'You feel worthless and you feel like you don't belong anywhere':
The Impact of Housing on the Lives of People with Serious Mental Ill-health

Elise Davis, Sarah Pollock, Nadine Cocks, Mind Australia

Background

Although access to safe housing is a basic human right,[1] housing needs are often unmet for the two-to-three per cent of the population who experience severe mental ill-health.[2] The cost of housing is a major factor in determining the type of housing people can access. With over 200,000 people on the waitlist for public housing,[3] securing long-term accommodation can be challenging. Private rental is largely unaffordable for people receiving Newstart and difficult for those receiving the Disability Support Pension. Not having stability in housing, combined with periods of being unwell and a lack of supports, means that periods of homelessness may occur. This is supported by the evidence demonstrating that the prevalence of severe mental ill-health is higher among homeless people than the general population.[4]

There is research on the housing and mental health interface, particularly on the system and policy level factors and the evaluation of specific housing and mental health programs. Much less is known about the lived experience and the impact of different housing types on mental health, with the exception of supported accommodation. A meta-analysis of qualitative studies demonstrated that supported housing was important for privacy, sense of control and enabling people to rebuild their lives although loneliness was an issue.[5]

What remains unknown however is the impact of housing on the lives of people with mental ill-health from the perspective of people with lived experience. The aim of this paper is to draw on qualitative research with people with lived experience of mental ill-health and housing difficulties to explore the impact of housing on their lives.

This paper is based on qualitative data collected as part of a larger study examining the intersection between housing and mental health. Trajectories is a national study conducted in partnership with Mind Australia and the Australian Housing and Urban Research Institute (AHURI). Ethics approval was obtained from the University of Wollongong for this study (2018/402). Interviews and focus groups were conducted with consumers (people who self-selected on the basis of having mental health and housing issues) and carers (people who care for someone who has mental health and housing issues). Interviews focused on people's personal accounts of their mental health and housing journeys. A grounded textual analysis, which allows categories to emerge from the data, was applied to the interviews and focus groups. Key themes reflecting the impacts on housing were identified.

The paper is based on the perspective of 86 participants recruited from the following areas Melbourne, Wangaratta, Sydney, Bathurst, Brisbane, Mackay, Adelaide, Berri, Hobart and Perth, Demographic data were collected for 83 people, including 63 consumers and 20 carers. Forty-five percent of the sample identified as female and the average age was 42 years. Participants in this study experienced many forced moves, housing insecurity and short-term housing experiences. Further information about the demographic characteristics of the sample can be found at *https://www.ahuri.edu.au/research/trajectories*

Housing Experiences and Impact of Housing

Housing and the living environment affected several major areas of participants' lives, including their financial situation, feelings of safety, feelings of security, self-worth, relationships, perceived control, their environment and their ability to obtain employment (as demonstrated in Figure 1).

Figure 1: Impact of housing

Source: The authors.
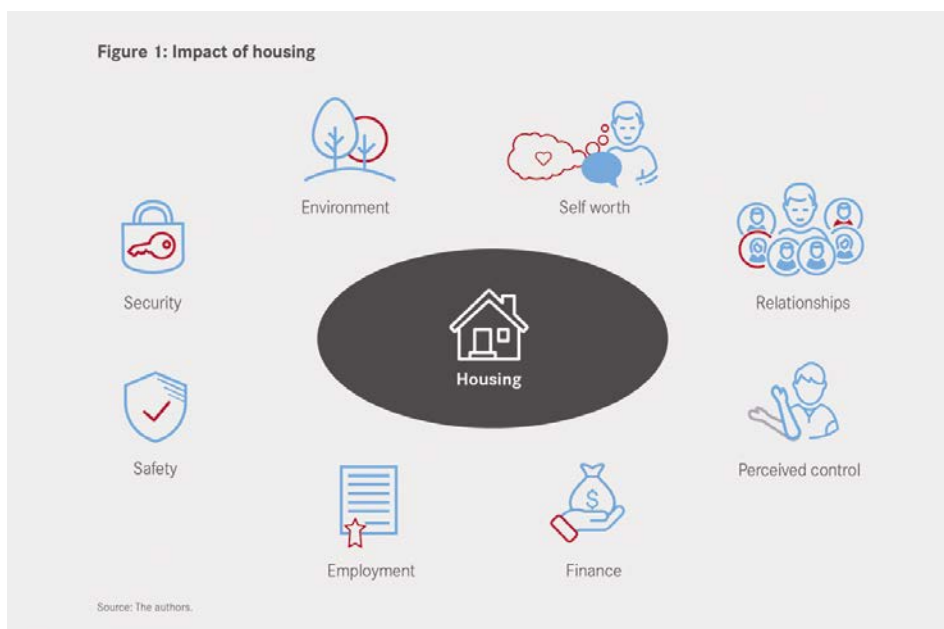
Housing and Financial Situation

