

HOUSING SUPPORT SERVICES IN AOTEAROA NEW ZEALAND

Future Policy and Funding Options

Paper Commissioned by Community Housing Aotearoa Inc.

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This paper was written by Marc Slade of Koromiko Consulting, www.koromikoconsulting.co.nz on behalf of:

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Executive Summary

1. The impetus for this paper is the recognition by the community-housing sector that New Zealand currently lacks a strategic framework in relation to the provision of Housing Support and that there is an absence of a “whole-of-government” approach to this issue. The sector has also identified a number of gaps in funding and provision, resulting in highly vulnerable groups missing out on appropriate Housing Support, which in turn leads to poor social, health and housing outcomes and increased social problems. In developing this paper the sector wishes to engage in a dialogue with government to try and develop an improved framework for the funding and provision of Housing Support.
2. In discussing Housing Support it is important to clarify the terms used. Developing a consistent and shared use of these terms is critical to developing a coherent policy framework. In some cases it is preferable to make use of terms that have already been underpinned by years of practice and academic research, and certain terms in this paper have been borrowed from overseas as they have established a clear and common currency.
3. In considering Housing Support it is important to recognise that it is part of a ‘continuum of care’, providing non-institutional support associated with accommodation, itself ranging from supported housing to outreach support. Supported housing is characterised by the provision of accommodation being tied into the provision of support, whereas outreach support provides support independent of tenure.
4. Housing Support plays an important role as an alternative to institutional care, and as such supports a number of current policy agendas and strategies. Overseas research has also shown that Housing Support is a cheaper and more effective intervention than its alternatives; crisis intervention and institutionalisation, and generally leads to improved social, health and housing outcomes for a diverse range of vulnerable groups.
5. Current provision of Housing Support in New Zealand is ad hoc and based on a silo approach, with individual agencies only funding support services for a limited range of clients. This results in gaps occurring between these silos and many vulnerable individuals and families falling between the cracks. In addition some current provision such as Housing New Zealand Corporations’ Community Group Housing (CGH) programme does not adequately meet the needs of a community-housing sector that is adapting to meet current policy settings that emphasise a move away from institutional care and ‘group-homes’ towards maximising people’s independence.
6. The paper recommends:
 - That government develop a “whole-of-government” national Housing Support strategy, recognising that appropriate Housing Support interventions improve the social, health and housing outcomes for a diverse range of vulnerable New Zealanders

- That Government combine existing funding programmes and introduce a new funding programme to support the operating costs of providing Housing Support services, where these meet priorities identified in the national strategy
- That this programme should also be accompanied by additional earmarked capital subsidy to support the development, acquisition and improvement of supported housing to meet the needs identified in the strategy
- That any future model of funding for Housing Support services is sufficiently flexible to allow the development of a range of services spanning the continuum of Housing Support. This will allow Housing Support to be delivered to vulnerable tenants irrespective and landlord or tenure
- That current programmes and policy interventions, such as HNZC's CGH programme, are reviewed to ensure that they are meeting present need and supporting wider government policy initiatives and strategies.

Background

7. On 31st August 2007 Community Housing Aotearoa Inc. (CHAI) and a number of community-housing providers met with officials from Housing New Zealand Corporation (HNZC) and the Ministry of Social Development (MSD) to discuss gaps in funding for Housing Support services under current policy settings. The community sector representatives expressed the view that in order to deliver improved and sustainable outcomes for individuals and families with severe and enduring housing needs, government needs to increase levels of funding to allow community-housing providers to deliver additional Housing Support services.
8. The result of this meeting was that officials signalled that there is an opportunity to engage in a dialogue around a new approach to funding for Housing Support. CHAI and the sector welcome the opportunity to provide policy advice and to make the case for a new funding regime and additional funding. Subsequent to the meeting CHAI has commissioned Marc Slade of Koromiko Consulting to prepare a discussion paper to inform future discussions with government agencies.

Scope of Paper

9. The scope of this paper is to:
 - Map the current position in relation to delivery and funding of Housing Support services
 - Identify the gaps in current funding for Housing Support services delivered by community-housing providers
 - Explore overseas Housing Support and supported housing models and the funding mechanisms that support them
 - Make the case as to why government should fund additional Housing Support
 - Propose a strategy for developing a Housing Support / supported housing funding programme
10. The following issues are outside the scope of this paper:
 - Revenue or capital funding for “general needs” social housing delivered by community-housing providers
 - The effectiveness or otherwise of existing contracting arrangements for support services (e.g. Child Youth and Family contract funding, Ministry of Health or District Health Board funding)
 - The provision or funding for personal care or nursing care
 - The provision or funding for residential care, rest homes, nursing homes or hospital type services.

Problem Definition

11. The problem identified as the subject of this paper is that, at present, there is no coherent policy framework around the provision or funding of Housing Support services in New Zealand, and that current funding programmes are uncoordinated and ineffective in meeting even current need.

12. It is held that there is insufficient funding available to enable the provision of support to people who fall outside narrowly defined government contracting priorities, resulting in a silo approach to meeting housing and support needs. In addition those providers that do receive contract funding to deliver support to specific client groups have identified that this funding is often inadequate to meet the needs they encounter. In many cases there is a gap between funding for support and the additional costs of providing intensive tenancy management and housing facilitation services. These are not seen as support, fundable through contracts, and yet they are part of the continuum of support - playing a critical role in supporting clients into sustainable independent tenancies. It is these kinds of services that fall between current health, social services and housing funding. In addition some groups - homeless people, ex-offenders etc. - fall outside current funding regimes because they do not fit funders' current priorities.
13. The result of the above is a lack of a joined-up response to individuals and families who need such support, resulting in poor social, health and housing outcomes for these groups. This in turn results in longer-term negative impacts to society as a whole (e.g. continued re-offending, family violence, mental and physical ill health, worsening addiction problems etc.)

Definitions of Housing Support

14. A key problem encountered when discussing Housing Support is the difficulty around reaching a mutual understanding or an agreed definition of what it is. Housing Support falls between tenancy management and the provision of medical or domiciliary care or specialist social services. In order to inform this discussion it is important to differentiate between the various terms and identify how these services are usually funded. These terms are further defined in the glossary at Appendix 1; however, it is worth exploring the key differences here to inform further discussion.

Tenancy management

15. Tenancy management is the activity normally carried out by a landlord (whether private sector or social) in relation to the day-to-day management of the landlord/tenant relationship. This includes:
 - Interviewing and assessing prospective tenants
 - Allocating properties to new tenants
 - Completing the necessary administration on the creation of a tenancy
 - Dealing with tenant's enquiries, reports of repairs
 - Ongoing administration of collecting rents or dealing with rent arrears
 - Property inspections to ensure compliance with the tenancy agreement
 - Dealing with complaints from neighbours relating to nuisance
 - Administration on the termination of a tenancy (e.g. processing bond returns)
16. Tenancy management is seen as one of the usual running costs of owning and managing property, along with servicing a mortgage, paying for repairs and maintenance. Tenancy management is usually paid for out of rental income (topped up by Accommodation Supplement for people on a low income). In some jurisdictions social landlords receive a revenue subsidy from government for "intensive tenancy management" if they primarily cater for tenants with high needs, to

account for the higher than normal level of tenancy management needed. In New Zealand, HNZA receives a revenue subsidy from Government allowing it to charge a sub-market “income related rent” which does not meet the Corporation’s full running costs, a fact that reflects HNZA’s role as a Crown Entity in giving effect to the Crown’s social objectives.

Residential Care

17. This is a situation where care and accommodation are delivered by the provider in a property designated specifically for the delivery of a service. Examples of this include aged care rest homes, residential care facilities, children’s homes etc. In this context care can fall into a number of categories, but generally involves a degree of personal or nursing care practical assistance with household tasks, such as cleaning and tidying, cooking, shopping etc. Nursing care includes activities such as administering medication, giving bed baths, changing dressings etc. Residential care is usually funded by either social services or health agencies such as the Ministry of Health and District Health Boards (DHBs). Work and Income pay a Residential Care Subsidy to eligible clients.

Specialist social services

18. This is the provision of specialist support to people with specific needs or issues. It can include counselling, psychotherapy, addictions counselling etc. Social services are usually, though not exclusively, delivered outside the home in a community setting. Social services are usually paid for through either user-charges or specialist funding from government agencies and DHBs.

Housing Support

19. The primary purpose of Housing Support is to develop and sustain an individual’s capacity to live independently in their accommodation. Some examples of Housing Support services include enabling individuals to access their correct benefit entitlement, ensuring they have the necessary skills to maintain a tenancy, advising on repairs and accessing services in their community. On a more basic level Housing Support can simply be about having someone to turn to for advice when things are getting tough, or having someone who is not primarily concerned with enforcing the tenancy agreement looking after your interests.

20. Housing Support can be delivered in a number of ways. It may be provided by on-site full-time support workers or by off-site support workers carrying out home visits for a short period each week. Support can be either short-term or long-term in accordance with the service’s objectives and the individual’s needs. The important defining factor of Housing Support is that the range of services and activities can be tailored to an individual’s specific needs. Housing Support can be considered as falling into two principal categories:

- **Supported housing** – where the provision of support services is linked to the provision of housing, either short or long term. The support is usually provided by the same agency as the landlord, often a specialist non-government supported housing or social services agency. Once the client no longer needs the support offered they are required to find alternative accommodation. This is also known as “supportive housing” in some jurisdictions, for example Canada and the USA.

- **Outreach support** – where the provision of support is not directly linked to the provision of accommodation. In this case an agency provides a tailored package of support to an individual irrespective of their landlord or tenure on an ongoing basis or as required. This support is often referred to as ‘floating support’ as it can “float off” with the client to other accommodation or to another client when it is no longer required. This is also described as transitional support.

