

**Disability Federation of Ireland**

**Submission to**

**Housing Agency**

**On**

**New Housing Strategy for Disabled People**

**June 2021**

1. **Executive Summary**

The right to a home and to adequate housing is one of the most fundamental human rights. This has been spotlighted even more over the past year, as people were required to stay at home to protect themselves from the COVID-19 pandemic. Unfortunately, Ireland is not currently delivering sufficiently on this right for tens of thousands of people with disabilities and their families across the country.

In drafting a new strategy for housing for disabled people, Ireland now has the opportunity to develop and enact a new model of housing provision, that is person-centred and holistic. We must finally ensure that people with disabilities have the right to choose where they live, to sufficient services and to be supported to live independently in the community, equal to non-disabled members of society. There is much to be learned from the past year and from previous decades of housing policy and practice. The development of an ambitious, progressive and focused new housing strategy that supports independent living, participation and inclusion, as well as an adequate standard of living, would be highly appropriate, in the year that Ireland makes its first state report on its implementation of the UN CRPD.

To deliver this, Ireland must:

* Develop, implement, monitor and report on an action-oriented, ambitious new plan and strategy, with clear annual targets, to address the diverse housing needs of people with disabilities.
* Develop a housing strategy based on the social model of disability, considering issues holistically, and in particular the links between housing, health and community.
* Increase and improve cross-departmental and interagency work (in particular between the Departments of Housing, Health/HSE, and Children, Equality, Disability, Integration and Youth), to address the recurrent barriers to people with disabilities living in the community.
* Sufficiently resource and fund this strategy, including providing funding across Departments and to disability organisations.
* Address and remove longstanding obstacles to independent living, including lack of Personal Assistant (PA) and home supports services by introducing a statutory right to community services (PA, home care, respite etc) and providing sufficient funding for this.
* Institute a national quota requiring that at minimum 7% of all new houses are built to universal design and accessible standards, including wheelchair liveable.
* Mainstream disability housing policy so that supply, design and accessibility are considered, and built into requirements, in *all* areas of housing policy and planning.
* Reduce the level of complexity, delays and inconsistency in the current housing system.
* Create a Housing and Disability Officer role in each Local Authority and develop an Ombudsman for Housing and Disability.
* Understand the high levels of poverty and economic vulnerability experienced by disabled people, and the significant extra cost of living with a disability, and factor this in when developing the housing strategy.
* Reform Part M and adopt a future-proofing approach to housing, based on life-time adaptable and Universal Design principles.
* Ensure all relevant staff are sufficiently trained in disability awareness and the rights and entitlements of disabled people.
1. **Introduction**

DFI welcomes the opportunity to submit to the review process of the current Housing Strategy for People with Disabilities. We would also like to acknowledge the positive experience of working collaboratively on the ongoing review with the Housing Agency, and the open, accessible, and comprehensive way in which the review has taken place thus far.

As we have seen in the past year, having a home is one of the most fundamental needs in society, impacting on all aspects of wellbeing, health, and participation in society. DFI’s submission to this consultation is based on the experience and work of staff at community, local authority and national level on housing policy for years, and on inputs from our membership by means of survey, individual meetings, written correspondence and a member consultation.

**The right to live independently in the community: Delivering on UN CRPD commitments**

Ireland ratified the UN CRPD in 2018, meaning it is bound by the commitments in this Convention. While housing is an issue that is relevant to, and affected by, the commitments and rights across the whole convention, in particular the following UN CRPD rights are crucial in ensuring the right to a home. The articles below should be the cornerstone of any new housing strategy for people with disabilities.

* Article 19: which asserts disabled people’s right to live in the community, with choices equal to others, to full inclusion and participation in the community, and to the opportunity to choose their place of residence on an equal basis with others.
* Article 28: which commits to an adequate standard of living for people with disabilities and their families, including adequate housing, and the continuous improvement of living conditions.

Unfortunately, despite efforts over the years, the experience of many people with disabilities seeking a home of their own is one of frustration, difficulty, economic and bureaucratic struggle and limited, if any, choice.

The new Housing Strategy must change this by making the UN CRPD, and in particular the above rights, the foundation of its approach.

1. **Context: Poverty, restricted choice and insufficient access to services**

Before getting into the specifics of housing, it is important to remember and reflect on some broader context. 13.5% of the population of Ireland have a disability, i.e. one in eight people, meaning every family in Ireland is impacted by disability. That comes to a total of 643,131 people, of all ages, across the full range of disabilities, including physical, sensory, intellectual and mental health. These people live all over Ireland, and in a range of different housing and living arrangements, urban and rural - in privately owned homes, the family home, private rental, social housing, nursing homes, residential care, or congregated settings.

Disabled people struggle with a range of housing related issues on a daily basis. The significant lack of appropriate housing for people with disabilities, be it social, affordable, private rental or privately purchased housing, is an ongoing crisis within the housing crisis. More than one in four people who are homeless have a disability. Over 1,342 people with disabilities under the age of 65 are living inappropriately in nursing homes, while despite the ongoing efforts, 2,914 people with disabilities still live in congregated settings.

Moreover, it is important to remember some key facts:

* According to EU SILC data, Ireland has the highest percentage of people with disabilities at risk of poverty in Western Europe (37.8%). This is one of the highest percentages in the EU, almost 10% higher than the EU average.
* A striking 37.5% (CSO SILC) of people not at work due to illness or disability are at risk of poverty and social exclusion, over 18% live in consistent poverty, and 43% live in deprivation. These rates are three times higher than those for the general population.
* 153,805 people were in receipt of Disability Allowance (€203 a week) in Ireland in April 2021, while 59,040 received Invalidity Pension (€208.50 a week).
* The extra cost of disability has been estimated to be an average of €207 a week.
* 27% of the homeless population have a disability, double the rate among the general population.
* Only 0.3% of all people with disabilities get a Personal Assistant (PA) service.
* Ireland’s rate of employment for people with disabilities, at 32.3% is the worst in the EU, almost 20% lower than the EU average.
* 43% of people with disabilities reported depression in 2019, a rate three times higher than the national average of 14%.
* By 2026 the NDA estimates that the number of people with a disability will have increased by approximately 20%.

