

MEDIA STATEMENT

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‘Housing is health infrastructure’: AMSANT says YiSSA closure exposes NT social housing crisis

The Aboriginal Medical Services Alliance Northern Territory (AMSANT) says the looming closure of YiSSA has exposed the dangerous consequences of the Northern Territory’s chronic shortage of safe, appropriate social housing for people with serious health needs.

Reports of dialysis patients being forced into overcrowded homes, including sleeping on floors as they try to remain close to the life-saving treatment they need several times a week, show the serious health risks being created by the Northern Territory Government’s handling of the closure of the YiSSA short-stay accommodation facility.

AMSANT CEO Donna Ah Chee said the situation demonstrated why housing must be treated as a fundamental determinant of health, particularly for Aboriginal people from remote communities who need to stay in Darwin for extended periods to access treatment.

“For people living with kidney disease and other serious chronic or complex health conditions, having a safe and stable place to stay is not separate from their healthcare. It is essential to it,” Ms Ah Chee said.

“People with serious health needs should not be sleeping on the floor of an overcrowded house or facing the prospect of moving away from the health services and support networks they rely on.

“When someone needs dialysis several times a week, safe accommodation close to treatment can be the difference between getting the care they need and becoming seriously unwell.”

The NT Government has announced transitional accommodation at Batchelor, around 100 kilometres from Darwin, for some YiSSA residents, while saying medically vulnerable residents, including renal patients, will be supported to find alternative accommodation closer to their treatment.

Ms Ah Chee said finding alternative accommodation for those patients was essential, but the immediate crisis pointed to a much larger problem.

AIHW data shows 57% of Aboriginal people in the Northern Territory live in overcrowded housing, the highest rate of any state or territory. Evidence links overcrowding to poorer health, including higher rates of infectious illness and acute rheumatic fever, as well as increased avoidable hospital admissions.

“YiSSA may be closing, but the need it has been meeting is not going away,” she said.

“There simply are not enough safe, appropriate and affordable housing options in Darwin for people who need to come in from remote communities for healthcare, or for the many other Territorians who need social housing.

“That shortage has consequences across our health system. Overcrowding contributes to poor health, housing instability makes it harder to manage chronic disease, and when people have nowhere safe to go, hospitals and health services inevitably carry more of the burden.

“We cannot improve Aboriginal health outcomes without addressing housing. It is one of the most fundamental social determinants of health.”

Ms Ah Chee said the way the closure had been managed was unacceptable and should prompt a renewed focus on expanding social and supported housing in Darwin and across the Northern Territory, including accommodation that meets the needs of people accessing ongoing healthcare.

“We need significant, long-term investment in social housing that reflects the scale of need in the Northern Territory, including appropriate accommodation for people who have to travel hundreds of kilometres from their communities to access healthcare.

“YiSSA has brought this problem into sharp focus, but it did not create it. The underlying problem is a severe shortage of housing, and unless we address that, we will keep seeing people cycle through overcrowded homes, homelessness, hospitals and crisis services.

“Housing is health infrastructure. We need to start treating it that way.”

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