

Southern Homelessness Services Network

Submission to the

Federal

Parliamentary

Inquiry into

Homelessness in

Australia

2020

The House of Representatives Standing
Committee on Social Policy and Legal Affairs



SHSN

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Attachment A Southern Homelessness Services Network (SHSN) 2018 ABS Census Homelessness Estimates 2016 Southern Region Report

1. Introduction and Background

1.1 About the Southern Homelessness Services Network

The **Vision** of the Southern Homelessness Services Network (SHSN) is an end to homelessness in Southern Region of Melbourne (covering ten local government areas - Bayside, Cardinia, Casey, Frankston, Glen Eira, Greater Dandenong, Kingston, Mornington Peninsula, Port Phillip and Stonnington).

The **Mission** of the “Victorian Homelessness Networks is to facilitate, inform and support regional homelessness services and stakeholders to work together to co-ordinate services to people who are experiencing or who are at risk of homelessness.”

The Southern Homelessness Services Network (SHSN) comprises all funded Specialist Homelessness Services in the Southern Region of Melbourne including services providing crisis, transitional, long term, family violence and youth support and accommodation. Our members include Launch Housing, the Salvation Army, Wayss and Sacred Heart Mission. The SHSN also supports allied service sectors working in homelessness. The SHSN is a resource for the homelessness sector in the South.

The key strategic SHSN objectives are:

1. To promote and support innovation, knowledge sharing and expertise in the best interests of consumers
2. To foster relationships and collaboration between service providers to ensure timely, coordinated and effective responses
3. To act as a conduit between the Department of Health and Human Services and the regional service sector homelessness related data, issues and trends to inform policy
4. Working together to end homelessness

1.2 About the SHSN Submission to the Parliamentary Inquiry into Homelessness in Australia

The SHSN commends the Federal Parliament’s House of Representatives Standing Committee on Social Policy and Legal Affairs Inquiry into homelessness in Australia. The terms of reference for the Inquiry are broad-ranging and cover the incidence of homelessness, overcrowding, early intervention and prevention, services for different target groups and best practice.

There are many myths and stereotypes associated with homelessness and the people who have experienced it. The Inquiry provides an excellent opportunity to look behind these myths – to look at the facts and figures about homelessness and to learn from the experiences of the real people that sit behind those statistics about how to end homelessness in Australia.

The SHSN submission to the Inquiry provides the Inquiry with an understanding of the incidence of homelessness in the Southern Region of Melbourne as well as the broader social, economic and policy factors that impact on homelessness and on service delivery.

This submission is drawn from the following information sources:

- the experiences and expertise of our member agencies through a member workshop held in October 2019
- input from an online SHSN member survey run in November-December 2019 (87 respondents)
- input from a survey of consumers of SHSN member services run in October-November 2019 to gain feedback on their experience of the homelessness service system, not specific to the Inquiry yet useful to inform the Inquiry (137 respondents)

- homelessness data providing a picture of trends in the Southern region including:
 - the Australian Institute of Health and Welfare (AIHW) Specialist Homelessness Services Collection 2014-15 to 2018-19 <https://www.aihw.gov.au/reports/homelessness-services/shsc-data-cubes/contents/data-cubes> released December 2019
 - the Australian Bureau of Statistics (ABS) Census of Population and Housing: Estimating Homelessness, 2016 Special Data Request. The SHSN produced a report based on this special request, analysing the data for the Southern Region [ABS Census Homelessness Estimates 2016 Southern Region Report](#)
 - Department of Health and Human Services (DHHS) Local Area Service Network (LASN) data Quarter 4 2018-19 (released December 2019) <http://chp.org.au/dhhs-lasn-reports/>
- Other relevant data relating to housing and homelessness in the Southern Region.

This submission discusses some of the implications of the coronavirus pandemic on people experiencing homelessness and people at risk of homelessness.

The key recommendation of this submission is:

That the Federal Government work, in conjunction with State, Territory and local governments, to develop a ten year National Homelessness and Low Income Housing Strategy and Action Plan.

The SHSN submission also proposes a range of solutions for ending homelessness in Australia, including opportunities for early intervention and prevention, to contribute to the recommendations of this important Parliamentary Inquiry (see Section 4).

2. The Incidence of Homelessness in Australia

People experiencing homelessness are diverse with different backgrounds and life experiences and different factors contributing to their homelessness. The common underlying causes of homelessness are the lack of affordable housing and poverty. This can be compounded by structural and personal factors including family violence, violence and trauma (as a child and adult), mental illness, poor physical health, disability, cultural background including Indigenous background, incarceration, etc.