These statistics are both stark and striking. It is crucial to remember and understand the above context, that many people with disabilities and their families struggle with poverty, deprivation and social exclusion, and have to continuously battle the system to get issues and challenges they face to be understood and addressed. All of this must be recognised and factored in when developing housing policy to support people with disabilities to live in their own home in the community, equal to others.

**4. The National Housing Strategy 2011 -2016 (extended to 2021)**

The existing national strategy has performed an important function, in being the first standalone strategy for housing for people with disabilities, also coming as it did at a time of a shift in thinking about disability, with the move towards decongregation and inclusive community living. It did secure some improvements, including a somewhat more consistent approach, new structures and processes at Local Authority level including the Housing and Disability Steering Groups and Strategic Plans, structures at National Level including the Housing Sub Group, the gradual improvement of the level and amount of relevant data being recorded and some specific wins such as changes to application forms.

Despite these individual improvements however, the strategy did not substantially improve the housing situation or options available to people with disabilities[[1]](#footnote-2). Moreover, the strategy is now ten years old, when it was originally written to cover a five-year period. The situation in Ireland has moved on significantly in that decade – economically, socially and particularly in terms of the official understanding of disability, with the ratification of the UN CRPD in 2018. Strikingly, many of the aims and objectives of the outgoing strategy are still quite relevant, as unfortunately they simply were not delivered.

**5. Current situation on housing for people with disabilities**

1. **Individual level: A frustrating and difficult experience**

Individuals with a disability seeking to secure their right to a home generally have a difficult and frustrating time. Whether it is a younger person living with aging carers, a working disabled person looking to rent wheelchair accessible housing, a person who acquires a disability and has to reorganise all aspects of their life or the parents of a child with a disability, securing accessible, suitable and high-quality housing is extremely challenging for disabled people, in both the private and public system.

Individuals and their families struggle with a lack of clarity on how to proceed or what their options are. They also struggle to navigate a complex, bureaucratic, slow and difficult system, which requires them to jump through multiple hoops to prove their disability and entitlement to support and to doggedly persist despite many obstacles and challenges, as they try to get the state to deliver on their housing needs.

There is often a lack of clarity in the process, with basic information not being accessible or easy to access, and families and individuals also find the process of applying for social housing to be complex, bureaucratic and slow. Many individuals and families abandon the process in frustration, or do not even bother applying for social housing or adaptation grants, having heard from others how difficult the process is. Many also do not apply to go on the housing list, due to the belief that they will never get a house, or will languish on the housing list for years.

The means test also presents a significant problem, in particular for people with disabilities who live with their family. It does not factor in the substantial extra cost of living with a disability, and in considering the income of the whole household rather than the disabled individual it undermines their right to independence.

There is also patchy accountability and clarity on delivery, roles and responsibility at local level, with different Local Authorities doing things differently. The supports available to people are often not clear, and how people are treated or experience the system can depend on the approach and temperament of the individual staff member they end up interacting with.

It is important to remember also that many individuals and families go through at least three processes of having their disability assessed and verified – by the Department of Social Protection in being assessed for their Disability Allowance or other disability related payments, by the local health structures to assess their needs, and by the Local Authority when applying for housing. This is time-consuming, repetitive and frustrating, as well as inefficient.

A particular problem which can occur is if a person acquires a disability – it is important to remember that 70% of people with a disability aged 20-64 acquired their disability after the age of 16[[2]](#footnote-3). This causes a crisis for the individual and their family, and there are insufficient supports and policy pathways in place to support people to stay in (and/or return to) their own homes when this happens – as evidenced in the most extreme way by the issue of people having no alternative but to live in nursing homes, but also by the frequent ‘crowdfunding’ appeals that disabled people and their families often resort to to secure financial support to adapt their homes so they can continue to live there.

Many individuals report being on the housing list for 3-6 years, or even much longer (up to 10 years or more). Others, and the organisations that support them, report accepting sub-standard housing as they have no other option and cannot continue living in their current situation, or being afraid of declining housing that is unsuitable for their disability as they will be penalised or lose their place on the list.

1. **Local Authority level**

At Local Authority (LA) level some progress was made under the last strategy, with the setting up of the Housing and Disability Steering Groups and the requirement to develop a Strategic Plan. However key and recurrent problems remain, including:

* Staff who lack training in disability awareness. Unfortunately, staff often lack understanding of the different kinds of disability and the associated needs, and do not always show empathy and understanding to disabled people with housing needs[[3]](#footnote-4).
* A lack of consistent, clear and transparent data on housing need that is made publicly available at local authority level.
* A lack of a clearly described and communicated pathway for disabled people to access the housing supports and services in their community to live independently.
* Significant inconsistency across different local authorities in terms of the approach taken to many issues.
* In cases where local authorities are eager to go beyond the minimum requirements (such as building to Universal Design principles) they report experiencing difficulty getting approval for the expenditure from the Department of Housing.
* A lack of coordination at local authority level, in particular between housing officials and HSE staff, but also between officials responsible for ensuring the other services required to support independent living are available.
* A lack of fully suitable housing stock, a lack of a record of the stock available and an unwillingness to adapt existing housing to make it suitable for disabled people.

Moreover, experiences diverge greatly between local authorities, with people with disabilities experiencing a post-code lottery once again, as they often do, in particular with health services.

Members of the DFI Community Team recently undertook surveys of people with disabilities in Cork City and County, Roscommon, Mayo and Galway City and County to inform their inputs to their local Strategic Plans. The responses gave a rich snapshot of housing issues at local authority level. Notable findings include the following:

* Over 80% of respondents did not know that their Local Authority has a Local Strategic Plan for Housing People with Disabilities and had not been involved in public consultations or submissions​.
* The vast majority of respondents lived in housing with parents or other family members.
* Over 30% of respondents said their current housing is not suitable for their needs. However most respondents (between 74% and 83%) were not on the housing list, despite this.
* Worryingly, between 62% and 75% of respondents were not aware that local authorities can provide social housing to people with disabilities who qualify under a means assessment.
* Respondents were more aware (more than 50%) that their local authority can provide Housing Adaptation Grants.​
* Of those who had applied for support with housing needs, including the Housing Adaptation Grant, a significant sample indicated that the information provided was not accessible to them (26%) or that they were not adequately supported with their application (23%).​

There is also no consistency even on access to information about housing in local authority areas, and insufficient effort seems to have been made to provide information to disabled people about their housing options. DFI looked at the provision of information regarding housing for people with disabilities on the websites of the 11 local authorities where DFI staff sit on HDSGs. Our snapshot of one third of the HDSGs shows that there is an inconsistent approach to information provision via the core public communication tool (the local authority’s website), and that most are not providing key information to the disabled people they serve.