21. Housing Support and supported housing services both work with vulnerable people, and client groups commonly include:

- People who are homeless or at risk of homelessness
- Ex-offenders and people at risk of offending
- People at risk of family and domestic violence
- People with drug and alcohol problems
- Young people at risk
- Mental health consumers
- People with an intellectual disability
- People with a physical or sensory disability
- Teenage parents
- Older people living in their own homes
- Vulnerable families with children
- And other vulnerable people who lack the skills of living in their own home

Models and Evolution of Housing Support

The Nature of Housing Support

22. Over the last two decades many countries, including New Zealand, have seen the increasing provision of care and support to people in their own homes. Without this care they would be unable to live independently in the community. Internationally these developments have accompanied the closure of large scale institutional or residential care establishments catering for people with mental health or social problems. In some countries this also reflects the more recent adoption of policies aimed at the prevention of homelessness and the long-term re-integration of homeless people into mainstream housing. In all cases, the aim of Housing Support is to enable people to live independently in the community. In talking about supporting people in their own homes, we are differentiating them from people who live in residential care situations. People living in their own homes include owner occupiers and tenants, the key factor being that their tenure is not connected to the provision of a particular service and they have a higher degree of autonomy over their circumstances.

23. The effective delivery of support to people in their own homes requires the availability of affordable and flexible housing and the provision of appropriate support services either on a permanent or temporary basis. The provision of support to people in their own homes can take a variety of forms distinguished by the relationship between housing provision and support provision, by the form of financing or by the organisational arrangements for the management of the housing and the delivery of support. The various forms of accommodation associated with the provision of supported housing can be seen as ranging across a continuum from

self-contained mainstream housing with a planned, albeit sometimes minimal, programme of support to shared accommodation which has been funded, built or designated for the purpose of providing an integrated package of housing and high-level support, often for a specific client group.

24. Support provision aimed at enabling people to live independently can be seen as having three, sometimes interlinked, objectives:

- The reintegration of people into the community (mainstream society) through the acquisition and maintenance of the skills needed to sustain an independent life
- The rehabilitation of people with challenging behaviour, anti-social behaviour, chaotic lifestyle or personal needs (e.g. addictions)
- The prevention of homelessness through the delivery of care and support in the community for people who might otherwise be institutionalised

25. In each of these situations – reintegration, rehabilitation and prevention – support may be required either for a transitional period while the recipient adjusts to independent living, or it may be needed permanently because of the nature of the dependency or disability. It may also be required on a flexible basis to meet fluctuating needs.

26. Three main categories of support provision can be distinguished:

- Support to enable a person to sustain a tenancy. This is sometimes referred to as ‘enhanced tenancy management’, which can include help with managing the dwelling and coping with neighbours, as well as with housework and other everyday activities
- Support with the provision of counselling and life-skills (e.g. developing skills to live independently, as well as counselling to deal with specific problems such as substance abuse, or relationship problems)
- Support with personal and health care (e.g. bathing and dressing as well as medication care).

27. Services to people with support needs are now typically provided in three settings: an institutional setting (common in the past but diminished over recent years), in their own homes or in an ‘intermediate’ setting such as special-needs housing or shared ‘group homes’. Non-institutional provision (in their own homes and in intermediate settings) effectively defines supported housing (and Housing Support). Figure 1 summarises the complex interrelationship between housing provision and care provision in supported housing and, for comparison, the institutional equivalents are also given. The elements in the table are intended to illustrate the variety of situations which may exist across the three settings – institutional, intermediate and community – in relation to four dimensions – accommodation, support, management and user dimensions.

	Institutional setting	Intermediate setting	Community setting
Accommodation dimension	Institutional accommodation Hostel accommodation	Residential accommodation Staffed group homes Supported housing	Shared housing Self-contained housing
Support dimension	Permanent support on premises Planned/prescribed 24 hour Skills, personal care	Transitional or permanent support on premises Planned and flexible Up to 24 hours Housing skills Personal skills	Transitional support Visiting, floating Flexible/individual Irregular, tailored as required Housing skills
Management dimension	Single agency Funding linked to care provision	Multi-agency Mixed funding	Multi-agency Funding linked to social and housing subsidy
User dimension	No tenancy rights Professional control of decisions	Limited tenancy rights Limited personal decisions	Full tenancy rights Personal control over decisions

Figure 1 Housing and Care Provision – Dimensions and Settingsⁱ

28. Within the accommodation dimension a variety of dwelling forms can be identified ranging from purpose-built, larger and more institutional forms of accommodation to smaller, ordinary shared or self-contained housing involving more homely living environments. At the more institutional end of the spectrum care will be focused more on personal or health care and be permanent or prescribed in nature. Where support is provided as an aid to enable a person to live independently in the community the nature and intensity of support will be lower and be more focused on housing rather than lifestyle and will also be less prescribed and more targeted on the needs of the individual.

29. As we move away from the purpose-built, designated and institutional settings, the separation of support provision and housing provision invariably leads to multi-agency management and organisation involving both housing and social service agencies, as well as public and voluntary sector agencies. It will also lead to more disparate, possibly more complex forms of funding. This shift also involves the attribution of personal rights such as normal tenancy rights as well as rights of decision over the form of support and choice of providerⁱⁱ.

Deinstitutionalisation and “Care in the Community”

30. In New Zealand many Housing Support services that currently exist arose as a response to the large-scale deinstitutionalisation programme of 15-20 years ago. Initially the ‘group home’ was the most common model of supported housing, in effect creating a ‘mini-institution’ located in the community. With the development of best practice in reintegrating people with support needs into the community this is changing. Increasingly it is being recognised that ‘supported independent living’ is the most empowering model of delivering support. Group homes increasingly play a role only for those with the highest level of and/or most enduring needs, such as those with severe physical or intellectual disabilities who need ongoing care. The preferred model for people with more transient support needs, such as homeless people or people with mental health or addiction issues, is to provide a continuum of support ranging from short-term intensive accommodation with support, through transitional housing with lower levels of support, to supported independent living and ultimately to total independence.
31. This recognition that the attainment of independence is the optimal outcome for people with a range of support needs is being increasingly reflected in policy settings across government. This is especially true in the fields of mental health and older people’s services. In older people’s services the goal of ‘ageing-in-place’ is now seen as a major driver in policy development. Another factor supporting this trend may be a change in people’s expectations around where they live, and a belief that they should have increased choice in selecting where and how care is delivered, to best suit their needs.
32. Another trend in the provision of Housing Support in New Zealand and internationally, especially in the mental health sector, is the move towards recognising the desirability of separating the provision of support from the landlord function of a supported housing provider. The philosophy underpinning this is that this will empower service users and ensure that they are comfortable approaching their support provider without fear that this will jeopardise their accommodation. The support provider can also act as a broker or advocate to help the client resolve any housing related issuesⁱⁱⁱ.
33. These trends; the move to supported independent living and the separation of support and landlord functions, need to be taken into account when designing funding programmes for Housing Support. Existing programmes, such as HNZA’s Community Group Housing, need to be reviewed to ensure that they support these best practice models.

The ‘Continuum of Care’ approach

34. Another approach that is useful in understanding the role of Housing Support is the ‘continuum of care’ concept. This is based on an understanding that different people have a continuum of needs at different times, and that the support offered to them needs to take account of this and be appropriately flexible. This approach is also based on the recovery model. That is, that people with multiple problems such as mental health issues, addictions issues, homelessness etc. can make positive changes in their lives with the appropriate support. Thus the model promotes progress towards maximum levels of independence possible as the desired outcome.

35. The United States Department of Housing and Urban Development's 'continuum of care' model recognizes that all homeless persons are not at the same level of stability and addresses a variety of needs. In relation to services for homeless people the recognized components of the continuum of care include: outreach, access centres/drop-in centres, safe havens, supportive services, overnight shelters (year round shelter and winter shelter), emergency housing, transitional housing, permanent housing and permanent supportive housing and prevention. Lack of any of these elements can create log-jams in provision, and waste valuable resources whilst clients wait to be moved on to a more appropriate accommodation service.
36. The Continuum of Care model has also been widely adopted in New Zealand by District Health Boards, in relation to mental health services but also in relation to services for older people.

Housing Support – Current Provision and Trends in New Zealand

37. Whilst the provision of Housing Support services has not developed in a planned or coherent way, it is important to note that it is not a new sector. A number of providers have been operating for over 25 years (see Appendix 3 – Case Studies).
38. The provision and funding of Housing Support services in New Zealand is currently quite fragmented and is predominantly based on local responses to specific localised needs. The provision of support is often delivered by faith-based and Maori/Iwi community-based groups with funding coming from a wide variety of sources. It is worth noting that the emergent community-housing sector in New Zealand is mainly comprised of organisations offering a range of Housing Support services, rather than providers of general-needs housing. Housing Support services are largely reliant on a mix of contract funding from government agencies and District Health Boards, and voluntary donations/charitable giving.
39. Housing Support providers deliver important and innovative services, assisting the state to meet its wider health and social objectives; often at far lower costs than government agencies could. Many organisations provide a wide range of services including housing facilitation and specialist social services. Community-based organisations are able to be flexible and responsive to emerging local needs, and often operate in a far more holistic way than central and local government. This is especially true of Maori organisations, that often offer services spanning the whole of the community's needs; education, health, housing, social support, community and economic development.

Housing Support for Older People

40. The New Zealand Council of Christian Social Services (NZCCSS) produced the report "Rising to the Challenge: The Role of Christian Social Services in Matching Older People's Housing Needs with Support Needs" (November 2006). The report says, "NZCCSS is concerned that the changing environment in services for older people will lead to accommodation problems for many low-income older people. This is important because of the continuing trend away from residential aged care. The increase in various types of Supported Independent Accommodation (SIA) for older

people is an international trend that New Zealand will follow in the coming years. There will be proportionally fewer people in institutional care and more older people living in their own homes and/or in a range of supported living environments.” The report goes on to define Supported Independent Accommodation as being accommodation that provides an element of support, while maintaining a level of independence. Support is linked to housing, and can vary in terms of level (high or low), and whether it is formal or informal^{iv}. The report then highlights a number of case studies of member organisations delivering innovative Housing Support services, often in partnership with local councils and other agencies.