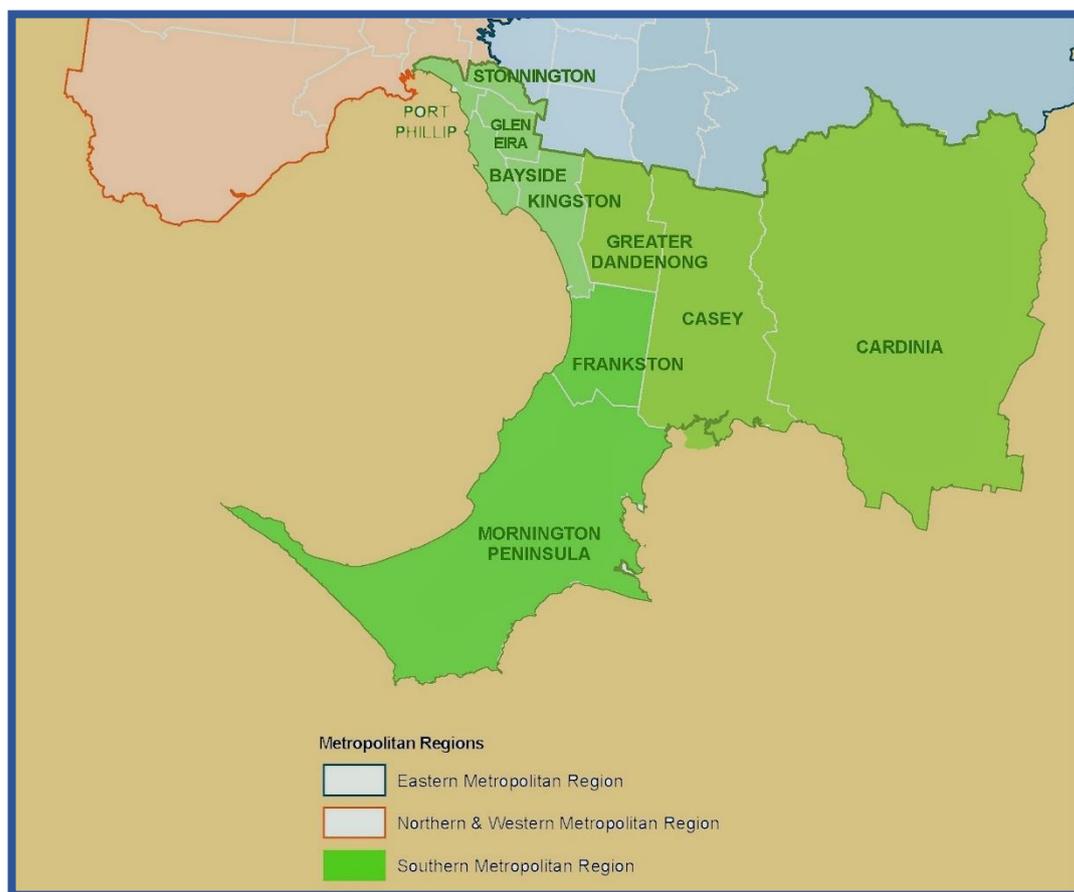
This section of the submission provides:

- an overview of Melbourne’s Southern Region
- an analysis of the scale of homelessness in Melbourne’s Southern Region including overcrowding
- a discussion of the cohorts experiencing homelessness.

2.1 About the Southern Region

The Southern Region comprises ten local government areas in Southern Melbourne - Bayside, Cardinia, Casey, Frankston, Glen Eira, Greater Dandenong, Kingston, Mornington Peninsula, Port Phillip and Stonnington (see Figure 1). This is a geographically and socio-economically diverse region.

Figure 1 Map of Southern Region Local Government Areas



Homelessness manifests differently in different parts of Melbourne's Southern Region. Melbourne's inner Southern suburbs have high rates of gentrification, in areas such as St Kilda and Prahran, which have seen a high loss of affordable housing options, particularly for low income single people. There are higher concentrations of public housing in the inner South, with several large public housing estates. These areas, and the City of Port Phillip in particular, have traditionally been seen as a magnet for people experiencing homelessness with higher concentrations of homelessness and community services to meet their needs.

The outer Southern suburbs of Melbourne includes some of the fastest growing residential areas in Australia with two local government areas in the top ten fastest growing municipalities in Australia -

- The Shire of Cardinia experienced 4.6% growth between 2018 and 2019 adding an additional 4,717 residents to its 2018 population of 107,120 (seventh fastest growth in Australia).
- Casey Council experienced 4.2% growth between 2018 and 2019 adding an additional 13,648 residents to its 2018 population of 340,419 (ninth fastest growth in Australia) (id 2019).
- In addition, Casey Council has the largest population of any local government area in Victoria at 354,067 residents, equating to over 5.3% of the total Victorian population.