* The local Strategic Plan can be found on 6 websites (albeit one being quite difficult to find), but not on the remaining 5.
* Only 1 of the 11 local authority websites publishes information about the number of people with disabilities on the waiting list, and none currently publish information about the delivery of housing for people with disabilities in 2020 (despite this being available nationally in the Summary of Social Housing Assessments).
* None of the 11 websites contain a landing page for people with disabilities specifically, that explains their housing options.
1. **National Level**

At a national level the previous strategy brought about some welcome developments, including some national accountability and problem-solving structures, the new Medical Information form, the addition of wheelchair liveable accommodation as a category on the social housing form, better data collection and some other gradual improvements.

However, many stubborn problems remain:

* The system is extremely complex and at times convoluted, and very difficult for individuals (both individuals seeking housing and those working to support them) to navigate successfully.
* Despite efforts, there is not a consistent approach to housing for people with disabilities across the country. This is borne out by the data and reported experience in different local authorities.
* While efforts have been made to increase and improve inter-Departmental and agency working, this area still needs substantial improvement, and is currently a significant and persistent barrier to successful delivery of homes for people with disabilities.
* There is no ultimate decision-making authority on complex issues, such as issues which get stuck because it is unclear which Department is responsible for delivery (budgetarily or otherwise). There is also no clear appeals or Ombudsman process.
* There continues to be a lack of joined-up thinking across policy areas. For housing policy to be effective, it requires a holistic perspective and practice across policy/Departmental areas (including transport, community, social protection, health etc).
* There is still a lack of clear and comprehensive data easily available, making it hard to analyse and plan. For example, there does not appear to be statistics about the length of time people are on the housing waiting list. The real level of housing need is also (significantly) underreported as many disabled people are not on the housing list.
* Disability housing policy remains siloed. It is not mainstreamed as it should be to be most effective and inclusive, especially given that one in eight people in Ireland have a disability. The fact that disability policy stakeholders were not initially invited to attend the Housing for All stakeholder engagement process recently illustrates the general point.
* There is minimal consideration or acknowledgement of ‘cost of disability’ issues in the current housing system and means testing approach.
* There is a lack of a rights-based approach to housing, understanding that a disabled person is entitled to live in a house and community of their choosing, equal to the rest of society.

Moreover, the data shows that we are not delivering sufficient housing options for people with disabilities.

* The Summary of Social Housing Assessments (SSHA) for 2020 shows that while the overall housing list decreased by 9.9% since 2019, the decrease for disabled people was half that, at 4.9%.
* Decongregation, originally due to be completed by 2018, is still not complete, with 1,953 people still living in congregated settings.
* 5,057 disabled people are currently on the waiting list. This likely significantly underestimates the actual housing need.
* The waiting time for people with disabilities has increased in recent years, while it has decreased for the general housing list. The disability percentage of the overall housing need has also increased annually.
* Between 2016 and 2020 the general category housing list declined by 29,720 (approx. 32% of the total general category list in 2016) while the disability category housing list only declined by 696 (approx. 12% of the total disabled category list in 2016).
* There is a lack of consistent available data on how long people have been on the housing waiting list, but anecdotally it is not uncommon for people to have been waiting for 7-10 years.
* Research by the National Federation of Voluntary Service Providers showed at least 1,250 parents aged over 70 and almost 400 over 80 are the primary carers of an adult with a disability.
* More than 1,342 people with disabilities under the age of 65 are inappropriately placed in nursing homes.
* DFI’s own recent research (cited above) showed that most people with disabilities surveyed had minimal awareness of housing options provided by their local authorities, despite many living in unsuitable housing or anticipating future housing support needs.

As previously mentioned, the actual housing need is likely to be significantly higher than the over 10,000 people referred to above (totalling all figures). Worryingly, some people working in the disability sector feel that it is potentially unethical to encourage people to put their name on the housing list, because they do not believe they will ever get a house or the community and health support package they would need to be able to move into a house were they offered one.

1. **Key Obstacles to successful delivery**

There are numerous obstacles to effective delivery of housing options for people with disabilities, including the following.

**Complex, convoluted system**

* The challenges involved in the planning process, including navigating the CAS system for those who are building.
* Inconsistent approach across local authorities. For example a floor plan approved in one local authority is declined in another - there is a lack of a clear, consistent baseline on acceptable housing plans across all local authorities.
* Inconsistency and lack of clarity around issues can mean that success in any particular area depends on the attitude and approach of the individual staff member one is dealing with – the system is often driven by individuals rather than clear and consistent processes.

**Lack of sufficient funding**

* A significant, persistent lack of PA and home support hours and packages being available, which prevents people from taking up housing offers (and sometimes blocks offers being made or people being put on the housing list).
* The perception that building accessible housing involves an unjustifiable cost associated with ‘extra space’, and this being frequently blocked by the Department of Housing when local authorities and others building housing try to build beyond the minimum requirements.
* Insufficient funding for Assistive Technology (AT), including the maintenance of this technology once it is in place (neither the HSE nor Department of Housing have a budget line for this).
* The overall funding allocated for housing adaptation grants is still significantly lower than it was in 2010 and 2011 (€95.46 million in 2010, for example).
* The maximum grant amount allowed (€30,000) for housing adaptation has not increased in more than a decade, despite significantly escalating construction costs over the period.

