p> <p>Young physically disabled (Saville-Smith <i>et al</i>, 2007a).</p> <p>Young people vulnerable to living in damp and cold rental housing (Ford <i>et al</i>, 1997).</p>

Crowding

Health outcomes	Bacterial meningitis, septicaemia, meningococcal disease, Hib disease, bronchiolitis, enteric infections, tuberculosis, pandemic influenza, rheumatic fever, skin infections and cellulitis (Baker, 2007; Statistics New Zealand, 2003). Poor mental health (Canada Mortgage and Housing Corporation, 2003). Noise: sleep disturbances (Licari <i>et al</i> , 2005). Non-infectious illness and injury, including mortality from myocardial infarction, and burns in children (Statistics New Zealand, 2003). Poor mental health (Canada Mortgage and Housing Corporation, 2003; Statistics New Zealand, 2003; Clinton <i>et al</i> , 2005:13).
Education outcomes	Lower educational attainment and social engagement (Cooper, 2001:13). Importance of students having access to a quiet place to study and other tools to support their learning (Caygill and Chamberlain, 2004; Research Division, 2002; Ministry of Social Development, 2004; Hawk <i>et al</i> , 1996). Meagre home educational resources affects early childhood, primary and secondary achievement, but resources can be supplemented (Biddulph <i>et al</i> , 2003).
Safety and offending outcomes	Difficulties in practising good parenting. Evidence of interpersonal conflicts, alcohol abuse, family violence and suicide (Cooper, 2001).
Vulnerable groups	Youth Development Strategy Aotearoa – noted the need for young people to live in housing that is not overcrowded.

Affordability

Health outcomes	Excessive housing costs reduce the amount able to be spent on other factors contributing to health such as food and recreational activities (Public Health Agency Canada 2002; Greater Minnesota Housing Fund 2004; Licari <i>et al</i> 2005).
Education outcomes	Excessive housing costs reduce the amount able to be spent on education (Public Health Agency Canada 2002; Greater Minnesota Housing Fund 2004).
Vulnerable groups	Impact of debt (e.g. student debt) on housing choices of young people (NZ Housing Strategy). Young people particularly affected by rental affordability (Holdsworth and Solda, 2002; Burke <i>et al</i> , 2002). Low income families; Maori and Pacific households (Ministry of Social Development, 2006). New Zealand Disability Strategy states that housing affordability and quality are critical aspects affecting the housing choice of people with disabilities.

Tenure and tenure security

Health outcomes	<p>Public housing: residents report improved health (Phibbs 2005). HNZC tenants' decline in hospitalisation rates, especially for intestinal infectious diseases, acute bronchiolitis, chronic obstructive pulmonary disease, asthma (Baker et al 2006). Insecure tenure: leading to frequent residential movement, increased stress in parents and children (Lewis 2006). Secure housing tenure essential for helping young people access mental health services (St Vincent's Mental Health Service and Craze Lateral Solutions, 2005).</p>
Education outcomes	<p><i>Home ownership:</i> Higher quality home environment in terms of cognitive support/physical environment and the emotional support of children in the household (Haurin <i>et al</i> 2001). Higher scores in maths and reading, (Haurin <i>et al</i> 2001; Rohe <i>et al</i>, 2001; Cooper, 2001). Fewer child behaviour problems (Haurin <i>et al</i> 2001; Cooper, 2001). Less likely to drop out of school (Rohe <i>et al</i>, 2001). Children achieve a higher level of education and thereby a higher level of earnings (Boehm and Schlottman, 1999). Homeownership equity a means by which families can finance higher education for their children (Greater Minnesota Housing Fund, 2004).</p> <p><i>Public housing:</i> Improved educational performance (Lewis, 2006; Phibbs, 2005)</p> <p><i>Secure tenure:</i> Essential for assisting young people to move from school into employment and further education (Johnston <i>et al</i>, 2000; Beinart <i>et al</i>, 2002; Youth Justice Board, 2006; Allen, 2003; Fernandes, 2007).</p>
Safety and offending outcomes	<p>Secure housing tenure essential for helping young people at risk of offending (Social Exclusion Unit, 2005; Youth Justice Board, 2006). Secure housing tenure essential for helping young people address substance misuse (Youth Justice Board, 2006; St Vincent's Mental Health Service and Craze Lateral Solutions, 2005).</p>
Vulnerable groups	<p>NZ Housing Strategy includes "Investigate youth-specific accommodation programmes, and emergency accommodation for young men and women" and "Investigate developing a tenant advocacy service for youth." Young people vulnerable to landlord discrimination, lack of availability of housing information and advice (Saville-Smith and Fraser, 2004; Ford <i>et al</i>, 1997).</p>

