

Research Summary:

What public health interventions exist that explore housing, migration and health?



April 2022

The issue

People from culturally and linguistically diverse (CaLD) backgrounds are exposed to a range of contributing factors that may increase their vulnerability to housing stress and health challenges (see Research Summary: Rationale on Migration, Housing and Health). The Journey to Home Project team conducted a scoping review of literature on relevant public health interventions to find out more.

What did we do?

A scoping review was chosen due to the broad nature of the topic and the small amount of literature currently published. The review was guided by [the Joanna Briggs Institute Methodology for Scoping Reviews](#), [the PRISMA Extension for Scoping Reviews](#), and [the Arksey and O'Malley methodological framework of scoping studies](#). A consultation was conducted with sector stakeholders.

What did we find?

A total of 49 peer reviewed international articles were included. Grey literature such as reports and data sets were excluded. Very few public health interventions were identified that were designed for the specific needs of people from CaLD backgrounds (n=6). The interventions listed below include all interventions (n=49) not just those specific for the needs of people from CaLD backgrounds.

Intervention Type	Program
Housing and shelter provision	Housing First, Supportive housing, Full service partnership, Ecologically based treatment, Permanent supportive housing, Rehousing in the community, Housing - various, Collaborative Initiative to Help End Homelessness
Physical health including substance use	Thresholds mothers project, Substance use interventions, AWARE: AOD and health program, The Power of YOU - AOD and health program, Casa-care health service
Refugee and migrant status	Sponsored refugee status, Forced migration status
Mental Health	Mobile phone-based mental health intervention, Shelter-based mental health clinic
Creative arts interventions	Arts-based program, Hip Hop Self-Expression group intervention
Income support	Earned Income Tax Credit
Group intervention	Men's group

A number of broad themes emerged.

Housing Provision

Housing First interventions were common and found to be effective in reducing vulnerability for both homelessness and mental health challenges. Housing First was effective in addressing some, but not all of the factors contributing to vulnerability for homelessness. There were 2 studies specifically designed for people from CaLD backgrounds.^{1,2}



Housing First:

Housing as a first priority regardless of:

- mental health status
- substance use
- engagement with services

Mental Health - Intersections and Interventions

Findings showed mixed results on the impact of housing provision interventions and improvements in mental health of populations vulnerable to homelessness. There were 3 interventions specifically designed for people from CaLD backgrounds.^{1,2,3}

Housing provision interventions



Increased utilisation of mental health services

Barriers to Housing for people from CaLD backgrounds:

Structural and systemic barriers were evident. These included:

- shame
- stigma
- discrimination

Complexity and Needs Beyond Housing

The review highlighted the value of social connections and community for people from CaLD backgrounds who are vulnerable to homelessness. Financial and employment assistance was also highlighted as essential to address homelessness vulnerability. There were 3 interventions specifically designed for people from CaLD backgrounds.^{4,5,6}

Substance Use and Housing Stability

We found mixed results in whether housing provision alone was enough to address substance use issues suggesting a need for targeted substance use interventions. In the context of Housing First interventions, substance use did not appear to significantly or negatively impact on housing outcomes and does not predict a return to homelessness. There were 2 interventions specifically designed for people from CaLD backgrounds.^{1,3}



1. Stergiopoulos, V., Gozdzik, A., Misir, V., Skosireva, A., Connelly, J., Sarang, A., Whisler, A., Hwang, S. W., O'Campo, P., & McKenzie, K. (2015). Effectiveness of Housing First with Intensive Case Management in an ethnically diverse sample of homeless adults with mental illness: A randomized controlled trial. *PLoS One*, 10(7), e0130281. <https://doi.org/10.1371/journal.pone.0130281>

2. Stergiopoulos, V., Gozdzik, A., Misir, V., Skosireva, A., Sarang, A., Connelly, J., Whisler, A., & McKenzie, K. (2016). The effectiveness of a Housing First adaptation for ethnic minority groups: findings of a pragmatic randomized controlled trial. *BMC Public Health*, 16(1), 1110. <https://doi.org/10.1186/s12889-016-3768-4>

3. Walter, A. W., Morocho, C., Chasler, D., Sousa, J., De Jesús, D., Longworth-Reed, L., Stewart, E., Guzman, M., Sostre, J., Linsenmeyer, A., & Lundgren, L. (2019). Evaluating culturally and linguistically integrated care for Latinx adults with mental and substance use disorders. *Ethnicity and Health*. <https://doi.org/10.1080/13557858.2019.1685653>