**Insufficient interdepartmental/inter-agency coordination and lack of clarity on responsibilities**

* While several meeting spaces and structures do exist that bring stakeholders across Departments together, they have not proved to be fully effective in significantly improving housing delivery.
* This area of policy requires strong and proactive coordination and collaborative working across Departments and agencies (in particular the Department of Housing, Local Authorities and HSE/Department of Health) to problem-solve and address issues. This is not currently happening to the level required.
* There is a significant lack of clear responsibility and accountability for concluding work and resolving complex issues where they cut across the responsibility and brief of different departments and agencies.

**Planning**

* Disability issues, and accessible planning, are not sufficiently integrated into the planning process across the board. Disability is still marginalised and niche within housing and planning, rather than mainstreamed as an approach.
* The problems with Part M and its limitations have been pointed out for many years, and its lack of ambition can be a block to higher quality more accessible housing being built.
* A Universal Design approach is not used across the board.
* Local Authorities report that they are questioned on the cost, or even blocked from adding ‘extra space’ (a problematic description of building for the needs of people with disabilities), by the Department of Housing.
* There is a significant lack of future-planning, and a failure in the system to understand that building accessible housing according to universal design standards enables the country to future-proof our housing stock, saving money in the long term and investing in housing that will be suitable for all stages of the life-cycle.

**Lack of data**

* As previously noted, there is insufficient data available, it is patchy across some areas and it is not always easily publicly available or accessible (even to members of the Implementation Monitoring Group associated with the current Housing Strategy, and other official structures and committees).
* While the SSHA is a useful snapshot of overall housing need, and has seen improved collation of data on housing delivery for disabled people, it does not focus on people with disabilities.
* There is no overall dashboard of comparative annual housing delivery for people with disabilities across all areas, nor a record of those who could not take up housing offers due to insufficient health and social supports or unsuitable housing being offered.
* Data is also needed to compare annual delivery for those without disabilities to those who are disabled (for example, the 2020 SSHA shows that the reduction in numbers on the housing list for disabled people was 4.9%, while it was 9.9% for those without a disability, highlighting an inequity in delivery for people with disabilities).
* Data is no longer gathered on the number of applications for adaptation grants vs the number awarded, meaning there is no data on unmet need, or the amount of people declined or who gave up on their application in frustration at the experience.
* The CAS data for 2019 delivery includes people who were housed as part of Decongregation. This means that delivery figures do not give a clear picture of *new* housing provision for disabled people.
* The annual report from the IMG is not sufficiently detailed, despite requests by disability stakeholders over the years to include more detailed information.
* Galway County Council’s interactive housing report provides an excellent model of what is possible <http://www.galway.ie/en/services/housing/demand/>. It shows, for example, that more than 80 disabled people have been on the housing list for 11-15 years (25% of those waiting this long) and over 210 people have been waiting for 5-10 years (more than 20% of those waiting this long).

**Lack of strong accountability mechanisms**

* There is a lack of a sufficiently strong action plan and reporting framework for the current housing strategy.
* There is a lack of clear, precise and time-bound annual targets that can be used to monitor progress.
* The annual reporting template needs to be improved – it is not sufficiently precise or detailed in a number of areas.
* DFI is a member of the Implementation Monitoring Group (IMG), and has concerns about the impact the work of the IMG (and DFI’s participation in the IMG) has on the overall housing implementation and agenda.
	+ Sometimes requests for increased information and comments on the annual report are not addressed.
	+ As mentioned above the annual report does not provide sufficiently detailed and data-driven information on delivery year on year (including a lack of dis-aggregated or comparative data), which makes it insufficient to meaningfully monitor this policy area.
	+ The IMG meets only twice a year. This is not ambitious enough to meet the rigours and requirements of fully delivering under the UNCRPD.
* There is also a lack of accountability across agencies and Departments, or clarity around ‘where the buck stops’ on ensuring delivery and resolving and moving forward on more complex issues. Where, for example, budgetary issues occur that are not explicitly the responsibility of a particular Department, issues can be stalled.
* There is a lack of a clear process for individuals or the organisations that support them to have their grievances around housing addressed, or to escalate problems they have to a national level. There is no clear process for how to do this, or ultimate arbiter/decision-maker to appeal to.
1. **Specific issues which require particular attention**

Apart from the above systemic issues, some areas require specific attention.

**Decongregation**

* Decongregation is a complex process and needs to be done right to be successful. It is concerning that there are still almost 2,000 people living in congregated settings. DFI has contributed to the detailed submission to this consultation by the Time to Move On group which covers this issue in more detail.
* It is also important to note that a substantial amount of the state’s energy and funding on housing for disabled people went into decongregation in recent years, without a similar level of focus on broader delivery of suitable housing for people with disabilities not living in these institutions. Sufficient attention and funding must be provided to be able to deliver for both cohorts of disabled people.

**Private rental**

* People with disabilities are much less likely to live in private housing as it is very difficult to find a landlord that will accept them (due to issues like overt and covert discrimination, non-acceptance of HAP etc) and that owns accessible housing.
* Where adaptation is required, due to an existing or acquired disability, people often struggle as their landlords are unwilling to do this. Incentives will be required to encourage landlords to adapt their properties, to ensure that people with disabilities have an equal right to rent in the private sector.
* The extremely high cost of rent also excludes many people with disabilities from renting their own home.

**Private purchase: Completely unaffordable housing**

* The broader housing crisis affects people with disabilities, and disability organisations have for many years highlighted the fact that the housing status of disabled people is a crisis within a crisis.
* Given the previously cited statistics on the very low employment levels, and very high poverty levels, many disabled people cannot compete in the market for either private rental (which is often unsuitable) or private purchase.
* For many people born with a disability, buying their own house is completely unachievable. People with disabilities who cannot work have to rely on a Disability Allowance (or similar) payment of €203 a week – an annual income of €10,556. This precludes them from ever being able to afford a mortgage to purchase a house.
* Those who are working still live with the significant extra cost of disability, again making it harder to save or afford a mortgage.

**Keeping people in their own homes if they acquire a disability**

* Most disabled people who privately own a home acquired their disability after securing a mortgage and buying a house.
* People who acquire a disability during working age often face a huge crisis and are at risk of losing their home as they may no longer be able to work and thus cannot make the mortgage repayments. There is no entitlement to a sufficient mortgage payment break, or policy to support someone in this situation.
* The system does not have a clear consistent pathway to support someone who acquires a disability to stay in their own home (be it privately owned, rented or social housing)– for example mortgage support, adaptations, home supports etc.