Accompanying this growth is a lack of housing diversity for different household types. Housing for singles (young and elderly), larger families and share housing is limited in these growth areas which predominantly have housing designed for nuclear families. This has seen increases in homelessness in these areas which are not traditionally viewed as having a homeless population.

The City of Greater Dandenong is the most culturally diverse in Victoria and in the whole of Australia. The 2016 census data showed that the City of Greater Dandenong had residents from 157 different birthplaces and more than half of the residents were born overseas (CGD Council, 2018). Greater Dandenong has the highest number of people seeking asylum in Victoria at nearly 2,000 and is therefore disproportionately affected by the Federal Government income support payment cuts for this highly marginalised group. Rates of homelessness have been high in Dandenong since 2001, but with lower rates of rough sleeping, homelessness is more hidden.

The outer South also includes the tourist area of the Mornington Peninsula Shire. Mornington Peninsula is a unique municipality with some areas of high disadvantage contrasting with areas of high affluence and balancing the needs of tourists and holiday makers with those of permanent residents. Lack of public transport across the municipality makes it difficult for people to access services. Lack of affordable rentals and lack of emergency accommodation forces people out of their communities and away from supports when they become homeless. Relatively large numbers of people sleep rough along the foreshore throughout the year and are often displaced in summer when holiday makers use the campgrounds.

Frankston, similar to Dandenong, has been considered relatively affordable for rental housing in the past. This has changed with increases in house prices and the cost of private rental, leaving struggling residents with fewer housing options. Frankston has relatively high levels of socio-economic disadvantage and family violence, which increases the risk of homelessness. The lack of crisis accommodation for young people in Frankston and Mornington Peninsula has led to stakeholders forming the Youth2 Alliance supported by both local governments. Youth2 seeks the establishment of youth refuges and youth foyers in the Frankston/Mornington Peninsula area (Youth2 Campaign, 2018).

Many of the local councils in the Southern region are actively involved in advocacy to end homelessness. In addition, Monash Council is leading a coalition of 14 Eastern and South-Eastern Councils to develop a regional local government approach to respond to homelessness and advocate for more social housing.

2.2 Homelessness in the Southern Region of Melbourne

There are consistently large groups that make up the majority of people presenting to Specialist Homelessness Services – primarily women and children escaping family violence, young people and single people. Single people and young people on Centrelink income are very limited in the housing they can afford and access due to their extremely low incomes.

This section presents an analysis of the various homelessness data sets to illustrate the trends in homelessness in the Southern Region. This data shows the variations between different council areas and across the region. This is followed by sections from the SHSN member and consumer surveys presenting the views of SHSN members and consumers.

2.2.1 What does the data tell us about the incidence of homelessness in the Southern Region of Melbourne?

The different data sets tell us different information. The ABS Census data provides a point in time snapshot of the numbers of people experiencing homelessness on one night every five years. This includes everyone counted in the Census thus capturing data about people who do not utilise homelessness services. The AIHW and DHHS data sets explain about the usage of funded Specialist Homelessness Services. The AIHW data has breakdowns by local government area for sex, age and homeless or at risk of homelessness. The DHHS data is broken down by Local Area Service Network (LASN) with the Southern LASN equating to the Southern Region of Melbourne.

The SHSN prepared a report analysing the ABS data for the South. This report is at Attachment A and includes LGA data snapshots showing homelessness by different operational groups for each LGA and the changes between 2011 and 2016.

Figure 2 below is an infographic summarising the key ABS data for the Southern Region LGAs.

Figure 2 Southern Region Snapshot

ABS Census Homelessness Estimates 2016

SOUTHERN REGION SNAPSHOT



SOUTHERN REGION

The Southern Region of Melbourne consists of the Councils of:

- Bayside • Greater Dandenong •
- Cardinia • Kingston • Casey •
- Mornington Peninsula • Frankston •
- Port Phillip • Glen Eira • Stonnington •

The Department of Human Services areas of Bayside-Peninsula and Southern Melbourne are included in the Southern Region.

DEFINITION OF HOMELESSNESS

The widely accepted Australian Bureau of Statistics (ABS) definition of homelessness in Australia is:

When a person does not have suitable accommodation alternatives they are considered homeless if their current living arrangement:

- is in a dwelling that is inadequate;
- has no tenure, or if their initial tenure is short and not extendable; or
- does not allow them to have control of, and access to, space for social relations.