4. Dwyer, P., & Brown, D. (2008). Accommodating "others"? Housing dispersed, forced migrants in the UK. *Journal of Social Welfare and Family Law*, 30(3), 203-218. <https://doi.org/10.1080/09649060802550634>

5. Murdie, R. A. (2008). Pathways to housing: The experiences of sponsored refugees and refugee claimants in accessing permanent housing in Toronto. *Journal of International Migration and Integration / Revue de l'intégration et de la migration internationale*, 9(1), 81-101. <https://doi.org/10.1007/s12134-008-0045-0>

6. Thompson, K., Brown, P., & Vieira, S. (2017). Health, happiness and your future: Using a "men's group" format to work with homeless men in London. *International Journal of Migration, Health and Social Care*, 13(4), 403-418. <https://doi.org/10.1108/IJMHS-07-2016-0025>

Service Provider and Policy Issues

The review found that people from CaLD backgrounds may experience stigma and discrimination when accessing services which contributes to their vulnerability to homelessness. Services are needed that are more adaptable to the needs of populations vulnerable to homelessness through better integration and service connection between sectors, particularly health and housing. There were 2 interventions specifically designed for people from CaLD backgrounds.^{4, 5}

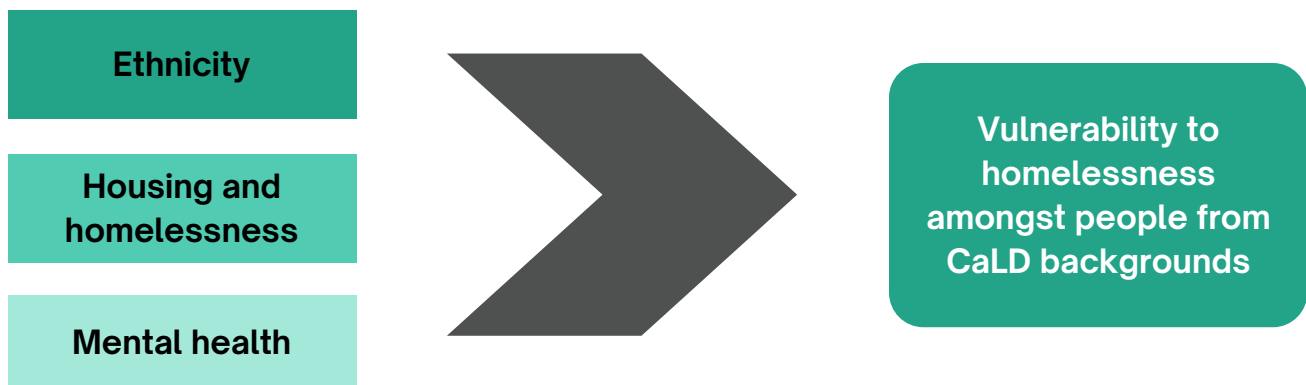
Service adaptability:

There is a gap when it comes to appropriate service delivery for people from CaLD backgrounds who are vulnerable to homelessness. Greater coordination between service providers is needed.

The need for specific focus on Cultural and Linguistic Diversity

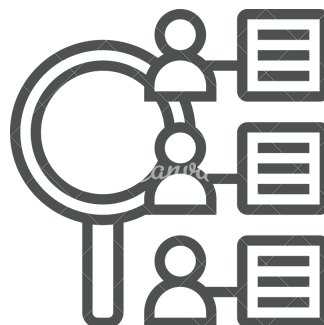
People from CaLD backgrounds experience vulnerability to homelessness as a result of the influence of the intersection of ethnicity and housing, homelessness and mental health. Cultural and linguistic diversity amongst populations vulnerable to homelessness requires tailored approaches that provide holistic treatment addressing the social and cultural determinants of health with literature indicating this may lead to increased housing stability and community integration. There were 5 studies specifically designed for people from CaLD backgrounds.^{1, 2, 3, 4, 5}

The intersection of these factors:



Consumer Experience

The perspectives and expertise of community members with lived experience are vital when planning interventions and services. Interventions that facilitate choice and those using non-traditional methods to engage groups (e.g. via technology) demonstrate promise. There were no interventions specifically designed for people from CaLD backgrounds.