**Ensuring a real estimate of need**

* As previously mentioned, unfortunately it is clear that the current housing list underestimates the real housing need. 13.5% of people in Ireland have a disability, and over 150,000 people are in receipt of Disability Allowance. Moreover DFI’s own survey cited above indicated that most people were not aware of housing provision options and were not on the housing list.
* Many people are not on the list as they live with family, including aging parents, and are not thinking ahead about their future needs, or simply think they will never get a house and support package.
* In this context the IWA’s ‘Think Ahead, Think Housing’ campaign should be supported by all HDSGs and local authorities, to ensure they have a realistic picture of need in their area.
* An easier and more joined-up national assessment of need for disabled people is required. At present individuals with disabilities go through at least three different separate assessments of need and disability processes – when applying for housing, when applying for disability allowance/similar payments, and when applying for health and other services. If this could be merged into one comprehensive assessment, then money and time could be saved.

**Reform of CAS**

* The processes involved in the Capital Assistance Scheme (CAS) are lengthy and inconsistent from one local authority to the next.
* CAS funders tend to favour bigger housing associations who do not necessarily prioritise disability. The smaller (often specialist) associations who are more likely to build for disabled people find it much harder to secure CAS.
* Getting a CAS project started takes a huge amount of time, with frequent delays, meaning speedy delivery is very difficult. Simply getting a project started can take up to 4 years, meaning individuals must wait even longer than this to be housed (as such projects must be for people already on the housing list, not to anticipate need).
* There is a frequent lack of consistency in the process across different local authorities. For example, the exact same floor plan may be approved by one local authority but rejected by another.
* Local authorities do not adopt a consistent acceptable baseline for the design of CAS projects, which causes difficulty and increases costs for those building across different regions.
* Addressing these process issues would significantly improve and speed up the delivery of housing.

 **Nursing homes**

* The more than 1,342 people who are inappropriately housed in nursing homes are not on the housing list.
* Please see DFI’s 2018 report which initially drew attention to this problem and contains a lot more detail on this issue[[4]](#footnote-5).
* A key problem here is the lack of home support packages and the lack of a pathway for people acquiring disabilities out of acute hospitals back into their home or community living.
* This issue has been comprehensively documented in the recently released Ombudsman’s Wasted Lives report.
* While it is welcome that Budget 2021 contained funding to move 18 people out of nursing homes, if we were to continue at that rate it would take over 75 years to move everyone out of nursing homes.
* A specific strategy and set of resources will be required both to move people out of nursing homes, and to address the problems that left them with no option but to live in them, to ensure that other people do not have to enter nursing homes in the future.
* To address this (and other housing issues) a statutory right to community services including PA, home care, respite etc is required. Sufficient funding must also be provided for this (the as yet unpublished Disability Capacity Review can give more detail on the need and cost of this provision).

**Assistive Technology**

* Assistive Technology (AT) is a crucial area of innovation that can support disabled people to live independently. It has the potential to transform lives, and after initial investment, to reduce costs and save money into the future.
* A commitment to using and funding AT must be part of the housing strategy. Often issues arise between different Departments and Agencies regarding who should fund AT, including funding the maintenance of such technology once it is in place in a house.
* At present a lot of AT is procured individually on the market, by the tradesperson installing it. A centralised procurement system for AT could see the state make savings by buying in bulk.
* AT is constantly evolving and thus a flexibility should be built in around policy and regulations in this area, as technological development can move very fast over a short period of time.
* NDA research indicates high levels of usage of AT, and high levels of unmet need, including low-tech/common tech such as stair lifts, bathroom aids and portable ramps.
* Disability organisations have been calling for the implementation of an AT passport for some years. This would see the various Departments who fund different aspects of AT, come together to co-ordinate and streamline AT policy, delivery and funding.

**Intersectionality**

* Any new strategy should be aware of intersectionality, the fact that disability does not exist alone in a vacuum, and how disabled people can also be marginalised due to their gender, ethnicity, sexuality, socio-economic status etc.
* The housing strategy should build in awareness of issues of intersectional marginalisation or exclusion, including, for example, provisions to specifically support:
	+ Disabled asylum seekers and refugees in the Direct Provision system - see DFI’s detailed submission to the White Paper review on Direct Provision.
	+ Disabled ethnic minorities, including those who may be in homeless accommodation.
	+ Disabled travellers, who are doubly vulnerable due to the significant lack of sufficient housing provision, including proper halting sites, and societal prejudice[[5]](#footnote-6).
	+ Disabled women who experience domestic violence.
	+ Disabled people at risk of poverty or living in consistent poverty.

**Future planning and averting crisis mode**

Overall, there needs to be a significant move away from only addressing the housing needs of disabled people when they become a crisis. Needs should be assessed early and planned for. Data should be analysed ahead of time, and plans should be made to proactively build housing for an increasing disabled population into the future – again the NDA estimates that the number of people with a disability will increase by approximately 20% by 2026.

1. **Key approaches: Using the social model of disability**

**Health and Housing**

As previously stated, Article 19 of the UN CRPD must be at the core of the new housing strategy. However, for many disabled people their right to live independently and be included in their communities cannot be resolved solely by addressing housing supply or the availability of accessible housing stock. It will require the effective alignment of housing provision with access to adequate levels of health and personal social services and supports that are a necessity to enable a person to live a full and independent life in their community.

This requires a level of interagency coordination at both national and local level. The establishment of the HDSGs at local authority levels has been a welcome development; it has provided increased visibility as to the true housing needs of disabled people at local level. However, without a clear and transparent mechanism that enables a person to apply for housing and supports through one process, it will remain difficult to achieve the level of interagency forecasting, costing and budgeting that will be required to adequately respond to housing needs at local level.

A national mechanism must also be established to ensure oversight of local processes, to aggregate the need and to agree the budget allocation required across Departments, and to standardise these across local authorities, eliminating the current ‘post code lottery’ experienced by disabled people. The next strategy would greatly benefit from a strengthened mechanism at senior level to ensure sufficient coordination between national HSE staff, local authorities and other key stakeholders (Housing Agency, Department of Housing etc) where the parties present have a sufficient mandate to ensure strategic planning and annual allocations will be coordinated. This approach is needed to ensure the resources assigned for both health and social supports *and* housing are sufficient and aligned, and that disabled people can trust that the ‘system’ can comprehensively plan for and deliver on their housing needs.

