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Evaluation of Indigenous housing programme

The Indigenous housing program had no significant impact on improving overcrowding, infrastructure or hygienic conditions in 10 Northern Territory communities during 2004-05, according to a study by the Menzies School of Health Research.

The study investigated the impact of the housing program on crowding, the functional state of infrastructure and the hygienic condition of the houses - three potentially important influences on child health at the community level.

The 10 communities surveyed were experiencing the greatest construction of new houses by the Australian Government’s National Health Strategy (NAHS) Environmental Health Program and other large infrastructure programmes during the period 2004-05. On average 11 new houses were constructed in each of the 10 communities.

Researchers measured the quality of infrastructure required to conduct a number of well recognised “healthy living practices”. These practices include preparation and storage of food, washing of clothes and bedding, washing of people, removal of human waste, provision of areas suitable for sleeping, temperature control, and separation of animals and people.

The study found a small but significant improvement in the functional state of housing infrastructure following the housing program. However, there was no clear improvement in crowding or in the hygienic state of houses.

“Because of the relatively small number of new houses built, the continuing high levels of overcrowding and the lack of improvement in hygienic conditions in houses across these communities the building program is unlikely to result in any improvement in health” said Professor Ross Bailie, lead researcher from the Menzies School of Health Research.

The study noted that no hygiene promotion activities were conducted over the study period.

“The benefits of improved infrastructure are unlikely to be fully realised without concurrent hygiene promotion programmes, and without improving infrastructure conditions in a much greater proportion of community houses.” Prof Bailie said.

“We need an integrated approach to housing improvement which includes improved infrastructure, hygiene promotion programs (including a focus on hand washing, animal management and better access to cleaning equipment) and a policy environment which promotes community engagement and empowerment.”

The study was supported with funding by the Cooperative Research Centre for Aboriginal Health, now the Lowitja Institute, and the National Health and Medical Research Council.

Ongoing research and evaluation into how housing programs can most effectively improve health conditions in these communities is critical to closing the gap.

The results are part of a wider study at Menzies School of Health Research looking at housing and child health in remote Indigenous communities.