The cost of housing not only impacted on the type of housing participants could afford, but also the extent to which participants were able to engage in other activities needed for a well-rounded life, including basic mental health support. The decision to get mental health support needed to be weighed up against other essential living costs. There was also a financial impact of housing for carers who were paying rent or a mortgage for their family member. Where they were paying the mortgage costs for a dwelling they owned, but their family member lived in, their pensions were negatively affected because the property was seen as an investment property.

Feelings of Safety

Most participants had housing experiences where they felt unsafe. This could be due to insecure housing (for example, broken locks) or to the negative behaviour of neighbours or other people in the neighbourhood (for example, substance misuse, violence or yelling). Carers also reported feeling unsafe at times when the person for whom they were caring was experiencing periods of acute illness and distress.

> 'And so, this particular person [in a boarding house] *just absolutely lost it, which was just — and I was just shaking for the rest of the day. And so today when I heard that she was up and about, I didn't even come out to rest.'*
> — Consumer, Adelaide

Feelings of Security

Short-term housing and transitional housing, while providing the person with a safe place to live, also created a lot of stress and anxiety about needing to find somewhere else to live in the long-term.

> '... *you've had this place at the time, over three months, and they've got other people to come in there, so then you're going to be homeless. So just extra stress: oh God, I've got something else to worry about.'*
> — Consumer, Sydney

Self-worth

Feelings of worthlessness can come from, or be exacerbated by, a lack of secure housing and the process of getting assistance for housing. Participants spoke very negatively about their experiences with public housing staff.

> 'You feel worthless and you feel like you don't belong anywhere.'
> — Consumer, Bathurst

Relationships

Some housing experiences had negative effects on participants' relationships. Living with family placed significant pressure on both the familial relationship and the carer, and in some cases contributed to a permanent relationship breakdown. Housing played an important role for participants who were parents who may have lost access to their children.

> 'I've got a four-year-old son. I'd like at least a two-bedroom place so when I do have him unsupervised if he stays overnight, he's got a room. I get laughed at.'
> — Consumer, Bathurst

Perceived Control

Housing experiences were marred by an underlying lack of control over the process, in terms of both applying for housing and then maintaining the house. In public housing and private rental, participants felt significant pressure to maintain the house to someone else's standard.

Environment

For several participants, the physical environment was part of what distinguished some of their best housing experiences. Participants also talked about the importance of being close to services and supports.

> 'It was bliss. It was so peaceful there. I didn't have any mental health dramas at all… It's in a quiet and cosy place and it's surrounded all by nature.'
> — Consumer, Brisbane

Employment

Some participants were too unwell to work, but even if they were able to work, the interdependency between housing and employment made securing either difficult.

> 'I've rung countless places [for housing] and they will not even give you their address if you're not working… For a job they want to know, where do you live? I don't want to lie yet I want to protect my chances of getting a job as well.'
> — Consumer, Sydney

Discussion and Implications

The results from this study demonstrated the far-reaching and cumulative impacts of housing on the lives of people with serious mental ill-health and their families and/or carers. The impacts of housing tended to be negative and have a negative impact on mental health. Employment, mental health support, social support, perceived control, feeling safe and security — all fundamental to mental health — were compromised for the participants because of their housing situation. The impact of this for someone who already has mental ill-health is significant and can contribute to major declines in mental health.

Access to safe secure housing is fundamental to, and the foundation of mental health recovery. The impact of not knowing when public housing would become available (if ever) has a negative impact on mental health. Even in transitional housing, participants felt like their life was on hold until they knew what would happen to them in the long-term. They held off taking next steps in their recovery such as employment, study, volunteering or trying to find or reconnect with family, friends or a partner until they had some stability and some sense of what their future would hold.

Several recommendations have emerged from the Trajectories project and reports can be accessed from https://www.ahuri.edu.au/research/trajectories. One of the recommendations that is clearly relevant to these analyses is that there is a clear need for medium-term responses that provide housing and support (up to three years). Short-term housing arrangements do not provide enough stability to enable people to focus on their mental health and start to work on their recovery. Medium-term housing arrangements would provide that stability. Support is needed in addition to housing to ensure that any changes in mental health/challenges are recognised early and supports are put in place to protect tenancy.

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Endnotes

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