The lack of sufficient PA and other home supports is currently a major barrier to people with disabilities accessing housing to live independently. The next strategy must remove the catch-22 situation where people with disabilities cannot secure housing from local authorities in the absence of a sufficient support package, such as PA hours, AT or residential supports packages, depending on the persons’ needs. To address this recurrent problem an assessment process is needed that enables transparency and coordinated planning and budgeting between those with a housing brief and those responsible for the health brief of supporting people with disabilities. This requires a shared assessment model that utilises agreed terminology and definitions, to ensure transparency regarding allocation but equally regarding gathering evidence of unmet need (for example there is currently no estimate available of unmet PA need, despite it being clear that the current provision of PA hours is completely insufficient). This assessment and coordinated approach should make explicit where blockages exist in terms of the housing supply, budget allocation or social and health supports. The new strategy will need a clear process that ensures that a person will be offered the necessary PA/social care supports by the HSE once they are in the offer zone for a house. There is also a need for better coordination regarding broader health issues, such as OT support, access to rehab and other health services.

**Community and Housing**

Any new housing policy must take a broader view of housing to consider community participation and integration, as well as access to community services, beyond the technicality of delivering physical houses. Supporting disabled people to move out of residential settings into houses in community settings fulfils the objective of removing the stigma of disability and restoring the rights of disabled people to live in locations and communities of their choosing. Likewise fully delivering suitable housing for disabled persons who have never lived in residential care also fulfils their right to live more independent lives in a community of their choosing. But there is world of difference between living in a community and being part of the community. And living independent lives should not mean living isolated lives. The four walls of a house do not make it a home. Likewise locating those houses in the heart of a community does not automatically include those who live in them in that community.

Current housing policy and practice often fails to understand this broader context, and the roles that various external public bodies and organisations must play to support the integration of disabled people in the community. These actors must also be involved in the overall planning and housing process. Too often there is little evidence that this level of coordination takes place, running the risk of creating mini-institutions in the community and isolating disabled people further. Housing policy and planning must consider broader community issues such as access and proximity to health and community services, accessible transport etc. Disabled people in the community must have equal access to all areas of life – such as employment, transport, housing, education, social and leisure activities, access to public buildings etc.

If disabled people are to be housed successfully in the community, it is imperative that the person is considered as an individual with her own likes, desires, expectations and hopes. A 360 degree vision must be taken into consideration to ensure the person being housed’s life can be as fulfilling as possible in the new location. As well as being physically ‘housed’, the support should go beyond that. The person involved should be introduced to the physical community if they are not yet familiar with it – eg local transport options, shopping and amenities such as cafes and bars, cinemas, location of key public agencies such as the Citizens Information centres, local authority offices and health facilities. The same attention should be given to supporting key stakeholder agencies to play their part to inform newly housed disabled people about local opportunities for work, training/education, participation in local decision making, interest groups, volunteering, sporting or leisure activities etc. In this way, disabled people can be supported to be an active, involved and contributing part of the community they live in, and not silent and invisible residents within the community.

1. **Existing commitments: Programme for Government and other policies**

The Programme for Government made a range of promises on disability, and more generally on housing, which the new Housing Strategy will need to deliver on. These include commitments to:

* Ensure that an appropriate mix of housing design types is provided, including universally designed units, and accommodation for older people and people with disabilities.
* Continue with the successful decongregation programme and complete a further move of more people with disabilities from congregated settings to homes in the community, with the necessary supports.
* Reduce and provide a pathway to eliminate the practice of accommodating young people with serious disabilities in nursing homes.
* Work towards physical accessibility to all government departments, local authorities and agencies providing services.
* Include the consideration of disability in all housing policy reviews.

There are also a range of broader commitments on disability which will need to be factored into the new strategy:

* We want to empower and give those with a disability the ability to choose the supports that most meet their needs.
* Improve and change services through better implementation and collaboration.
* Ensure that the most effective interventions are provided for each individual, to guarantee the best outcomes.
* Continue to work with all government departments and their agencies, to ensure that a disability perspective is integrated into mainstream policy development.

The above clearly gives a strong mandate for an ambitious and effective housing strategy, that delivers choice, agency and equality to people with disabilities seeking to stay in their own home or get a new one.

Other relevant policies and commitments that will need to be considered and integrated into this approach include:

* The learnings from the National Disability Integration Strategy
* The state’s first report on the UN CRPD (and the civil society shadow report) and the new forthcoming implementation plan for the UN CRPD
* The Roadmap to Social Inclusion, which contains a chapter on people with disabilities.
* The forthcoming Housing for All strategy.
* The Department of Housing’s Statement of Strategy and the HSE’s Service Plan.
* The Sustainable Development Goals.

Moreover the creation by the Government of the new Department of Children, Equality, Disability, Integration and Youth shows a new approach to disability, avowing a more holistic and cross-cutting attitude, and a move from the medical to the social model of disability. This ongoing change in policy-making and perspective on disability can inform and enrich Ireland’s approach to housing for people with disabilities, and support a more considered, coordinated, coherent and rights-based housing policy into the future.

**10. The new strategy should deliver at all levels**

**Individual**

For the individual navigating the system, and those who are supporting them in their quest for independent living, a new housing strategy must deliver the following:

* A clear, consistent, and simple process map to show how any individual with a disability can resolve their housing issues.
* A landing page on all local authority websites, (and potentially also the Housing Agency and Department of Housing) that explains simply the clear pathway to being sufficiently housed across the different housing issues disabled people experience, including private rental, social housing (including health support packages), adaptation grants, support on acquiring a disability etc.
* A designated contact point in each local authority for disability and housing queries and issues. Ideally each local authority should have a Housing and Disability Coordinator.
* A consistent, clear and transparent assessment process, that includes assessment for both housing and health and support package needs (see below for more on this).
* Choice and sufficient services for all individuals, equal to non-disabled people seeking housing.
* Support for people who acquire a disability to stay in/return to their home, and a clear pathway for this to happen.
* Proactive engagement when a disabled person turns 18, and later at given intervals, to assess their evolving housing needs.
* An Ombudsman for people with disabilities on housing issues, or some form of national complaints and appeals mechanism, to resolve difficult issues.