Housing Support Funding in New Zealand

Commentary on Current Housing Support Funding in New Zealand

41. Whilst funding is available for Housing Support services and supported housing, this is generally targeted at very narrowly prescribed groups. The main provision is through Government contract funding from Child Youth and Families (CYF) and District Health Boards (DHBs), for specific services for tightly defined needs groups, primarily families/children at risk and mental health consumers. Further information on current funding arrangements for Housing Support services is given at Appendix 3.
42. CYF funding is limited to agencies that deliver services that help CYF meet its duties under the Children, Young Persons and Their Families Act, 1989. CYF does contract for housing with support services on a multi-year contracting basis, and has a \$60 million per annum appropriation to meet these objectives. The current funding is fully subscribed, however, so for a new service to access funding an existing service must stop operating. In order to receive CYF funding providers must be registered under the Act, and in most cases must meet up to 20% of service costs from other sources. The primary objective of housing with support services is to keep children out of residential accommodation.
43. Accommodation Supplement, whilst providing some support for general accommodation costs, does not assist with the additional costs of providing Housing Support services. Given that most service users of Housing Support services are likely to be beneficiaries or on a low-income this means that providers cannot realistically pass this cost on to the service user.
44. Capital funding for developing new supported housing provision is also extremely limited. Both the HNZC capital funding programmes, Community Group Housing (CGH) and the Housing Innovation Fund (HIF), are comparatively small, over-subscribed or targeted at a very narrow model of provision. CGH is primarily targeted at residential group-home type provision, and does not see ‘independent supported living’ models as being within its scope. We would argue, however, that the current CGH model is too limited in its view of the provision of Housing Support. It is understood that a recent review of the CGH programme, leading to the revised RSS scheme, found that HNZC did not have a role in providing capital or revenue subsidy to ‘independent supported living’ models. The justification for this approach is that it is not equitable for people with low-level support needs to reap the benefit of high

levels of subsidies available through CGH. It is argued that these people are not especially disadvantaged in the housing market and are able to access 'mainstream housing' through the usual routes of applying to HNZC, councils or private landlords.

45. Whilst this view may be justifiable in relation to clients with low-level needs, it seems that the Corporation does not have a full understanding of the continuum of Housing Support needed to promote independence. We argue here that HNZC's CGH programme needs to recognise that a wider variety of supported housing and Housing Support models that support and encourage greater independence are needed. These services will bridge the gap between residential accommodation and full independence. In the past HNZC has failed to recognise the importance of transitional housing and Housing Support models in promoting independence and rehabilitation to people, and it has failed to recognise that many of these groups are in fact severely disadvantaged in the housing market. In conclusion we would argue that CGH focuses too much on the residential supported housing and group-home model, and is out of step with current trends in the delivery of support to a range of vulnerable groups, and a number of key government policies are promoting a move away from residential accommodation.
46. What is most apparent from the review of current funding is that there is no overarching strategy relating to the provision or funding for Housing Support services in New Zealand. Neither is there evidence of "joined-up thinking" between government agencies as to how the various programmes can work together to produce improved social and housing outcomes for vulnerable clients.

Gaps and Barriers in the Provision of Housing Support

47. Whilst, as described above, funding does exist to pay for Housing Support to certain client groups, many groups are not seen as a priority by the principal funding agencies. This is because these agencies are primarily health or social services funders, and focus on the highest priority groups in their area of operation. There are a number of groups not presently served who would benefit from the provision of Housing Support, and this support if delivered in an appropriate and timely way meets wider Government policy objectives, helps to tackle social exclusion and brings improved outcomes across a number of policy areas.
48. As shown above a gap that has been identified by a number of providers is that current funding from HNZC is principally attached to residential support services. There are limited sources of funding that allow Housing Support to be provided for families and individuals in the wider community, though a range of needs, including housing problems, is seen as lacking. An example given is by the Monte Cecilia Trust in Auckland which states "Other agencies may be working with some of these families but rarely know how to deal with the housing problem or issues. Monte gets a lot of calls from other agencies as well as direct from families."
49. The NZCCSS report "Rising to the Challenge" (2006) also identifies a number of gaps in the support spectrum in relation to older people's housing. It says, "A great range of possible options exists across the continuum between residential aged care and full independent living. For low-income older people there are many accommodation and support gaps. There is a significant policy gap between social housing and care services, with funding and operational silos of the various

government agencies hindering innovation and initiative. In addition health care funders are reluctant to consider housing projects. Government and local authorities need to share some of the social risk taken on by social service providers in their work filling gaps in the support continuum for older people.” Whilst this report applies to older people’s support needs these comments relate equally across the support spectrum.^v

50. In 2006 HNZA carried out a review of Emergency Housing, producing a discussion paper on the needs and gaps in provision of emergency housing. Whilst this paper focuses on emergency housing rather than Housing Support more generally it does provide some useful insights into gaps in current provision of supported housing and Housing Support, as well as identifying a number of barriers to its development. These are discussed in more detail in Appendix 4.

The Case for a Strategic Approach to Housing Support

51. The case for taking a more strategic approach to the development and funding of additional Housing Support services is that they provide an important tool in the toolkit of interventions to tackle poverty and social exclusion. Investment in Housing Support services can prevent many longer-term problems requiring more expensive and less effective interventions, by tackling social problems before they become too embedded and supporting people into independent lives in their communities.
52. Housing Support services, where social, mental health, employment and other support services are linked to secure and affordable housing is a proven, cost-effective way to provide sustainable accommodation to people who face the most complex challenges. By providing these people with a way out of expensive crisis services back into their own homes and communities, Housing Support not only improves the lives of its service users but also generates significant public savings and improved social outcomes.
53. A compelling case for Housing Support is made by a study in the US, conducted by the University of Pennsylvania’s Centre for Mental Health Policy and Services Research. Researchers tracked the costs associated with nearly 5,000 mentally ill people in New York City for two years while they were homeless and two years after they were housed in supported housing. Among their conclusions: Supportive and transitional housing created average annual savings of US\$16,282 per person by reducing the use of public services. 72% of savings resulted from a decline in the use of public health services, 23% from a decline in night shelter use and 5% from reduced incarceration of homeless people with mental illness.^{vi}
54. The Supportive Housing Network of New York goes on to say, “Study after study attests to the cost effectiveness of supportive housing. Not only is it significantly less expensive than the institutional alternatives that homeless and disabled people often cycle through – including shelters, institutions and hospitals – it ends tenant’s dependence on emergency services for healthcare and treatment”. They go on to say that in New York City the average daily operating cost of supportive housing is US\$42 per day, compared to a night shelter (\$63), jail (\$165), a psychiatric hospital (\$467) or community hospital (\$1,185).^{vii}

55. In addition to having financial benefits, Housing Support has been shown to be effective in delivering improved outcomes across a number of areas. The US Corporation for Supportive Housing demonstrates that there was a decrease of more than 50% in emergency hospital inpatient admissions, a decrease in use of emergency detoxification services by 80% and increases in the use of preventative health care services.
56. Housing Support is also shown to have positive impacts on employment outcomes. The same source cites a 50% increase in tenants earned income, and shows an increase of 40% in the rate of participation in the labour market. There was also a marked decrease in dependence on benefit entitlements. Supported housing also has positive impacts on treating mental illness and in reducing or ending substance abuse.

Supporting Government Policies: Families - Young and Old

57. The Government has identified improving the affordability and quality of housing as a priority issue for the Families – young and old theme. The community-housing sector plays a role in supporting this theme by providing affordable housing to people in need. Housing Support services also specifically and tangibly contribute to outcomes that strengthen families, support healthy confident children, safe communities, better health for all and positive ageing.

Positive Ageing Strategy and Health of Older People Strategy

58. The New Zealand Positive Ageing Strategy reinforces the Government's commitment to promoting the value and participation of older people in communities. The Strategy's housing goal is to provide affordable and appropriate housing options for older people, and the ageing in place goal stipulates that older people feel safe and secure and can 'age-in-place'. The Health of older people strategy's action plan identifies how MOH and DHB funding should support services to provide flexible, co-ordinated support for older people to 'age-in-place'. In particular MOH aims to collaborate with providers of social housing (including community organisations) to promote the development of culturally appropriate supported living options for older people. Supported independent living has been identified as an important part of the care continuum to help people to 'age-in-place'.^{viii}

The New Zealand Housing Strategy

59. The Government's housing objectives are set out in the vision statement of the New Zealand Housing Strategy (the Housing Strategy) that... "All New Zealanders have access to affordable, sustainable, good quality housing appropriate to their needs." Area 2 of the Housing Strategy's programme of action supports the growth of the community-housing sector. The Government recognises that state tenancies and the AS alone cannot meet the increasingly diverse needs of lower income households. The Strategy goes on to say that the short term priority will be to support the expansion of social housing through the Housing Innovation Fund and the Local Government Fund, which provide assistance to community-based and local government housing providers. Whilst the Housing Strategy makes little specific reference to supported housing one of the work streams in Area 2 is to review funding policies and support for emergency housing. The Strategy goes on to say; "There is growing demand (particularly in Auckland) for emergency housing to meet

the immediate needs of people in housing crisis. There is also a shortage of appropriate and affordable long-term housing for people moving out of emergency accommodation, and a lack of services for single people.”^{ix}

The New Zealand Disability Strategy

60. The provision of Housing Support services also supports the New Zealand Disability Strategy (2001). Objective 8 of the strategy is to support quality living in the community for disabled people. Action 8.1 is to increase opportunities for disabled people to live in the community with choice of affordable, quality housing. The provision of tailored flexible support to people in their own homes clearly supports these aims.

Commentary on Overseas Housing Support and Funding

61. In Appendix 2, we have described a number of overseas Housing Support funding models, focusing primarily on the UK’s ‘Supporting People’ programme, Australia’s Supported Accommodation Assistance Program (SAAP) and the US Supportive Housing Program (SHP). I have also explored how social and institutional factors have influenced the development of supported housing in a number of European Union states. What all these overseas examples have in common, however, is that supported housing, and more recently new flexible models of Housing Support, are seen as important social policy interventions in responding to deinstitutionalisation and social exclusion agendas, especially homelessness. All the programmes discussed also share the fact that they are informed by a coherent national strategy led by Central Government (Federal Government in the US and Australia), but implemented at a local level, often by local government or non-government organisations. They also have in common the fact that both revenue and capital funding is provided for Housing Support.

A Strategy for Housing Support in New Zealand

62. We have demonstrated how Housing Support services can contribute to improved social, health and housing outcomes for a range of groups not currently provided for by existing contract funding. This is primarily as a result of the piecemeal and ad-hoc approach to funding that exists at present. This approach results in missed opportunities to improve the lives of vulnerable New Zealanders. Taking a more strategic approach to developing early intervention services such as those delivered by Housing Support providers will save the government and taxpayers, millions of dollars in more expensive interventions further down the line.

