"Having moved and being able to be quite independent."
Outcomes over two years for people with neurological disability and complex needs after moving into new individualised apartments: An update on the journey.

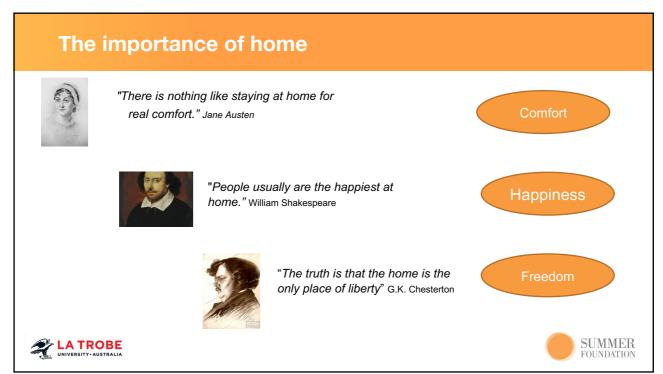
Jacinta Douglas;^{1,2} Di Winkler;^{1,2} Stacey Oliver;^{1,2} Stephanie Liddicoat;^{1,2} and Kate D'Cruz.^{1,2}

¹ Summer Foundation, Melbourne, Australia; ² Living with Disability Research Centre, School of Allied Health, Human Services & Sport, La Trobe University, Melbourne, Australia





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The right to comfort, happiness and freedom

- Adequate housing is universally viewed as one of humanity's most basic needs. (UN, 2006)
- Our home and living arrangements have a strong influence on our quality of life. (Veitch, 2008)
- □ Research affirms the links between housing, health outcomes, and quality of life for people with disability. (Douglas et al. 2022; Oliver et al. 2020)
- □ A substantial number of people with significant disabilities are denied access to their own home and have limited choice in housing and living arrangements. (AIHW, 2007, Wiesel, 2015)





3

Goal of the Project



Systematically investigate the experience, outcomes and economic impact of people with disability moving into specialist disability accommodation housing.

Health, wellbeing, community participation, support outcomes and lived experience of people with disability are measured before moving and over 2 years after they move.

ARC Linkage LP220100293, Douglas, Winkler & Fleming).





Overview

Pilot Study

Aim

Investigate post-move change in outcomes for people with disability and complex needs who move into individualised housing with appropriate design, support, technology, and location.

Hypotheses

 After moving into an individualised housing option, participants will experience improvements in:

Health

Wellbeing

Community integration

? Change in the level of support



Longitudinal Case Series

Aim

To compare pre-move outcomes with outcomes at 1 yr and 2 yrs post-move for people with disability and complex needs who move into individualised SDA with appropriate design, support, technology, and location.

Hypotheses

 Reliable improvements would be demonstrated on health, wellbeing and community integration outcomes at 1 and 2 yrs after moving into individualised SDA, when compared to pre-move measures.



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Pilot Study Method





Design

- Mixed-methods Pilot study
 - Qualitative: Interview evaluates individual experiences
 - Quantitative: 4 outcome measures
- Outcome measures
 - 1. Health: EuroQol-5D Visual Analog Scale (EQ-VAS) (van Reenen & Janssen, 2015)
 - Wellbeing: Warwick-Edinburgh Mental Well-being Scale (WEMWBS) (Stewart-Brown & Janmohamed, 2008)
 - 3. Community Integration: Community Integration Questionnaire (CIQ-R) (Callaway et al., 2014)
 - 4. Support needs: Care and Needs Scale (CANS) (Tate, 2017)
- Two time-points
 - time 1: pre-move time 2: post-move (minimum 6 months)





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Participants (n=15)