**Local Authority**

At local authority level, the strategy should ensure that the following is delivered and implemented consistently across all local authorities:

* Significant training in both disability awareness and a comprehensive understanding of the various kinds of disability and their implications, as well as the UN CRPD and Public Sector Duty, for all staff working on disability and housing issues – including front office staff dealing with applicants, architects, planners, etc.
* Significantly increased housing delivery – current waiting times of 3-6 years, or even significantly longer (10-13 years), are not acceptable.
* Significantly clearer roles and responsibility at HDSGs, and regular meetings scheduled in advance.
* A local consultation next year on all Strategic Plans, in light of the new national strategy and to address gaps in consultation in 2021.
* A clear communications plan to make people aware of their housing rights and entitlements, including a webpage on each local authority website providing clear easy to read accessible information, and a process map for housing issues.
* Support to IWA’s ‘Think Ahead’ campaign to get people to think about their future needs and sign up to the housing list.
* A designated role in each local authority on housing and disability, modelled on, and learning from, the Mental Health Housing Coordinators and Age Friendly Housing Technical Advisor roles.
* Stronger accountability mechanisms on local delivery, including:
	+ Annual reporting to agreed targets.
	+ Information published on local authority websites on annual delivery, number of people on waiting list, length of time people are on the waiting list etc. (see Galway county model cited earlier).
	+ A named staff officer in each Local Authority with responsibility for supporting people with disabilities in their housing issues and resolving problems where they arise.
* A regular, consistent and systematic practice of coordination and collaborative planning across agencies, and engagement from all actors (in particular local authorities and the HSE) at a sufficiently senior level to be able to progress issues and resolve problems - in particular to ensure health and social support packages are available and aligned with housing offers coming onstream.
* A consistent approach and set of regulations and practices across all local authorities (for example on floor plans).
* Strong capacity and clarity around how to escalate difficult issues to national level and resolve them.

**National Level**

At a national level, to effectively deliver the right to housing for disabled people, the following will be required:

**Better clearer public information**

* A clear process map to show how any individual with a disability can resolve their housing issues, broken up by step, across different areas – renting, social housing, adaptation, planning for the future, building etc.

**Increased delivery**

* Increased delivery – current waiting times are not acceptable. In 2020 the number of disabled people on the housing list declined by half as much (4.9%) as those without disabilities (9.9%). Figures for delivery from 2016-2020 show similar inequities.

**Accountability, escalation and annual targets**

* A national escalation or complaints mechanism on housing and disability (for individuals with disabilities and their families, and disability organisations working to support and advocate for them) - ideally an Ombudsman for disability and housing.
* A published annual Action Plan, to include Key Performance Indicators, clear and time-bound targets against which to report, including:
	+ Annual delivery targets for housing for disabled people – disaggregated by sub-targets in the area of decongregation, nursing homes, social housing, adaptations, numbers on HAP, housing in the pipeline for next year etc.
	+ A comprehensive and detailed annual assessment and dashboard to track the delivery as per above targets.
	+ Delivery against the 7% quota outlined below.
	+ Numbers/percentage of disabled people being housed compared to number/percentage of people on general housing list being housed.
	+ Data on the amount of time disabled people are on the housing list and targets to decrease the waiting time.

**Planning and building**

* A commitment to build according to universal design principles and IWA Guidelines, and to provide the funding required for this.
* Institution of a national quota that a minimum of 7% of all new houses built should be to universal design and accessible standards, including wheelchair liveable.
* A greater understanding that the ‘extra space’ sometimes required by disabled people is not an optional extra, but is in fact a right, entitlement, and a requirement to support disabled people to live independently.
* The reform of Part M to address the problems previously highlighted by disability organisations.
* Train individuals in planning departments and strengthen training at third level for architects, planners, Occupational Therapists etc, on disability, access and universal design issues.

**Funding and costs**

* A longer-term inter-departmental cost-benefit analysis and understanding is required regarding expenditure on housing for disabled people – considering the long-term cost to the state of a person ending up in emergency accommodation for years vs the cost of supporting a housing adaptation to enable them to stay at home, for example.
* Coordinated work and budgetary allocation and alignment between Department of Housing, Department of Health/HSE and Department of Children, Equality, Disability, Integration and Youth to ensure all areas of funding align and are catered for, in particular those for health and social supports required to support independent living.
* Funding provision at national level for Housing and Disability Officers in each local authority.
* A centralised procurement process (to reduce costs) and a clear funding line for Assistive Technology, including maintenance once it is installed.
* The voluntary disability sector is chronically underfunded, carrying rolling deficits of €40 million. Funding should be provided to support the disability sector to increase its capacity on housing issues (at local and national level), to support the delivery of this strategy.

**Housing adaptation**

* A substantial increase in the maximum grant allowed acknowledging the significant level of work required and the increased costs of construction in the past decade. This can also be more cost-effective as it avoids people going on the housing list, at much greater cost to the state.
* The extra cost of disability must be explicitly factored into both the maximum grant amount, and the means assessment and income thresholds used to establish eligibility. Some people even find the cost of paying for the initial Occupational Therapist report (approx. €200) to be prohibitive, preventing them from engaging with the adaptation process.
* Means assessments should be based on the income of the person with a disability and not the income of the whole household. The current approach of considering household income perpetuates dependency and does not recognise the right of a person with disability to live independently. It also institutionalises the practice whereby families absorb the extra cost of disability, perpetuating poverty and economic vulnerability.
* Incentives for private landlords to adapt their houses to make them fully accessible.
* Currently the adaptation grant is only paid out after works are fully complete. This often requires families to get a loan to pay for the work up-front (as many builders require), and causes financial hardship. Can the grant be paid directly to the builder (potentially in two tranches) once the work is agreed and signed off?