63. We propose that Government, led by the key agencies of MSD, HNZA, Corrections and the Ministry of Health, reviews its role in relation to funding for Housing Support. A “whole-of-government” strategic approach as demonstrated in the UK, Australia and USA would be the primary recommendation together with a new revenue-funding scheme of sufficient size to be able to fund a substantial increase in provision of Housing Support. This scheme also needs to be supported by a dedicated capital subsidy scheme to assist in the acquisition, development or modernisation of appropriate supported housing.

64. Funding for this scheme should come from a number of appropriations, including health, housing, social development and corrections, given the fact that a comprehensive Housing Support scheme would help all agencies to deliver on their high level and intermediate outcomes. Such a scheme would assist in delivering on all five of the Government's *Families – Young and Old* priority sub-themes of; strong families, healthy confident kids, safe communities, better health for all and positive ageing;
65. It is also recommended that funding for a comprehensive Housing Support scheme should be administered by a single agency, as in the UK 'Supporting people' programme. This approach will give the scheme coherence and will require MSD, Corrections, Health, HNZA and the NGO sector to work closely together to identify and agree funding priorities. The programme for Housing Support could be administered by any agency, though MSD or HNZA would be the logical choices, but ongoing mechanisms to ensure close cooperation between a range of "commissioning" and provider bodies and to review local, regional and national strategies will need to be built into any such programme.
66. Any new programme to support the development and funding of new Housing Support services needs to be designed to fund the full range of Housing Support, reflecting the 'continuum of care' approach, not just support tied to the direct provision of accommodation. It must be sufficiently flexible to successfully support the continuum of Housing Support models discussed earlier in this paper ranging from group homes to independent supported living.
67. This flexibility in funding would present opportunities for HNZA to enter into partnerships with providers to deliver Housing Support services to vulnerable state housing tenants. Given HNZA's increasing emphasis on housing those with the most severe and persistent housing needs, such partnerships would assist the Corporation to ensure its tenancies are sustainable. This would make a contribution to managing the "housing pathways" of state tenants more successful, leading to improved housing outcomes and increased chances of tenancies being sustained. Housing Support is also demonstrated to relieve much of the pressure on tenancy managers in dealing with high needs tenants.

Recommendations

1. That a "whole-of-government" Housing Support strategy is developed, recognising that appropriate Housing Support interventions improve the social, health and housing outcomes of vulnerable New Zealanders. This strategy should be developed in consultation with existing service providers and should identify the strategic priorities for the provision of Housing Support services.
2. That Government introduce a new funding programme, similar to the UK's "Supporting People" programme, to support the operating costs of providing Housing Support services, where these meet priorities identified in the national strategy. This programme should combine all the existing funding sources from all agencies including CYFs, Corrections, HNZA and DHBs, as well as seeking new appropriations from the full range of *Families – Young and Old* cluster agencies.

3. That this programme should also be accompanied by additional earmarked capital subsidy (such as the HIF programme) to support the development, acquisition and improvement of supported housing to meet the needs identified in the strategy.
4. That any future model of funding for Housing Support services is sufficiently flexible to allow the development of a range of services spanning the continuum of Housing Support. This will allow Housing Support to be delivered to vulnerable tenants irrespective of landlord or tenure
5. That current programmes and policy interventions such as HNZA's CGH programme are reviewed to ensure that they are meeting present need and supporting wider government policy initiatives and strategies.

This paper was written by Marc Slade of Koromiko Consulting, on behalf of:

- Community Housing Aotearoa Inc.
- Monte Cecilia Trust
- ComCare Trust
- The Friendship Trust
- Tauranga Community Housing Trust
- Wellington Housing Trust

Appendices

- Appendix 1 – Glossary of Terms
- Appendix 2 – Continuum of Housing Support
- Appendix 3 – Current Funding of Housing Support in NZ
- Appendix 4 – Analysis of gaps in provision and barriers by HNZA
- Appendix 5 – Overseas models of Housing Support funding
- Appendix 6 – Housing Support in NZ – Case studies
- Appendix 7 – Allocation of Rent Support for CGH Customers

Appendix 1 – Glossary of Terms

Please note this Glossary covers more terms than are discussed in this paper and has been adapted from a Glossary developed for the New Zealand Coalition to End Homelessness (NZCEH). Hopefully it will provide a useful resource beyond this paper.

Affordable housing	Affordable housing is accommodation where the total housing costs are affordable to those living in that housing unit. In the United States and Canada, a commonly accepted guideline for housing affordability is a housing cost that does not exceed 30% of a household's gross income, and this is increasingly the accepted threshold in NZ. Affordable housing is usually, though not exclusively, provided by social housing providers and can comprise of both rental and home ownership housing.
Accommodation Supplement	Accommodation Supplement is a non-taxable benefit that provides assistance towards accommodation costs. A person does not have to be receiving a benefit to qualify for Accommodation Supplement. It is administered by Work and Income, a business unit of MSD.
Bond Bank / Bond Guarantee Scheme	Bond Banks or Bond Guarantee Schemes enable people on low incomes or benefits to access accommodation in the private rented sector. They provide landlords with a written bond guarantee on the tenant's behalf in place of a cash bond. This is a guarantee by the scheme to the landlord that if at the end of the tenancy there are rent arrears or damage, the Bond Bank will reimburse the landlord up to the value of the agreed bond. These are now common in the UK as a response to homelessness and are usually managed by charities or councils. They can help people to move out of hostels or transitional housing when it is felt they are ready to sustain a tenancy. Some Bond Banks continue to offer support to tenants and offer advice to landlords.
Boarding House	A Boarding house is accommodation in which lodging alone or board and lodging is provided for six or more lodgers or boarders. This can be with or without the use of furniture, and includes; a guesthouse, rooming house, private hotel, hotel, motel, residential club, hostel and residential institution. In New Zealand many boarding houses provide accommodation to homeless people and other vulnerable people. Most boarding houses are operated by private landlords.
Capital Funding	Capital is spending on significant assets that will have a life of many years, such as new buildings and roads.
Case management	Case Management is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's health/housing needs through communication and available resources to promote quality cost-effective outcomes
Community housing	Community housing is social housing that is provided by not-for-profit community based groups. It can be either ' general needs ' or ' supported housing ', and providers range from small local trusts to large regional or national social services providers. The community housing sector in New Zealand also comprises Maori and iwi groups.
Community Group Housing	Community Group Housing (CGH) is a programme delivered by Housing New Zealand Corporation (HNZC). It provides rental homes for government-funded groups that provide residential community services.
Direct Access (Hostel)	A Direct Access hostel is a hostel or night shelter that will accept people at the door, usually without a referral from another agency.
Day Centre / Day Services	Day Centres (sometimes called Day Shelters) provide daytime facilities for homeless people, rough sleepers and night shelter residents.

	These usually include café facilities, access to free or cheap meals, practical facilities such as access to laundry and shower facilities, lockers for people to store belongings etc. They also often host health services, including primary health care (GPs, Nurses and Dentists etc) as well as more specialist services such as mental health and addictions services. Day centres can also provide information on vacancies and referral to hostels, night shelters and other forms of supported housing .
Emergency Housing	Emergency Housing is any form of temporary supported housing that offers accommodation to single people or families in an emergency. This includes Women's refuges , housing for people made homeless by a natural disaster such as fire or flood or direct access hostels for the homeless.
Floating Support	Floating support is a concept developed in the UK. Floating support is provided by staff who visit people in their homes. These services are usually open to people living in different types of accommodation, including those renting mainstream social housing , those living in private rental accommodation or in owner occupied housing. Floating support is often used in short-term periods of difficulty and can cover a range of issues, tailored to individual needs. For example, it may be used to help set up home, to gain access to other services, to develop independent living skills and for help with financial management. When an individual no longer needs support it can be discontinued, and services can 'float' to the next person in need. The support can also 'float' to follow a person through a number of types of accommodation.
General Needs Housing	General needs housing is a term for social housing that is provided for tenants who do not have high level special needs or support needs, but who are eligible for social housing on grounds such as low income or immediate housing need. This includes housing for single people, childless couples and families.
Group Homes	Group homes are small, residential care facilities located within a community and designed to serve children or adults with chronic disabilities or other severe social problems. These homes usually have six or fewer occupants and are staffed 24 hours a day by trained caregivers.
Homelessness - primary	Primary homelessness describes people who don't have any conventional accommodation, and who are sleeping rough, living in deserted buildings, sleeping in parks, improvised dwellings, sleeping in cars etc.
Homelessness - secondary	Secondary homelessness describes people who don't have their own accommodation but who are moving between various forms of temporary shelter including; sofa surfing (staying with friends and relatives), emergency accommodation such as night shelters , women's refuges etc. or staying temporarily in hostels, boarding houses or camping grounds.
Homelessness - tertiary	Tertiary homelessness describes people living longer term in accommodation with little security of tenure and often with inadequate, shared kitchen and bathroom facilities such as hostels, boarding houses and camping grounds.
Housing Advice	Housing Advice is the provision of specialist free advice and advocacy services on people's housing rights, landlord & tenant law, housing debt counselling, housing options etc. Housing Advice services are usually provided by not-for profit agencies or local authorities. They can often represent people in courts and tribunals relating to housing issues, and play an important role in preventing people from becoming homeless.