Demographics & Disability Type

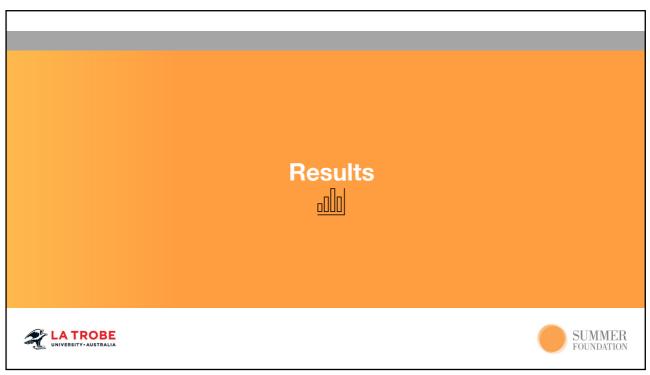
| Age (mean, rang | ge): 44.2, | 20-67yrs | |
|----------------------|------------|----------|--|
| Sex Males | 6 | 40% | |
| Females | 9 | 60% | |
| Disability type | | | |
| Cerebral Palsy | 3 | 20% | |
| ABI | 2 | 13.3% | |
| Other Neurologi | cal 2 | 13.3% | |
| (Friedrick's ataxia) | | | |
| Multiple Scleros | is 2 | 13.3% | |
| Spinal Cord Inju | ry 2 | 13.3% | |
| Other | 4 | 26.7 | |

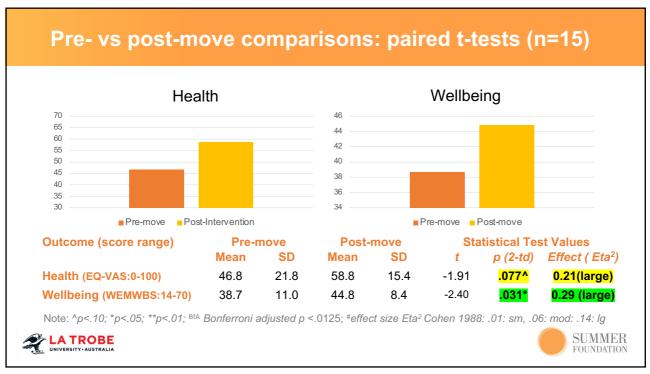
Pre-Move Housing Environment

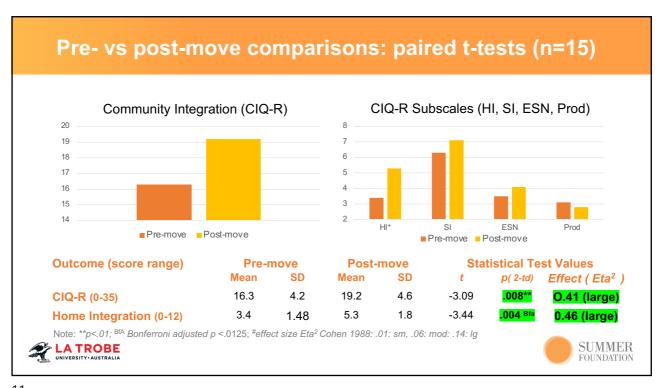
| Shared Supp Acc <10 | 4 | 26.7% |
|---------------------------|---|-------|
| Private home with | | |
| partner and/or children | 3 | 20% |
| Private home living with | | |
| parents/relatives | 3 | 20% |
| Residential Aged Care | 2 | 13.3% |
| Vulnerable Housing | 1 | 6.7% |
| Shared Supp Acc >10 | 1 | 6.7% |
| Private home living alone | 1 | 6.7% |
| | | |











Change in support needs: pre- to post-move

Trend towards reduced support needs from pre- to post-move (Z = -1.941, p = .052)

At post-move, CANS support level

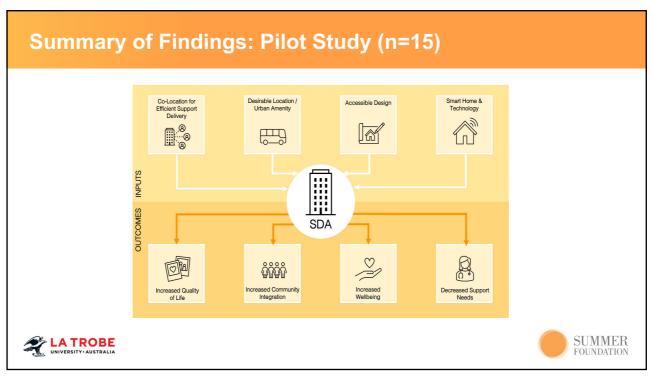
- · remained the same for 5 participants
- decreased for 8 participants lower support needs
- increased for 2 participants higher support needs.