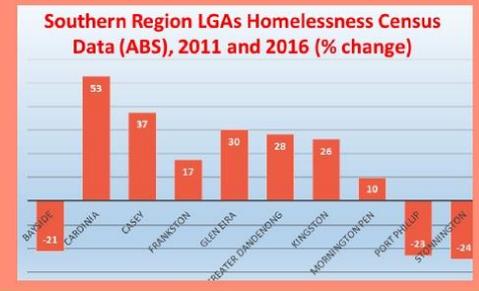
The ABS measures homelessness by different groups which cover:

1. Persons living in improvised dwellings, tents or sleeping out;
2. Persons in supported accommodation for the homeless;
3. Persons staying temporarily with other households;
4. Persons living in boarding houses;
5. Persons in other temporary lodgings; and
6. Persons living in 'severely' crowded dwellings.

WHO IS HOMELESS IN THE SOUTHERN REGION?

- 28%** of all people counted as homeless in Victoria were living in the Southern Region (compared to 24% of the general Victorian population).
- 6,916** people were counted as homeless in the Southern Region
- 1,431** of all people counted as homeless in the Southern Region were aged 18 and under
- 3 of 5** local governments with the highest numbers of homelessness in Victoria were in the Southern Region - Greater Dandenong (1,942 people), Casey (1,280 people) and Port Phillip (1,127 people)
- 2,691** of all people counted as homeless in the Southern Region were living in severely crowded dwelling
- 1,604** of all people counted as homeless in the Southern Region were living in boarding houses
- 248** of all people counted as homeless in the Southern Region were sleeping rough
- 6,428** people across Cardinia, Casey and Greater Dandenong were living in severely crowded and crowded dwellings

Southern Region LGAs Homelessness Census Data (ABS), 2011 and 2016 (% change)



LGA	% Change (2011-2016)
Bayside	-21
Cardinia	53
Casey	37
Frankston	17
Glen Eira	30
Greater Dandenong	28
Kingston	26
Mornington Peninsula	10
Port Phillip	-23
Stonnington	-24

7 councils in the Southern Region experienced increases in homelessness between 2011 and 2016, with an average increase of 29%

For more information or to receive a copy of the full report contact Ruth Gordon, Southern Region Homelessness Network Coordinator ruth.gordon@launchhousing.org.au

Figure 3 shows the percentage change in the homeless operational groups between 2011 and 2016 for both Victoria and the Southern Region. The proportion of people in the severely crowded category increased by 11% in the Southern Region compared to 24% across Victoria. The proportion of people living in supported accommodation reduced by -6% in the Southern region compared to an overall increase of 11% across Victoria.

Figure 3 %Change between 2011 and 2016 by Homeless Group, Southern Region and Victoria

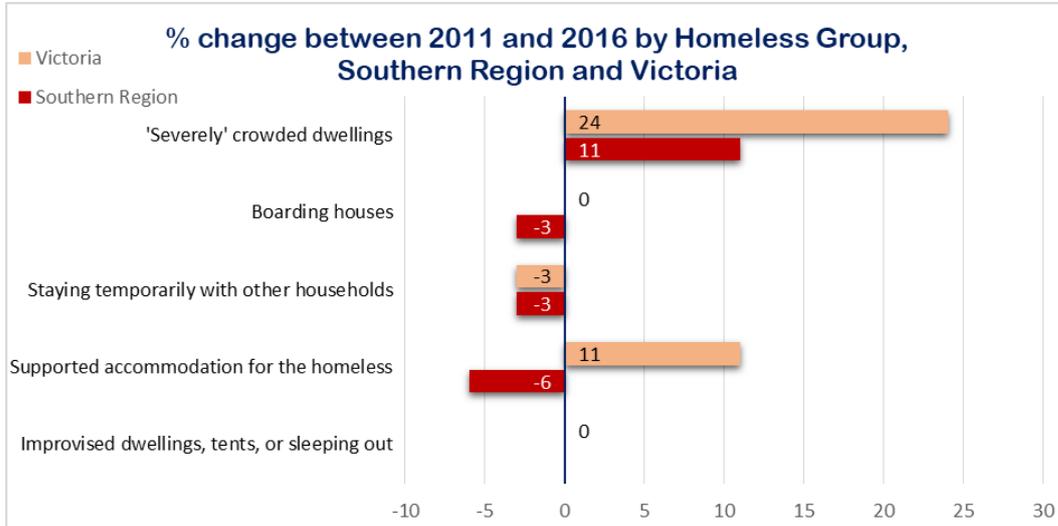
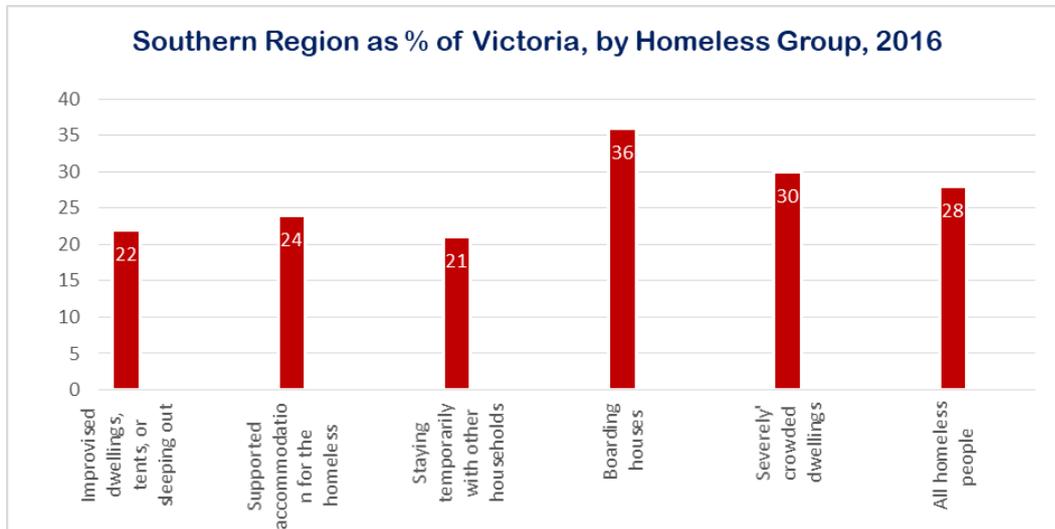


