

POLICY BRIEF

'Belonging begins at home': Housing, social inclusion and health and wellbeing for people from refugee and asylum seeking backgrounds

This research project examined the experience of refugees and asylum seekers in South Australia who had been in Australia for seven years or less, and aimed to:

- Document housing settlement experiences and links with social inclusion and health and wellbeing
- Investigate the policy, practice and community facilitators and barriers to positive housing experiences, social inclusion and wellbeing outcomes
- Use this evidence to develop recommendations to facilitate positive housing outcomes for asylum seekers and refugees in ways that promote social inclusion and health and wellbeing.

Key recommendations

While many people had successfully navigated the complexities of the housing market to secure housing in suitable neighborhoods, and had built a sense of social inclusion through social connections and voluntary activities, **key areas for development** identified in the research included:

Housing:

- Housing affordability is vital for refugees and asylum seekers. Policy recommendations to address affordability include increasing welfare entitlements, making all refugees and asylum seekers eligible for rental assistance schemes and affordable housing, improved access to social housing, and providing assistance to gain employment.
- Greater assistance is required from state and federal governments, working in concert with resettlement agencies and the real estate sector, to help refugees and asylum seekers secure and maintain private rental housing, including:
 - o more private rental liaison officers
 - o practical assistance such as transport support to get to open inspections
 - translation of tenancy materials and education in tenant rights and responsibilities

- trauma-informed training and accreditation of real estate agents and property managers
- \circ $\,$ increase in housing stock options for larger families
- $\circ\;$ increased support for asylum seekers, many of whom are not currently eligible for assistance
- working with community organisations to assist in aspects of securing housing (e.g. providing reference letters and making referrals)
- o funding interpreting services for real estate agents and property managers
- ongoing collaboration between the real estate sector, state and federal government, and agencies supporting refugees and asylum seekers to improve access to good quality private rental accommodation
- Longer-term housing support is required in the initial phase of settlement the federal government recently introduced this for permanent visa holders as part of resettlement services. It will be important to see if this extended support leads to better outcomes, including fewer housing problems, longer-term tenancies, and greater housing satisfaction. Additional support may still be required for some after this period ends, and longer-term housing support should also be extended to those on temporary visas.
- Assistance into home ownership where possible for example through Homestart.

Neighbourhoods and social inclusion:

- Resettlement services should locate people in suitable housing for their needs (e.g. with disability access) and in appropriate neighbourhoods (eg. close to family and friends and services)
- Refugee and asylum seeker communities, agencies supporting them and police should collaborate on issues of safety and security
- Local government and other agencies should be funded by state and federal governments to undertake community development to support neighbourhood connections and cohesion, and address discrimination
- Community groups and informal community networks that are working to support refugees and asylum seekers should be resourced.

Health:

- The state government should develop an equity framework to guide health services for refugees and asylum seekers, such as a state-wide refugee health action plan
- State and federal governments working in collaboration with resettlement agencies, should implement a social determinants of health approach in relation to housing, in which housing, neighbourhood and social inclusion are seen in policy as part of a complex array of resettlement factors that interact to affect

health. For example, this could be achieved through continued and expanded partnerships between settlement and health services

State and federal governments should provide ongoing and increased funding of specialist health services such as the Migrant Health Service and Survivors of Torture and Trauma Assistance and Rehabilitation Service.

Key findings of the research

- The majority of participants were living in private rental housing at the time of the research.
- Over three quarters reported at least one problem with their current house:
 - finding housing: cost, practical difficulties getting to open inspections (e.g. transport issues), lacking Australian references and finding suitable housing for family size and composition
 - once housing secured: cost, size and layout, issues with housing condition and a lack of heating and cooling, and concerns about safety
 - asylum seekers faced particular challenges due to lower incomes (restrictions on their welfare entitlements and work rights), visa conditions and insecurity
 - o 63% of those experiencing a housing problem needed help to resolve it.
- Over half were satisfied with their current house, and 21% were unhappy/very unhappy – those with housing problems were less likely to be happy.
- Most participants were satisfied with their current neighbourhood
 - o good neighbours, safety, and peace and quiet were key reasons
 - over half reported at least one neighbourhood problem including safety and being far from social connections and services.
- More than 80% of participants were involved in community groups and the majority participated in volunteer activities.
- Most participants had good social networks but a small number were socially isolated.
- 22% of participants had experienced racial or ethnic discrimination in Australia (including in relation to housing) and this was associated with worse mental health.
- Over 80% felt that their housing had an impact on their health and wellbeing and housing satisfaction was associated with both mental and physical health. Housing problems compounded other resettlement difficulties such as finding work, settling children into school and dealing with past trauma.
- Factors that supported refugee and asylum seeker housing were:
 - Efforts by service providers to help prepare people for the private rental market once they leave the housing provided as part of settlement support
 - Non-government and voluntary organisational support eg. referee letters and small scale financial assistance in times of extreme financial difficulty

- Support from other refugees and asylum seekers and community groups to find and maintain housing
- Real estate agents who recognised refugees and asylum seekers as highly reliable and house-proud tenants
- Efforts by government and community organisations to provide information about housing, including pathways to home ownership.

Research information collected

- Surveys from 423 people from refugee and asylum seeking backgrounds
- In-depth and photo-voice interviews with 61 people from refugees and asylum seeking backgrounds
- Interviews with 15 service providers
- Consultations with service providers, practitioners and policy makers.

The 'Belonging begins at home' study was funded by the Australian Research Council (LP130100782) and was conducted in partnership with AnglicareSA, the Australian Refugee Association, Baptist Care and Shelter SA.

For the full project report.

For further information visit <u>Stretton Health Equity</u> at the University of Adelaide, or email: <u>strettonhealth@adelaide.edu.au</u>.