**Interdepartmental coordination**

* As previously mentioned, interdepartmental coordination and collaboration will be central to fully achieving a rights-based housing policy and practice for disabled people.
* Most crucially this will require proactive, regular joint working at senior level between the Department of Health/HSE, Housing and DCEDIY. Consider developing a joint departmental policy statement, akin to the “Housing Options for Our Ageing Population Policy Statement”.
* Other Departments will also need to be involved to join the dots across policy areas– including Social Protection, Rural and Community Development and Transport.

**Assessment of need process and procedure**

* The current approach to assessing the needs and level of disability of an individual in Ireland is disjointed. There is duplication of assessments of need at local level and yet the necessary data on housing is missing.
* The following assessments currently take place at county level by state funded bodies:
	+ NASS (National Ability Support Systems) complete medical assessments of need and the data is used to plan for the medical need in the health sector.
	+ HSE Assessment Officers assess people to identify Health and Education needs and respond with a service statement and potential for supports.
	+ The Local Authority does a Medical Assessment and a Housing Assessment.
	+ (Individuals also go through another assessment process if they apply to the Department of Social Protection for Disability Allowance or other payments).
* One joint, standardised assessment with a holistic approach and scheduled reviews should be able to capture the medical, housing and education needs of people with disabilities regardless of age. All of the current assessments are being carried out by qualified professionals. The freeing up of resources used in assessments could be redirected to provision of supports. This would also help to align housing and health support provision.
* Assessment of need should start early - people should be assessed automatically at 18, so that the state can plan for their future housing needs proactively and avoid the current situation where housing needs become clear only at a time of crisis when, for example, a family carer can no longer support their disabled family member.

**Key approaches and considerations**

* Institution of a national quota designating that at minimum 7% of all new houses built should be to universal design and accessible standards, including wheelchair liveable. Such units should be dispersed across larger housing estates and projects.
* To plan effectively it is necessary to have a real sense of the housing need. Many people with a housing need are not on the housing list currently.
* The extra cost of disability (estimated to be €207 a week) must be factored into housing policy across the board when considering income and means.
* Sufficient availability of PA and home support hours is urgently required according to need, to enable people to live independently.
* A recognition and consideration of the importance of community services and supports, to ensure people with disabilities can be integrated and participate in communities they choose to live in.

**Crucially, the new strategy should**

* Be founded on implementation of the UN CRPD and in particular the right to live independently as outlined in Article 19.
* Mainstream disability housing policy so that supply, design and accessibility are considered, and built into requirements, in *all* areas of housing policy and planning.
* Have a clear Action Plan that includes time-bound targets against which progress can be measured, and a built-in mid-term review process.
* Have strong accountability mechanisms and clarity on how inter-departmental issues will be resolved and addressed.
* Include a public communication plan targeted at people with disabilities and their families, and the organisations that work to support them, at both local and national level.
* Provide and signpost a system of integrated funding, to a sufficient level, dedicated to housing people with disabilities and providing all necessary supports to enable them to live independently.
* Have a clear escalation process and mechanism for issues to be raised and resolved at national level.
* Be based on Joint Protocols with Departments, and have aligned and agreed budgetary provision.
* Draw on more recent, best practice housing strategies, policies and approaches, such as the Mental Health Coordinators, the Ageing in Place Strategy and Housing for Older People.
* Adopt a future-proofing approach to housing, based on life-time adaptable and Universal Design principles and Irish Wheelchair Association Best Practice Access Guidelines (4th Edition), which will ultimately be value for money as there will be less need for retrofitting, with such housing catering for changing demographics.

Currently, many people with disabilities and their families have little or no choice about where and how they live. Many are struggling to live in inappropriate housing unsuitable to their needs, required to live with family members or in nursing homes due to a lack of options, or have been waiting for years for the state to provide them with a house and sufficient community services, including crucially, Personal Assistant services. The chance to live independently, and have their own home, equal to others in Irish society, is an unrealistic dream.

Ireland now has the opportunity to address this situation, and to do better. The barriers that prevent people with disabilities from having a home of their own must be addressed, and they must be provided with the supports required to live independently. In drafting a new strategy for housing for disabled people, Ireland can develop and create a new model of housing provision, that is person-centred, rights-based, holistic and community-focused. We must finally ensure that people with disabilities have the right to actively choose where they live, to sufficient services to enable this, and to an adequate standard of living. Disabled people must be supported to live independently in, and contribute to and participate in, the community of their choice, on an equal basis with others. Only then will we have delivered on our commitments under the UN CRPD.



DFI is about making Ireland fairer for people with disabilities.

We work to create an Ireland where everyone can thrive, where everyone is equally valued.

We do this by supporting people with disabilities and strengthening the disability movement.

There are over 120 member organisations in DFI. We also work with a growing number of other organisations that have a significant interest in people with disabilities.

DFI provides:

• Information

• Training and Support

• Networking

• Advocacy and Representation

• Research, Policy Development and Implementation

• Organisation and Management Development

Disability is a societal issue and DFI works with Government, and across all the social and economic strands and interests of society.

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1. More detail provided in this submission, but please also see, for example, DFI’s submission on the Draft State Report on the UN CRPD - in particular the section on Article 19. <https://www.disability-federation.ie/assets/files/pdf/dfi_state_report_submission.pdf>. [↑](#footnote-ref-2)
2. NDA, <http://nda.ie/resources/factsheets/nda-factsheet-4-retaining-people-with-a-disability-in-the-workforce/nda-factsheet-4-retention.pdf>. [↑](#footnote-ref-3)
3. See DFI’s Project Report *Training Local Authorities in Using the UN Convention on the Rights of Persons with Disabilities to Fulfil their Public Sector Human Rights and Equality Duty* for some more information and learning on this issue. <https://www.disability-federation.ie/assets/files/pdf/ihrec_report_final_1.pdf>. [↑](#footnote-ref-4)
4. *The situation of younger people with disabilities living in nursing homes in Ireland - phase 1* <https://www.disability-federation.ie/assets/files/pdf/dfi_rr_2018_web.pdf> [↑](#footnote-ref-5)
5. See the work of Mercy Law Resource Centre for more on this <https://mercylaw.ie/publications/> [↑](#footnote-ref-6)