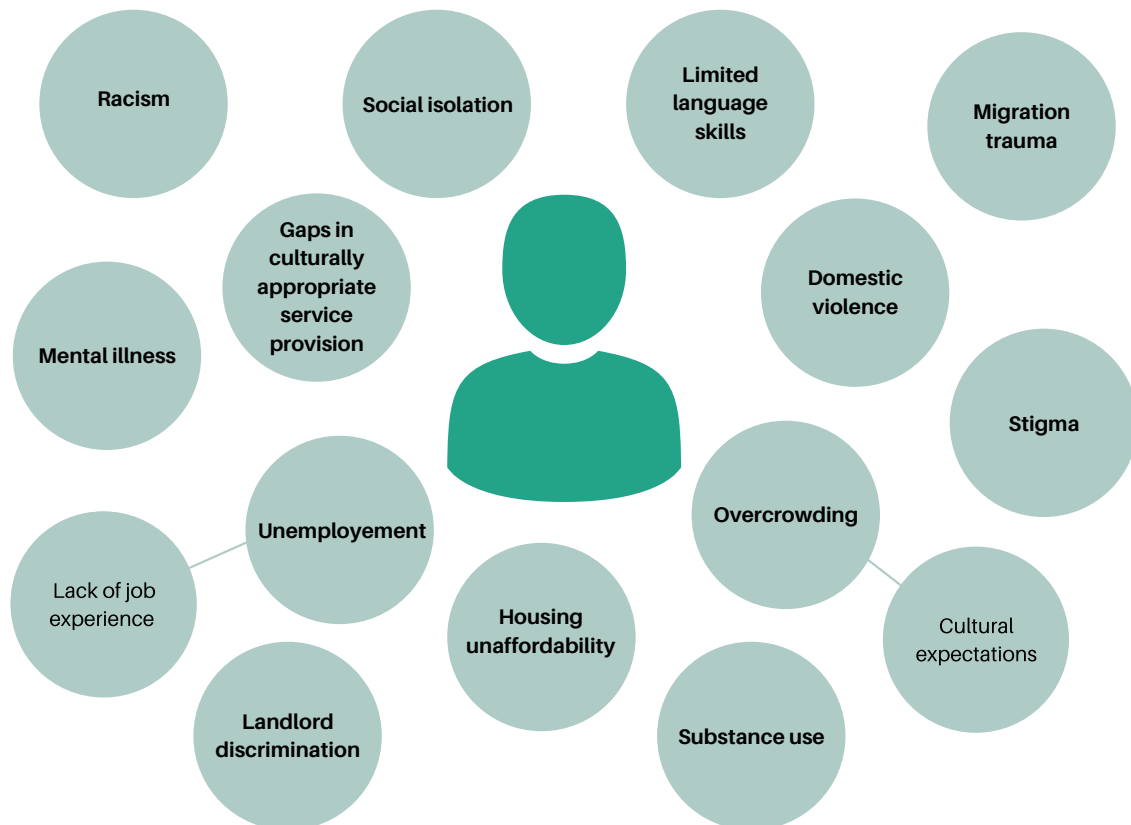
Lived experience:

Meaningful community engagement is critical to ensure service appropriateness and relevance.

So what?

- Few interventions were designed specifically for people from CaLD backgrounds (n=6).
- A large proportion of research centred on Housing First approaches.
- Findings indicated a range of social determinants experienced by people from CaLD backgrounds not sufficiently addressed in the Housing First model.

Factors contributing to homelessness vulnerability amongst people from CaLD backgrounds



- There is a need for greater coordination between service providers and better integration of culturally responsive services.
- Financial and employment assistance alongside the utilisation of community knowledge and expertise are essential.
- Gaps in knowledge base should guide future research, with a focus on the specific needs and outcomes of people from CaLD backgrounds.

This review sheds some light on the complex relationship between health, housing and migration. A range of interventions explored housing and mental health from a public health perspective, and some report on race or ethnicity. Very few interventions were designed specifically for people from CaLD backgrounds, or adequately meet their needs. Improvements are needed that will require meaningful engagement with people from CaLD backgrounds with lived experience of housing stress. Public health interventions must adequately recognise the impact of cultural and linguistic diversity and other social determinants on access to secure housing.