	They can also advocate for people against decisions made by statutory agencies where they have a duty towards homeless people.
Housing Facilitation	Housing facilitation refers to a service which acts as a “broker” for people to access housing. This involves developing links with a range of accommodation providers ranging from motel owners, private landlords to local authorities or specialist accommodation providers. In NZ housing facilitation services are primarily focused on assisting mental health consumers to find accommodation.
Housing Assistance Direct	- Direct Housing Assistance involves the provision of “bricks & mortar” housing. This is usually subsidised making rents affordable to people on low incomes. It can be provided directly by central or local government, or via a third party such as a Housing Trust or Housing Association, with capital and/or revenue subsidy provided by the state.
Housing Assistance Indirect	- Indirect Housing Assistance refers to subsidies paid directly to individuals in the form of either a rent rebate, tax credit or rent allowance to help them afford their housing costs. These can cover both rental or mortgage payments. In New Zealand Accommodation Supplement is an example of indirect housing assistance.
Housing Support	Housing Support is the provision of services to vulnerable tenants/owners in their own homes. The primary purpose of Housing Support is to develop and sustain an individual’s capacity to live independently in their own home. Examples of Housing Support services include enabling individuals to access their correct benefit entitlement, ensuring they have the necessary skills to maintain a tenancy, advising on repairs and accessing services in their community.
Property Management	Property management is the operation of commercial and/or residential real estate. Roles include acting as liaison between the landlord and tenant. Duties of property management include accepting rent, responding to and addressing maintenance issues, advertising vacancies for landlords, and doing credit and background checks on tenants. Property management is sometimes described as tenancy management and asset/facilities management. These are both functions of property management.
Revenue Funding	Revenue is spending on day-to-day items to run services, such as staffing, supplies and purchase of services from a variety of external providers. It also includes charges made to some service recipients.
Night Shelter	Night shelters are temporary emergency housing projects for homeless people. They are usually open to anyone, without regard to the reason for need. Some shelters limit their clientele by gender or age (e.g. men only). Most night shelters expect clients to stay elsewhere during the day, returning only to sleep, or if the shelter also provides meals, to eat. Night shelters are often set up and operated by a non-profit agency, a municipal agency or are associated with a church. Many get at least part of their funding from local government entities. Some night shelters also provide other services, such as a soup kitchen, job seeking skills training, job training, job placement, support groups, and/or substance (i.e., drugs and/or alcohol) abuse treatment. If they do not offer any of these services, they can usually refer their clients to agencies that do.
Residential Care	Residential care is provided for people who cannot live in their own home, even with support from home care services. Residential care can be provided over a short term (known as respite care), over a longer period or permanently. Residential care facilities usually provide single rooms, and are usually staffed 24 hours a day. Residential care can be delivered in group homes , located within a community or as larger

	more institutional facilities. Residential care facilities normally provide accommodation, meals, and 'personal care'. Personal care can include such things as assistance in getting up or going to bed, eating, washing, dressing, and using the toilet. Client groups include; people with significant physical disabilities, frail elderly, learning disabilities, mental ill-health, an alcohol or drug dependency, or are at risk of injury or abuse.
Sheltered Housing	Sheltered housing is a term covering a wide range of social housing for older and/or disabled or other vulnerable people. Most commonly it refers to grouped housing such as a block or "scheme" of flats or bungalows with a scheme manager or "officer"; traditionally the manager has lived on-site although this is not always the case these days. (Managers/officers used to be called "wardens" but this term is now felt to be out of date.) Sheltered housing schemes are generally owned, run and maintained by a housing trust, usually a not-for-profit organisation which works closely with and is part-funded by the local authority. Sheltered housing is a term most commonly encountered in the UK.
Social housing	Rental housing which may be owned and managed by the state, local government or by not-for-profit organizations such as housing trusts or housing associations. Social housing usually has the aim of providing affordable housing to people with some level of housing need.
Social Services	Social Service agencies are concerned with social problems, their causes, their solutions and their human impacts. Social workers work with individuals, families, groups and communities. Social services are committed to the pursuit of social justice, to the enhancement of the quality of life, and to the development of the full potential of each individual, group and community in society. Social services can be delivered by central or local government agencies or NGOs.
Supported Independent Living	Supported Independent Living is a situation in which people live in accommodation that is not tied to or dependent on the provision of specialist services. People in supported independent living situations receive support from a Housing Support agency, however, this is delivered by visiting staff rather than on-site staff. Accommodation is usually let on a standard tenancy agreement with all the associated rights and responsibilities. (Also Independent Supported Living OR Supported Independent Accommodation)
Supported Housing	Supported housing is the provision of support services linked to the provision of housing, either short or long term. The support is usually provided by the same agency as the landlord, often a specialist non-government supported housing or social services agency. Once the client no longer needs the support offered they are required to find alternative accommodation. This is also known as "supportive housing" in Canada and the USA.
Tenancy Management	Tenancy management refers primarily to the function of property management connected with landlord/tenant relations rather than with repairs and building maintenance issues.
Tenancy Support	Tenancy Support is a sub-set of Housing Support , and usually refers to support provided to people in independent or "mainstream" tenancies rather than in specialised supported housing .
Transitional Housing	Transitional housing assists people who are ready to move beyond emergency housing into a more independent living situation. Transitional programs allow individuals and families to further develop the stability, confidence, and coping skills needed to sustain permanent

	housing. Some transitional housing is self-contained apartment-style housing, while some may be consist of shared housing where several families or individuals share a household.
Wet House	Wet houses are residential facilities that aim to minimise the harmful consequences of residents' drinking patterns, while providing a stable, culturally appropriate living environment which encourages a reduction in alcohol consumption.
Women's Refuge	Women's refuges are supported housing projects targeted at women and children escaping domestic/family violence. They are usually run as emergency housing offering relatively short term services. They do, however, support women to re-establish themselves in independent accommodation. They are often linked to, or deliver specialist counselling and child care services.

Appendix 2 - Continuum of Housing Support

Institutional care (Residential Care)	Group Homes (Residential Care)	Emergency Hostels/Shelters (Supported Housing)	Transitional Housing (Supported Housing)	Dispersed Supported Tenancies (Outreach Support)	Independent Supported Living (Outreach Support)	Independent Living
Care provided in an institutional setting e.g. a hospital or aged care rest home. The primary purpose of the accommodation is the provision of a service rather than being a 'home'. Can include acute in-patient wards, long term institutional care for people with high levels of need. Can be short term/temporary, e.g. psych wards.	Shared accommodation of varying sizes, but relatively small, and located in residential communities. Often permanent. Staff usually on site 24 hours. Cater for people with specific needs, often requiring high levels of support, often ongoing, including nursing & domiciliary care. Often people moved from institutional care	Shared accommodation of varying sizes, but relatively small. This is principally of a short term & temporary nature, often for emergencies such as homelessness, domestic violence etc.	Specialist housing targeted at specific needs groups. It's intention is to assist people who are ready to move on from more intensively supported accommodation but who still require some level of support. Often staffed during the day with some office and communal space on site, and linked to programmes of 'rehabilitation'.	Similar to transitional housing, but clients live in properties dispersed throughout the community. property not designed with specialist use in mind. Tenancy owned or managed by the support provider, however, so occupation is linked to the provision of support	Housing provided by a 'mainstream' landlord (social or private) Support provided by a separate provider. Occupation is not dependent on provision of support. Sometimes support delivered to people in their own homes without having to have been in other forms of supported housing, but often end stage of 'rehabilitation'. Support can be 'floating' leaving the person when need reduced	Totally independent living with no specialist support. Any health/support needs met through 'mainstream' services delivered in the community (e.g. GPs, primary care etc.)
<ul style="list-style-type: none"> • Mental illness • Intellectual disability • Physical disability • Older persons care 	<ul style="list-style-type: none"> • Mental illness • Physical disability • Intellectual disability 	<ul style="list-style-type: none"> • Homeless • Domestic violence (women's refuges) • Ex-offenders • Drugs & Alcohol (detox) 	<ul style="list-style-type: none"> • Homeless • Domestic violence • Ex-offenders • Drug & Alcohol • Young people at risk 	Any of the client groups capable of living independently with low levels of support	Any of the client groups capable of living independently with low levels of support	Any group not requiring regular specialist support
No tenure rights Accommodation linked to service	No tenure rights Accommodation linked to service	No tenure rights Accommodation linked to service	Limited tenure rights Accommodation linked to service	Full tenure rights Accommodation linked to service	Full tenure rights Accommodation not linked to service	Full tenure rights (private, social or owner occupied)

Appendix 3 - Housing Support Funding in New Zealand

1. This section maps and evaluates the current sources of funding available for Housing Support in New Zealand. This consists primarily of funding from government agencies and District Health Boards. Although some organisations have successfully applied for funding from other sources, such as charitable funders including the Lotteries Board, Trusts, Foundations etc, I have not covered these here as they are generally not sustainable for long-term services and the decision criteria vary widely, and are often project based. This is not to undervalue the role that such funders can play in supporting new and innovative demonstration projects.

Government Contract funding

Child Youth & Family and the Ministry of Social Development

2. The Ministry of Social Development's Child Youth & Family (CYF) business unit manages a fund for contracting with community groups to support CYF outcomes. This is managed by the CYF Contracting Group. The Contracting Group commissions and contracts with community organisations. It provides social services for children, young people, families and communities.
3. The total budget for Family Service funding covers:
 - Counselling and Rehabilitation Services \$10.963 million
 - Education and Prevention programmes \$5.711m
 - Support Programmes to Families \$40.697m
 - Provider Development \$4.866m
 - (No information is available to indicate how much of this funds Housing Support services.)
4. In Budget 2005, CYF received a non-departmental appropriation of \$900,000 per annum to fund 'emergency and special purposes housing and associated services'. This appropriation was earmarked for the provision of emergency accommodation and short-term support for accommodation assistance, with the aim of providing temporary shelter for individuals and families who have difficulties in accessing permanent accommodation. This fund no longer exists and CYF have stated:
5. "Child, Youth and Family are not funded to assist supported housing and accommodation related expenditure. Child, Youth and Family funding is focussed on supporting community-based service provision services for vulnerable families and children. With respect to the 'Emergency and Special Purpose Housing and Associated services' fund, the focus of the fund was supporting service providers, in their provision of broad family support activities and personal support services, such as counselling. This fund's purpose was not for supporting or alleviating tenancy, accommodation, or other property holding charges. The fund no longer exists. Similar service provision to vulnerable families and their children is now supported through Housing with Support Services, where the focus remains on assisting with the service provision, such as counselling, as opposed alleviating tenancy, accommodation, or other property holding costs."^x
6. The Ministry of Social Development's Family and Community Services provides funding to NGOs through the Community Initiatives Fund. This does not specifically

fund supported housing projects but may fund projects that provide Housing Support and advocacy services.”

Ministry of Health & District Health Boards

7. Health funding for accommodation and support services is targeted at a number of priority groups. The groups considered here are primarily mental health consumers, however DHBs do fund services for older people living independently. Residential and accommodation-related support for people with disabilities is funded by the Ministry of Health and is outside the scope of this paper.