Housing and neighbourhood environment

Health outcomes	Perception that neighbourhood is unsafe: children kept indoors, with consequent reduction in exercise (National Children's Alliance).
Education outcomes	<p>Difficulties of separating out neighbourhood effects from family characteristics, other environmental variables and school effects (Pebley, 2003; Biddulph <i>et al</i>, 2003; Nechyba <i>et al</i> 1999).</p> <p>Community support networks for parents/carers have potentially positive impacts for early childhood, primary and secondary (Biddulph <i>et al</i>, 2003).</p> <p>Access to and use of community facilities and services has potentially positive impacts for primary and secondary students (Biddulph <i>et al</i>, 2003).</p> <p>Neighbourhood effects important for getting pre-school children ready for school, by influencing three competency areas: motor and social development, receptive verbal abilities and behaviour problems (Kohen <i>et al</i>,1998).</p> <p>Poor neighbourhoods: lagging school performance and behavioural problems (Pebley, 2003)</p> <p>Neighbourhood effects important for secondary students (Nechyba <i>et al</i> 1999).</p> <p>Students in 'better' neighbourhoods more likely to stay in school (Nechyba <i>et al</i> 1999).</p> <p>"Moving to Opportunity" experiments in the USA suggested that children in families who moved to high socio-economic status neighbourhoods were more likely to complete secondary school and go on to tertiary education. Also found significant reductions in children's behaviour problems (Nechyba <i>et al</i> 1999).</p>
Safety and offending outcomes	<p>Neighbourhoods with poor housing show higher than average levels of violence, and higher rates of reported child abuse and neglect (Cooper, 2001).</p> <p>Neighbourhoods with general physical decay and deterioration linked to children's problem behaviour (Canada Mortgage and Housing Corporation, 2003:3).</p> <p>Real and perceived safety of local area affects children's exercise and can lead to obesity (Bonney <i>et al</i>, 2004).</p> <p>Violence in schools (PMP Capstone Team, 2006).</p> <p>Child abuse and neglect linked to neighbourhood housing factors such as housing quality, housing affordability, dwelling type; frequency of movement and resident dissatisfaction with housing (Saville-Smith, 1999:8; Zuravin; 1989; Young and Gately, 1988; Garbarino, 1985).</p>
Vulnerable groups	Children and young people in neighbourhoods with poor quality housing.

Frequent residential movement

Health outcomes	Disengagement from services including school and health services. Multiple and complex health problems including substance abuse, mental health issues, sexual health issues and disabilities or chronic illness (Fleming, 2006).
Education outcomes	<p>Detrimental to children's school attendance, learning and educational achievement (Dechman, 2003; Greater Minnesota Housing Fund, 2004; Biddulph <i>et al</i>, 2003; Hawk <i>et al</i>, 1996; Lewis, 2006; Education Review Office, 1997; Gilbert, 2005).</p> <p>Lower average scores on maths (Wyllie 2004).</p> <p>Lower average scores on social skills (Wyllie 2004).</p> <p>School suspensions and expulsions (Cooper, 2001:15; Stutzky <i>et al</i>, 2001; Family Housing Fund 2001).</p> <p>Early school leaving (Lewis, 2006).</p> <p>Low motivation (Gilbert, 2005).</p> <p>Emotional and behavioural problems (Cooper, 2001:15; Stutzky <i>et al</i>, 2001; Family Housing Fund 2001).</p> <p>Learning difficulties (Education Review Office, 1997).</p> <p>Difficulties in accessing learning programmes (Education Review Office, 1997; Johnson, 2002).</p> <p>Difficulties in maintaining social relationships (Bartlett, 1997).</p> <p>Barrier to re-registering in schools (Bartlett, 1997; Fleming 2006).</p> <p>High mobility in primary and secondary school has negative impacts on achievement although this is usually associated with other adverse factors (Biddulph <i>et al</i>, 2003; Gilbert, 2005).</p> <p>Differences in mathematics achievement and secondary school subject choice, but overall these differences were small (Gilbert, 2005).</p>
Safety and offending outcomes	<p>Abuse and neglect (Fleming, 2006).</p> <p>Behavioural problems (Fleming, 2006).</p> <p>Offending (James, 2005)</p>
Vulnerable groups	Similar to those identified under Homelessness.

Homelessness

Health outcomes	<p>Musculoskeletal problems, chronic breathing problems, headaches, seizures, arthritis, asthma and high blood pressure, (Cooper, 2001).</p> <p>Homeless children have poor nutrition, which affects their growth and development. Trauma-related injuries, tooth decay, delayed immunisations, ear and skin infections and conjunctivitis. Anxiety, depression, behavioural problems, exposure to severe psychosocial stressors, child depressive symptoms (Public Health Agency Canada, 2002; Cooper, 2001).</p> <p>Homeless youth: vulnerable to untreated health disorders, drug abuse, and are at high risk of contracting sexually transmitted diseases. They also lack adequate food (Fernandes, 2007). High rates of psychological disorders and youth suicide (Kamieniecki, 2001; Martijn and Sharpe, 2006; Mission Australia Research and Social Policy Unit, 2000; St Vincent's Mental Health Service and Craze Lateral Solutions, 2005).</p>
Education outcomes	<p>Lower educational attainment (Cooper, 2001; Canada Mortgage and Housing Corporation, 2001; Ziesemer and Marcoux, 1994).</p> <p>Behavioural problems (Ziesemer and Marcoux, 1994).</p>
Safety and offending outcomes	<p>Children in homeless families particularly vulnerable to experiencing maltreatment, and to witnessing violence. Emotional and behavioural problems including aggressiveness, anti-social behaviour, problems in bonding with the parent and sadness (HCH Clinicians Network, 2003).</p> <p>Youth particularly vulnerable to sexual abuse and exploitation (Fernandes, 2007).</p> <p>Youth engaging in illegal activities for survival (Fernandes, 2007; St Vincent's Mental Health Service and Craze Lateral Solutions, 2005; Martijn and Sharpe, 2006).</p>
Vulnerable groups	<p>NZ Housing Strategy includes initiative "Meet the need for housing and support services for young people leaving state care when they turn 17".</p> <p>Youth as key priority area for housing assistance in Australia and UK (Chamberlain 2004; Beer 2006; Chamberlain and McKenzie 2002; Communities and Local Government, 2007).</p> <p>Shortage of emergency accommodation for young single men (NZ Housing Strategy).</p> <p>Young adults with complex needs (Al-Nasrallah <i>et al</i>, 2005).</p> <p>Young intellectually disabled and mental health service users (Office for Disability Issues).</p> <p>Women affected by domestic violence and their children; young women (NCIWR).</p>



Centre for Housing Research

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