No participant had a change in support level that exceeded a single level change.

- These changes in support level reflect an overall reduction in daily support hours for the group.
- Average support hours per participant at pre-move = 19 hours per day
- Average support hours per participant at post-move = 16.6 hours per day.
- Average decrease = 2.4 support hours per participant per day.









Design

- Subset of results
 - · First 7 participants who completed pre-move, 1- and 2-yr post-move evaluation
- 3 outcome measures
 - Health: EuroQol-5D Visual Analog Scale (EQ-VAS) (van Reenen & Janssen, 2015)
 - · Wellbeing: Warwick-Edinburgh Mental Well-being Scale (WEMWBS) (Stewart-Brown & Janmohamed, 2008)
 - · Community Integration: Community Integration Questionnaire (CIQ-R) (Callaway et al., 2014)
- 3 timepoints
 - · time 1: pre-move time 2: 12 months post move time 3: 24 months post move
- Analysis
 - Reliable Change Index: amount of change a client must show on a specific psychometric instrument between measurement occasions for that change to be reliable (larger than that expected due to measurement





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Participants (n=7)

Demographics & Disability Type

| Age | Mean | 44.3 yrs |
|--------------------|----------------|-----------|
| | Range | 37-59 yrs |
| Sex | Females | 4 |
| | Males | 3 |
| Disa | bility type | |
| Cerebral Palsy | | 2 |
| ABI | | 2 |
| Othe | r Neurological | 2 |
| Multiple Sclerosis | | 1 |
| | | |

Pre-Move Housing Environment

Sm Gp Home <10 residents 3 2 Private home living with Parents Residential Aged Care 1 Lg Gp Home >10 residents 1

Support level (CANS, Tate 2017))

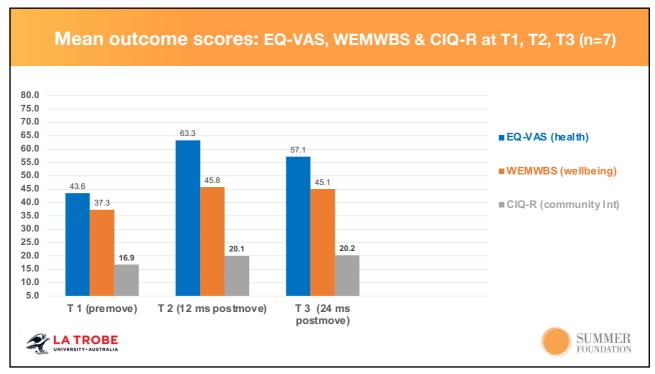
(Can be left alone for....)

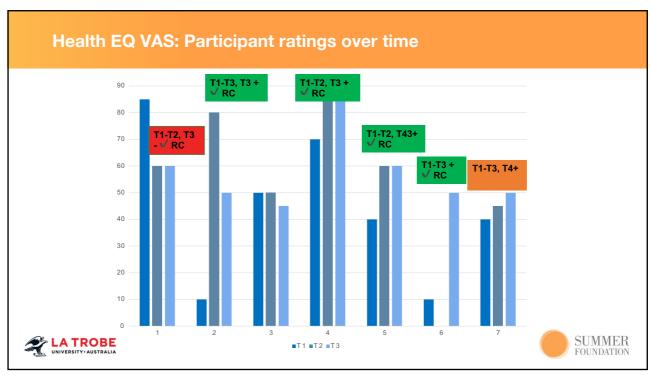
4 Level 2 (almost all week) 2 Level 3 (a few days a week) 1 Level 4 (part of the day & overnight)