Mental Health Services

8. District Health Boards provide contract funding to service providers to provide mental health support services. This can include direct provision of supported housing or Housing Support by DHBs, but this is being increasingly delivered by Non-Government Organisations (NGOs) and is predominantly community based. DHB's fund a continuum of services, ranging from the “high-end” residential supported housing schemes, primarily targeted at people with severe and enduring mental health needs, intermediate level services to community based services to people in their own homes. Funding for the high-level residential care services includes a “hotel services” element that allows providers to lease premises and does cover some of the costs associated with the provision of accommodation as well as care and support.
9. DHB funding for intermediate supported housing is often paid on a ‘\$ per bed per day’ rate, and is expected to cover care and support rather than accommodation, chattels, intensive tenancy management etc. which DHBs see as the responsibility of other government agencies including HNZA and MSD.
10. DHB contract funding can take a number of forms, dependent on the services provided. One such form is the “supported landlord contract”. These are usually set up to facilitate move-on from more institutional settings, and the tenancies are normally time-limited. Supported landlord contracts are usually based on an agreed number of Full Time Equivalent (FTE) staff and targets around number of people assisted over a given period.
11. The other common funding mechanism is the “bulk contract”. These are normally paid on fixed per-capita rates for assisting an agreed number of clients over a given time. In some DHB areas flexible contracts are used which focus on agreed outcomes rather than specific services. This means that providers can use funding more flexibly and innovatively to meet client needs, provided that they can demonstrate that they achieve the outcomes specified in the contract.
12. The Ministry of Health provides funding for Home Based Support Services. This is targeted at people under 65 who are assessed as having a disability and provides support with basic household management tasks. This funding is not relevant to Housing Support services. The Ministry also funds Community residential support services. Again this is targeted at people, under 65, who are assessed as being disabled, and provides contract funding to providers for residential, group-home type supported housing. This funding includes residential services for people with intellectual, sensory and physical disabilities.

Department of Corrections

13. The Department of Corrections contracts with organisations such as the Salvation Army, NZ Prisoner Aid and Rehabilitation Service (NZPARS) and The Prison Fellowship to support the successful rehabilitation of offenders back into the community. Whilst this is generally community based, some of these contracts relate to Housing Support services and supported housing. The Salvation Army recently secured a contract to run the Bridge Programme, based in Auckland, Wellington, Upper and Lower Hutt, Christchurch and Dunedin. In addition Corrections fund a number of other specialist providers offering specialist residential treatment facilities, focusing on alcohol and drugs rehabilitation services. These are all temporary release options to assist with the reintegration or rehabilitation of prisoners. The Prison Fellowship's Operation Jericho provides support with finding and retaining accommodation for Christian prisoners on release in Wellington.

Corrections Supported Accommodation Services

14. The total budget for Supported Accommodation is \$1,081 million - an additional \$0.5 million has been secured this year up until 2012. Supported accommodation services provide housing and other help for offenders with high-level reintegrative needs to help ease their transition back into the community. Most users are referred before they leave prison; others may already be in the community but have similar needs. Corrections has contracted providers in several locations around the country to provide both accommodation and other re-integrative support services.

15. Supported accommodation services target offenders who:

- have no suitable accommodation when due for release
- have a number of high-level reintegrative needs in their sentence plan
- require assistance with basic living, literacy and numeracy skills and help with gaining employment
- wish to live an offence-free lifestyle.

16. Supported accommodation services currently offer 51 beds. This is set to increase to 56+ beds by 2008/09. The Department of Corrections is looking to expand supported accommodation services to more locations in the next year. These will be announced once contracts have been secured.

17. Probation officers can refer eligible offenders to a service provider for assessment. This usually happens during the pre-release process before a prisoner is released. Probation officers can also refer offenders who are on parole if their accommodation becomes unavailable and the offender has a number of other high level reintegrative needs. Referrals are made using the Supported Accommodation Service Referral Process, which is currently being developed.

18. Offenders are provided with temporary accommodation for up to three months, during which time they find permanent accommodation to move to. They then have access to support for their reintegrative needs for a further three months. Offenders using the service are encouraged to increase their level of self-reliance and to develop and practice "pro-social" behaviour. They're also helped to find their own long-term accommodation. Offenders participating in the supported accommodation service also get help with money management, housekeeping, literacy and numeracy, finding work or training, forming positive links with the community, and

support to comply with their community-based sentence or order^{xi}.

Accommodation Supplement

19. Accommodation Supplement (AS) is a non-taxable benefit that provides assistance towards a client's accommodation costs. AS is paid when a client's accommodation costs are more than the entry threshold. The entry threshold varies depending on the family situation. For every dollar over the entry threshold that a client pays in accommodation costs they receive a 70% subsidy. This subsidy has a limit that differs from region to region. (Boarders are eligible for the 70% subsidy on the portion of their board that is considered accommodation costs (62%) but not their total board costs).
20. The amount that a person is entitled to may be reduced depending on the level of their income or assets. There are maximum amounts of Accommodation Supplement that can be paid and these depend on family size and the region of the country the client lives in.
21. AS does not pay the cost of Housing Support. Neither does it pay for accommodation if the applicant is assessed as requiring care, in respect of whom a funder (MoH/DHB) is paying some or all of the cost of contracted care services. In addition AS will not pay for accommodation for someone who has a psychiatric, intellectual, physical or sensory disability, and his or her accommodation costs are wholly or partly funded under the New Zealand Public Health and Disability Act 2000. These exemptions apply to the provision of residential care, which is outside the scope of this paper.

Housing New Zealand Corporation Programmes

Community Group Housing

22. Community Group Housing is a programme delivered by HNZC. It provides rental homes for government-funded groups that provide residential community services. These include groups that work with:
 - People who experience mental illness
 - People with disabilities
 - Women seeking refuge
 - At-risk youth
 - People needing emergency housing.
23. Under the CGH programme service providers (CGH customers) lease a property from HNZC to meet a specific need. Properties are usually purchased by HNZC on the open market to meet the specific requirements of the customer, however existing HNZC properties may also be used if they are suitable. Once a property is identified HNZC works with the customer to ensure the property meets the need of the service by carrying out any necessary modernisations and adaptations. There is generally no limit to the length of the lease provided the property is used for its original purpose. HNZC retains the ownership of the property. Eligibility for CGH assistance is based on a provider having a government contract for the service being provided and registration as a Trust or Incorporated Society. Most CGH customers receive funding from either the Ministry of Health (via DHBs) or Child, Youth and Families (CYF).

24. The property is leased to the CGH customer under a commercial lease at a market rent. The CGH customer then sub-lets to their clients. HNZN remains responsible for repairs and maintenance to the property. The expectation is that groups will receive contract funding that will cover the cost of rent, plus the costs of any support services provided. Groups may pass on a charge to the user, dependent on the funding arrangement in place. In some cases the service's clients can claim Accommodation Supplement (AS) from Work and Income to help cover the cost of the rent, and this subsidy is passed back to the provider. However, in some cases clients are not eligible for AS. AS only covers a portion of the rental costs, and not support related services.

The Rent Support Scheme

25. HNZN operates a discretionary Rent Support Scheme (RSS) for CGH customers, which recently replaced the Rent Relief Fund (RRF). The amount of Rent Support varies depending on the nature of the services offered. This ranges from 0% rent support for independent supported living arrangements, and for office space and staff accommodation, through to between 70% and 90% support for residential and other accommodation based services. Each year, the Corporation receives \$4.5m in appropriated funding to subsidize market rent for Community Group Housing customers, who meet the new criteria. (Appendix 5 for RSS criteria)
26. RSS sets a cap of \$53pw for the amount charged to clients, after which the amount of Rent Support is reduced dollar for dollar if providers increase their charges. This provides a disincentive for providers to increase user charges to help meet any shortfall in income. See Appendix 4 for Allocation of Rent Support for CGH Customers.
27. The policy rationale behind the change to the RSS and for reducing revenue subsidy to some groups was that some were seen to be "double dipping". This is because in some cases they received contract funding to provide accommodation based services in addition to Rent Relief Fund subsidy. The review also signalled that the Corporation is moving away from supporting organisations that provide supported independent living, arguing that the existing housing market, including the social housing sector, can take care of these needs. The Corporation also states that it does not support hospital or very intensive care type services. This indicates that the Corporation sees its primary function as providing group home type accommodation.

Commentary on the CGH Programme and the RSS

28. The policy rationale for HNZN providing CGH support is to meet a failure in existing markets, i.e. that private landlords are unwilling or unable to provide the kind of specialist properties that are required by some groups to provide supported housing.
29. An issue that is being increasingly identified as a problem by service providers is that government contracts, especially health contracts, only pay for the provision of support, and do not cover housing costs. Health funders argue that this is a housing responsibility that they should not be subsidising. The withdrawal of revenue subsidy by HNZN, and the inadequacy of the AS to meet the full housing costs of some groups results in a funding vacuum for providers offering Housing Support services.

30. CGH has traditionally provided housing for “group home” schemes (see Glossary). However, a recent review of the subsidy arrangements conducted by HNZC found that providers were increasingly moving towards a “supported independent living” model. The Corporation identified in its review that it did not see itself as having a role in meeting this need, and supported independent living schemes were no longer eligible for subsidy under the Rent Support Scheme. HNZC appears to be refocusing CGH on meeting the “core business” of providing group homes to agencies providing higher levels of care and support. It is also understood that the Corporation is currently reviewing CGH rents to ensure that they reflect an actual market rent.
31. CGH is not a revenue subsidy, but a form of capital subsidy (the Rent Support Scheme is a form of revenue subsidy). HNZC purchases the property on behalf of the provider and retains ownership and ongoing liability for the management of the property and charges a market rent for this. In effect, therefore, HNZC is acting as any other private sector landlord. Limitations of CGH include that it does not develop the capacity of the provider, as it neither develops an asset that can be used to attract further funding, nor in most cases does it receive a revenue subsidy to cushion the costs of renting the property. The only advantages to service providers of accessing CGH properties are security of tenure and assistance with carrying out adaptations. HNZC could also be argued to be a more sympathetic landlord than some private landlords.
32. Whilst recognising that CGH has a useful role to play, the issues discussed pose the question as to whether the CGH programme is still the most appropriate or flexible intervention to support community-housing providers? CGH in its current form does not seem to meet the emerging needs of providers and their client groups or to be a good fit with emerging models of care and support. It is suggested, therefore, that the Corporation can either review the current operation of CGH to develop a better fit with the need, or consider the development of a new product/programme that does meet these needs. This may incorporate capital and revenue subsidy and needs to recognise the importance of flexibility in supporting a continuum of services to meet support needs.
33. The Corporation’s current approach to CGH of charging market rents and reducing the amount of revenue subsidy available to CGH customers appears to be at odds with the Corporation’s current status as a Crown Agency and its legislative brief of giving effect to the Crown’s social objectives. Instead it bears a closer resemblance to the policies of Housing New Zealand Limited under the National Government, when it was classed as a State Owned Enterprise with commercial objectives.

The Housing Innovation Fund

34. Whilst not specifically targeted at supported housing providers, the Housing Innovation Fund (HIF) can assist some providers to develop accommodation. HIF is an HNZC programme that provides housing loans and support for community groups, organisations, Maori and iwi. It aims to encourage more community-based social housing and home ownership opportunities for people on low incomes or with special housing needs. Applicants need to show how their project would meet an identified housing need, such as:

- households whose housing needs are not fully met by Housing New Zealand or the private market, such as iwi and Maori, Pacific peoples, older people and those with disabilities
- low or moderate-income households whose housing needs are not met in the private market but for whom no suitable alternative exists.

35. HNZC administers the HIF, which includes low-interest loans and conditional grants. These are intended to assist community-based organisations to buy, build or modify rental accommodation or to develop affordable home-ownership projects. Grants are also available to support the development of community-based organisations and their projects.

36. Groups that get funding are expected to:

- meet at least 15% of the total project costs from their own resources
- have an allocation process that targets low income and/or special needs groups
- have policies and processes so properties are well maintained and managed
- keep their rental housing/investment in the social housing pool for the long-term
- and demonstrate evidence of community support.

37. Whilst the Housing Innovation Fund is not specifically targeted at supporting housing providers it has been used successfully to develop supported housing in a number of areas. Three Case studies include:

New Flats in Christchurch for ComCare

The ComCare Trust in Christchurch is building three new complexes totalling 12 one-bedroom flats using the Housing Innovation Fund. The project will provide housing for people who experience mental illness but who wish to live independently. The design has prioritised privacy, personal space, good soundproofing and small clusters of homes rather than a large block.

Extending Social Housing in the Central City, CORT

The Community of Refuge Trust (CORT) is adding to its portfolio of properties in central Auckland with the help of the Housing Innovation Fund. CORT provides low-cost housing for people who need it, including people with mental health issues. 15 flats have been purchased by CORT, and use of HIF has meant that rents can be kept at affordable levels. HIF financed 85% of the purchase price with a mix of conditional grant and interest free loan for 10 years.

“Short Term” houses for Monte Cecilia Housing Trust

Monte Cecilia Housing Trust has been able to purchase 6 three bedroom houses (2 in South Auckland and 4 in Waitakere City) with funding from HIF and the ASB Community Trust. Families that will benefit from a longer period of support than can be provided in emergency housing are offered fixed term tenancies of up to 2 years. A tenancy management service is provided and rents are 75% of market rents and are on average \$80 a week lower. In addition the Trust’s Housing Social Workers continue to work alongside families as they progress along the pathway from dependence to independence.

38. By offering subsidised lending HIF does assist housing providers to charge sub-market rents, thus better meeting the needs of low-income clients. HIF does have some limitations, however, primarily that the scale of funding is comparatively small and that it is unable to meet the demand for it. The fact that some supported housing projects, especially emergency/crisis housing, have less reliable income streams than mainstream social housing, means that they may not meet the financial requirements of HIF.

Appendix 4 – Analysis of Gaps and Barriers by HNZN

Gaps in provision identified by HNZN

1. The HNZN paper previously cited^{xii} states, “A range of gaps in emergency housing provision have been identified. However, the most commonly identified gap...is the lack of transitional housing, housing that delivers services and support so that a household or an individual can move to a sustainable housing solution.” It goes on to say that current CYF funding focuses on families, leaving a gap for single people of all ages. It then identifies specific gaps for specific client groups. These include:
 - **Primary homeless and night shelters** – the lack of night shelter provision was identified as a problem in a range of locations, including inadequate number of bed spaces in Auckland and other cities, and a complete lack of provision in a number of provincial towns and cities.
 - **Supported housing for released prisoners** – Corrections stated that there was a particular need for supported and transitional living that would help ex-prisoners find sustainable accommodation. Currently there are few community-based groups providing emergency or transitional accommodation for released prisoners.
 - **Domestic violence services for women and families** – Women’s refuges were heavily over subscribed, resulting in single women often not being assisted in preference to women with children. In addition more transitional housing would allow a faster throughput from refuges, freeing up bed spaces.
 - **Mental health consumers** – A gap exists where mental health consumers do not meet the criteria for assistance. Assistance is targeted at those with the most acute needs, resulting in a lack of services for people with lower level needs and preventative services. This can result in these people experiencing crises and needing far more intensive and costly interventions.
 - **Emergency and transitional housing for men, and men with children** – Housing for single men, especially men with care of children was identified as a gap. One organisation commented that there was a need for accommodation for men leaving abusive relationships.
 - **Emergency and transitional housing for homeless families** – The report found that not many emergency housing providers catered for families, especially large families, although it was identified that the focus of the CYF Emergency Housing Fund on families created a gap in funding for projects working with single people of both genders.
 - **Older people** – Emergency and transitional accommodation for single older people was identified as another gap in service. Older people in privately rented housing are especially vulnerable, in part due to increasing market values encouraging landlords to sell, as well as the impacts of increased housing costs.

Given the increase in the number of older people as a proportion of the population this was identified as an area of potential growth in demand.

- **Youth** – Many of the organisations consulted in the production of the report identified a gap in provision for young people. Young people are at an additional disadvantage in the housing market because the level of benefits they receive is lower than for adults. With or without benefits, it is often difficult for young people to access accommodation. Young people are also more vulnerable than adults and need higher levels of support to help them transition into sustainable tenancies.
2. The paper seeks to quantify the level of demand for emergency housing by analysing HNZC's waiting list, identifying those that could be classed as homeless (using Chamberlain and Mackenzie's definition of primary, secondary and tertiary homelessness). This analysis found that at 31 December 2005 there were 1048 people who could be classed as homeless. It also noted that the proportion of Maori who are homeless on the waiting list is significantly higher than the proportion of Maori on the list. It goes on to suggest that any solution to homelessness needs to be established in partnership with Maori.
 3. Whilst the number of people deemed to be "homeless" doesn't provide a direct indication of the number needing Housing Support (this number will be much higher), it is a useful indicator of the number needing emergency and transitional accommodation. It is also likely that this number is an under-representation of those needing emergency housing, as it does not take into account those that do not approach HNZC, as they do not think they will get assistance.

Barriers to provision identified by HNZC

4. The HNZC paper consulted a number of emergency and supported housing providers in its preparation. A number of these identified a range of barriers in the provision of emergency housing. Primary amongst these was a lack of funding. In addition the nature of the funding that is available was identified as an issue. Several commented that much of the current funding is not secure or continuous, making the sustainable provision of services difficult. This was in part due to current contracting arrangements which are often short term, and susceptible to changing priorities of funding bodies.
5. Another perceived barrier was the fragmentation of funding between a range of agencies, and the lack of a specific funding source for emergency housing (or Housing Support). "Organisations also felt it was difficult to obtain funding for the complete cost of a service. The cost of staff was repeatedly identified as the most expensive part of providing emergency (and supported) housing."
6. The configuration of the current HNZC programmes, CGH and HIF, were also identified as a barrier. Many organisations identified the policy of charging CGH customers a full market rent as a barrier. They also saw the requirements of HIF funding as a barrier to the provision of emergency housing, given the insecurity of rental income for this type of housing.

Appendix 5 – Overseas Models of Housing Support and Funding

United Kingdom – The ‘Supporting People’ Programme

1. ‘Supporting People’ is an integrated policy and funding framework for Housing Support services introduced in 2003. The aim of Supporting People is to provide good quality services, focused on the needs of users, to enable vulnerable people to live independently in the community in all types of accommodation and tenure.
2. In the UK, as in New Zealand, Housing Support services had grown in a fairly ad-hoc way in response to the needs of individuals or of the tenants of a particular landlord. Previously Housing Support services were funded from a number of sources, including Housing Benefit (later the Transitional Housing Benefit Scheme), Special Needs Allowance Package and DSS Resettlement Grant.
3. In many cases support providers had classed support charges as a service charge, and lumped it in as part of the total rent. Tenants could then claim assistance to meet these costs through Housing Benefit. However, a number of court cases between 1993 and 1997 highlighted conflicting interpretations of what Housing Benefit could or could not lawfully fund. The last of these cases had ruled that only services concerned with the fabric of the dwelling relate to the *provision of adequate accommodation* could be funded through Housing Benefit and ruled that payment for support charges did not fall within the policy intent of the Housing Benefit scheme and were, therefore, no longer eligible.
4. This was the primary driver for the rationalisation of supported housing funding and the introduction of Supporting People. Following the ruling the Transitional Housing Benefit Scheme was introduced in 2000, with the intention of providing interim protection for providers until an appropriate policy response to the ruling was developed. In 2003 all the existing sources of funding were combined and transferred to local authorities to administer under the Supporting People (SP) programme.
5. Under SP local authorities and their partners, including health agencies, probation, service providers and service user groups were charged with assessing the overall levels of need in their areas and commissioning appropriate services to meet those needs, funding them on a contract basis. Strategic planning for Supporting People is linked to the Local Housing Strategy and other plans for community care, health improvement, social inclusion etc. Also for the first time services became subject to quality monitoring, having to meet the SP Quality Assurance Framework (QAF), and are reviewed on a regular basis by the commissioning body.
6. In addition to the revenue funding provided through Supporting People, supported housing providers can also access capital subsidy, Social Housing Grant (SHG), administered by the Housing Corporation. Registered Social Landlords (RSLs) can apply for SHG to develop supported housing, but have to demonstrate that they are addressing a priority identified in the National Affordable Housing Programme. Tackling homelessness and meeting the needs of vulnerable people are both priorities identified in the 2008-11 programme. To access capital funding RSLs have to demonstrate that they meet local Supporting People Strategies and can attract

revenue subsidy to make schemes sustainable. The latest prospectus for 2008-11 says “We expect to fund more supported housing than we did in the 2006-08 programme, when we invested in 6,724 (supported housing) homes”.