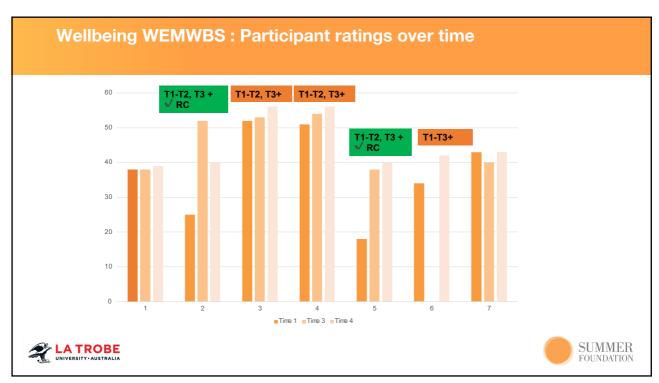


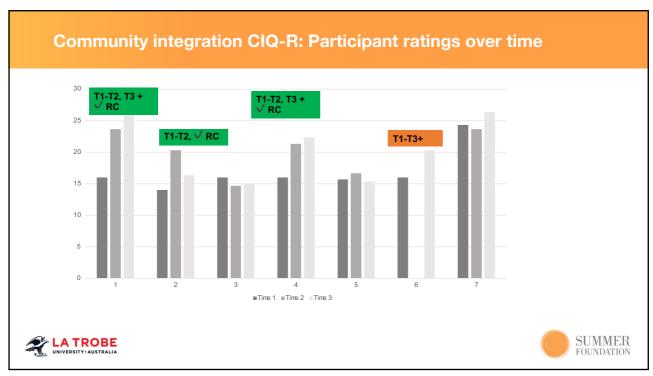


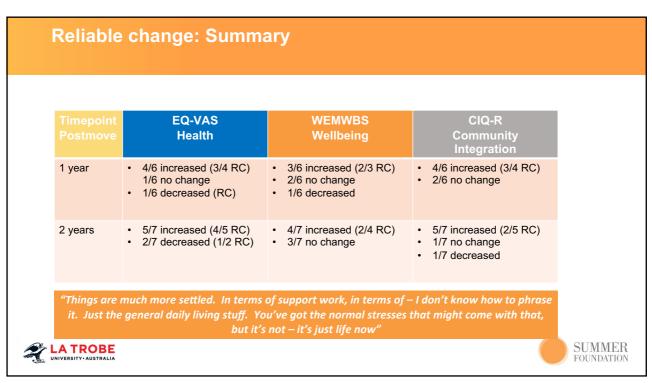












Implications and Future Research





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The value of a framework: Future research

"My life has changed since moving into my apartment. It's just so wonderful to have people coming to my place. It's wonderful to go out with them too, but just to sit down at my table and have a cup of tea or just talk, just talk in a normal environment. One of life's simple pleasures."

Helen's comfort, happiness & freedom

Develop an evidence base regarding the

built form, technology and support provided

Afford people with disability the basic right to choose where they live or who they live with

Further investigate cost effectiveness and cost utility metrics from a services and social perspective

Scale up data collection and include contemporary housing options beyond SDA apartments Understand the trajectory of individuals and subgroups of people with diverse disability types

Maximise'potential for more independence, increased wellbeing and community participation.

Identify who is likely to flourish in different models of housing & support tailored to specific needs.





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We would like to thank the many people who have contributed to this project, including all the primary research participants and close others who generously provided their time to complete the study. We would also like to thank Jacqui Naismith, Donna Wakim, Liz Williams, Elizabeth Beadle, Margaret Johnston, Anna Ewan, Sophie Moore, Megan Topping, Ella-Rose Minter and Pete Mulherin for their valuable contribution to the project.

Pilot Study Reference

into New Housing Designed for People with Disability: Preliminary Evaluation of Outcomes. *Disability and Rehabilitation*, https://doi.org/10.1080/09638288.2022.2060343