Australia – Supported Accommodation Assistance Program

7. The Supported Accommodation Assistance Program (SAAP) was established in 1985 to bring homelessness programmes funded by individual state and territory governments and the Commonwealth under one nationally coordinated programme. SAAP is Australia’s primary response to homelessness. The Australian Government takes the policy leadership role whilst state and territory governments are responsible for day-to-day management of the programme.
8. SAAP aims to assist people who are homeless or at risk of becoming homeless to achieve the maximum possible degree of self-reliance and independence by providing transitional supported accommodation and a range of related support services. The people that can receive assistance under SAAP include; young people, families, women and children escaping domestic violence, older homeless men, single women and men and people of Aboriginal and Torres Strait Islander descent.
9. The government’s financial commitment to the current programme, SAAP V (2005-2010), is A\$932 million over five years. Of this A\$892 million will go directly to state and territory governments to help them meet their partnership responsibilities. The remaining A\$40 million will be invested in SAAP Innovation and Investment Fund Pilot Projects^{1xiii}.
10. The SAAP V has three strategic priorities over the life of the programme. These are:
 - **Pre-crisis intervention** for people who are at imminent risk of homelessness. Investment in this area recognises that timely intervention leading to the prevention of homelessness can often minimise or prevent a range of secondary problems such as loss of employment and disruption to a client’s (and their children’s) social and educational networks and supports.
 - **Post-crisis transition** support for clients exiting SAAP services. Targeted support provided at this time can provide clients with the skills, confidence and management strategies to enable them to secure and maintain appropriate long-term housing. The primary target group for this priority area are clients that have multiple or complex support needs, such as mental health issues, drug or alcohol addiction or experience long-term unemployment. These clients are inclined to experience cyclical or chronic homelessness.
 - **Better linkages** to allied support services and government and non-government agencies in areas such as health, education and employment services. The emphasis on improved linkages recognises that the causes of homelessness are generally varied and complex. As such addressing the causes of homelessness and finding sustainable solutions can require the development and implementation of a tailored suite of well-coordinated supports.

USA – HUD Supportive Housing Program

11. In the US the Federal Government Department of Housing and Urban Development (HUD) delivers the Supportive Housing Program (SHP). Like the Australian SAAP this is targeted at tackling homelessness and allowing people to live as independently as possible. State governments, local government, Primary Health Agencies and non-profit agencies can all access the SHP. SHP funding is contestable, grants being awarded annually. SHP provides both capital and revenue subsidies.
12. The SHP covers the full range of activities required to develop and deliver supportive housing. It also covers Support Services Only (SSO) projects where the support is delivered separately from the provision of accommodation. Eligible activities under SHP include:
 - Acquisition
 - Rehabilitation
 - New construction
 - Leasing
 - Supportive services
 - Operating costs
 - Administrative costs
 - Other purposes not listedEligibility criteria and cost ceilings for each activity are clearly stipulated in HUD guidance^{xiv}.

Housing Support in the European Union

13. Supported housing in Europe takes many forms. In this section I will describe some of the drivers behind the development of supported housing in a number of different EU countries.
14. In Denmark legislation passed in 1998 provided a statutory framework for the provision of supported housing. This legislation makes it the responsibility of the municipality (local government) to ensure that measures exist to provide for “assistance, care and general support” as well as for the “rehabilitation for people who are in need due to physical or mental disabilities or with special social problems (including homelessness and drug addiction)”. Guidance under the legislation defines the nature of support quite broadly. The aim of social support is to enable the individual to live independently in a moderately protected environment. Therefore care assistance provides not only counselling and guidance on ordinary daily functions, but also support for participation in occupational and leisure activities and for the establishment of contact with friends and family, as well as more formal contact with places of treatment for mental or physical disabilities or of substance abuse.^{xv}
15. In Germany the term “supported housing” is used for a range of approaches to the provision of support focused on the needs of different client groups. Regulations have been developed by various funding bodies which define supported housing. The term is sometimes criticised because it implies that support is linked to the dwelling rather than the individual and that the tenancy of the dwelling is dependant on receiving the support (Busch-Geertsema 1999). The term ‘ambulant personal support for people living in dwellings’ is therefore the more favoured phrase. In

Germany supported housing is not so much seen as an alternative to accommodation in residential establishments but as being a complementary step between accommodation in institutions and normal housing.

Appendix 6 – Housing Support in New Zealand, Case Studies

Case Study: Monte Cecilia Housing Trust, Auckland

Monte Cecilia Trust provides emergency housing and housing assistance for families in South Auckland and Waitakere City. During 2006 Monte Cecilia provided more than 4000 nights of emergency housing to over 40 families.

Monte provides emergency housing to 13 families and recently secured HIF loans to purchase 6 three-bedroom houses to provide “short term” transitional housing.

In addition to its residential services Monte also provides community-based support and advice. In 2006 staff supported a further 43 families to find alternative housing, and responded to up to 60 enquiries a month. Many of the families assisted by Monte are Maori and Pacific Island, and they are over represented in those facing housing crisis.

The Trust has just been able to recruit an additional Housing Social Worker to provide a new Housing Advocacy and Support service in Waitakere City. A partnership with the Ranui Action Project has resulted in both organisations committing enough resources to fund this service for 12 months.

Trust Executive, David Zussman, said *“Monte has made an enormous contribution to the success of many families who needed some support when they were faced with a housing crisis. Sadly there is still a significant need for this work, as housing affordability becomes a pressing issue for increasing numbers of New Zealanders.”*

Case Study: Pathways - Keys Living Choices, Wellington & other North Island locations

Pathways' Keys Living Choices service provides a number of services to mental health consumers. These include:

- **Finding a home** Keys manages a number of homes on behalf of private owners, thus acting as landlord to consumers. It also provides a housing facilitation service, helping consumers access a range of rental housing.
- **Moving into a new home** Keys offer support to consumers moving into a new home, including by helping with necessary paper work such as completing tenancy agreements, and advising on issues such as repairs and maintenance.
- **Practical Support** Keys also provides ongoing assistance with a wider range of housing related issues such as helping to maximise benefit entitlements, connecting the power and providing advice on how to manage tenancies.

Case Study: ComCare Trust, Christchurch

ComCare Trust is a Christchurch based mental health housing provider. ComCare offers a range of services. These include:

- 17 supported one-bedroom units, leased from CGH
- Stand-alone houses, ranging from 3-5 bedrooms
- Self contained flats (12 being acquired through HIF loans)
- Emergency housing (up to 3 months)
- A housing facilitation service that can refer clients to a range of housing providers
- A “friendly landlords” service; working with private sector landlords to house clients
- Support workers who provide support and advocacy services
- Financial assistance to overcome financial barriers to accessing and setting up homes

ComCare’s “supported rental” scheme works by housing clients in HNZC or City Housing tenancies. ComCare provide intensive housing facilitation support over the first weeks of the tenancy, assisting with matters such as claiming benefit entitlement, securing furniture, connecting utilities etc. This support is then withdrawn, but the client can contact ComCare over the next 12 month period to help resolve problems, disputes etc.

In addition ComCare have a nomination agreement with HNZC who allocate ComCare nomination rights for up to 27 units at any one time. ComCare allocate clients a property, but based on a housing need having been established using the Corporation’s Social Allocations Scheme. ComCare then provide ongoing support to tenants, making the tenancies more sustainable. This agreement resulted from the HNZC regional office identifying housing for mental health consumers as an unmet housing need in Christchurch.

Case Study: IDEA / IHC – Supported Living Service (Whole of New Zealand)

IDEA, the service arm of IHC, provides a Supported Living service for its clients with Intellectual disabilities.

IDEA Services Supported Living helps people with intellectual disabilities to live in their own homes. Supported Living delivers an individualised service. Support follows the person and is not restricted to any given location. The service supports people in daily living and to take responsibility for decisions affecting their lives.

Supported Living offers:

- a range of support services based on individual needs
- personal planning to meet those needs and choices
- flexible support
- trained, supportive staff
- a collaborative approach with other agencies as required.

Supported Living can assist with:

- accessing community activities
- budgeting
- advocacy
- dealing with other agencies, e.g. supported employment, Ministry of Social Development, HNZC, health
- social and recreational interests and clubs
- parenting support and education
- daily living, education and learning options.

Appendix 7 – Allocation of Rent Support for Community Group Housing Customers

Living Arrangement	Proposed Method for allocating rent support	Policy Rationale/Justification
Independent living for people who require minimal support	No rent support available	<ul style="list-style-type: none"> CGH residents are entitled to the same benefits as New Zealanders in non-CGH accommodation and should therefore receive the accommodation supplement
Residential supported living for people who require 24 hour supervised care	Rent support payments cover 70% of the shortfall between rent charged by HNZN and the income that providers receive for rent from the Government (via funding contracts) and from resident contributions (\$53.00 per week).	<ul style="list-style-type: none"> Funding 70% of providers' rental gap is consistent with government's policy for subsidising accommodation costs via the Accommodation Supplement. Setting resident contributions at \$53.00 per week is consistent with the Ministry of Social Development's rent threshold for people who receive the invalids' benefit.
Family and welfare living for people who require temporary accommodation	Rent support is allocated on the basis of revenue received by way of: <ul style="list-style-type: none"> rent provisions in funding contracts forecasted user charges donations and grants from other organisations. 	<ul style="list-style-type: none"> Government funding only partially covers the cost of services. The rental income that providers receive from users is potentially difficult to estimate because of the temporary nature of the accommodation; many users do not have ready access to an income and some users already pay rental costs for other properties elsewhere and cannot afford rent for two properties (e.g. In a crisis situation where people are seeking refuge).
Non-residential services		
Respite for people who need temporary support while they recover from an event of some kind	Rent support payments are calculated on the basis of forecasts for rental income at the beginning of the year and are evaluated against "actual" results reported as part of the following year's application. Rent support payments would cover a maximum of 90% of the shortfall between rent charged by HNZN and the amount that providers receive for rent.	
Office space and staff accommodation	No rent support available	Govt agrees to purchase services inclusive of office and staff spaces

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