Figure 4 shows the Southern Region as a proportion of Victorian homeless estimates in each homeless operational group. The Southern Region had 28% of all Victorian counted as homeless in 2016. This included 36% of all people living in boarding houses and 30% of all people living in severely crowded dwellings. The Southern Region also had 22% of people counted in the rough sleeping category.

Figure 4 Southern Region as % of Victoria, by Homeless Group, 2016



The AIHW data provides LGA breakdowns of the total number of clients of the Specialist Homelessness Services (SHS) across Australia telling us about homelessness service usage, rather than the total numbers of people experiencing homelessness.

Figure 5 shows that the total number of homelessness clients over the five year period reduced from 18,568 in 2014-15 to a low of 17,495 in 2016-17 and then increased again to 18,946 in 2018-19. This represents an overall increase of 2% in the total number of clients between 2014-15 and 2018-19 for the Southern Region, compared to a 9% increase for Victoria as a whole. Yet these figures hide extreme variations in service usage across LGAs in the South as shown by Figure 7.

Figure 5. Southern Region Total Clients by Financial Year

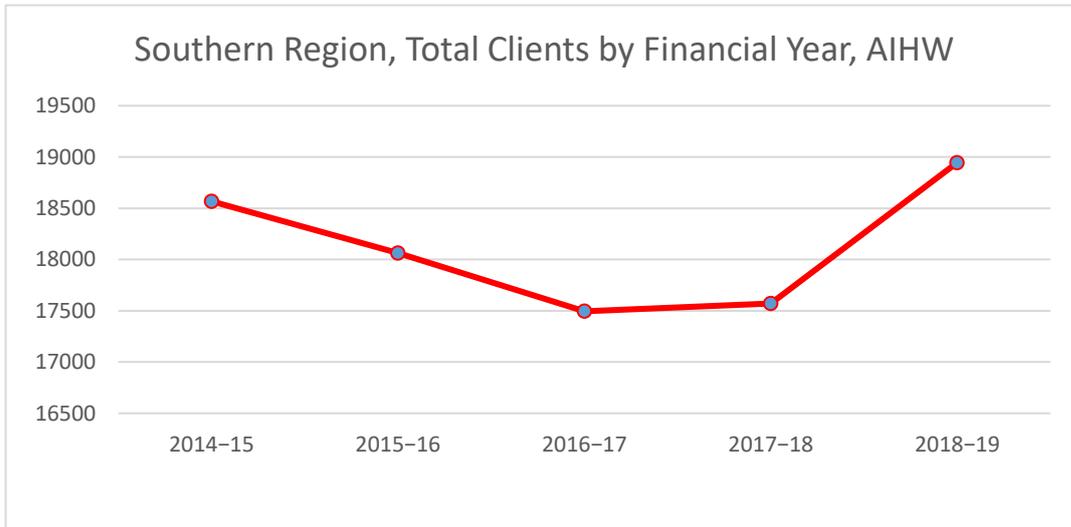
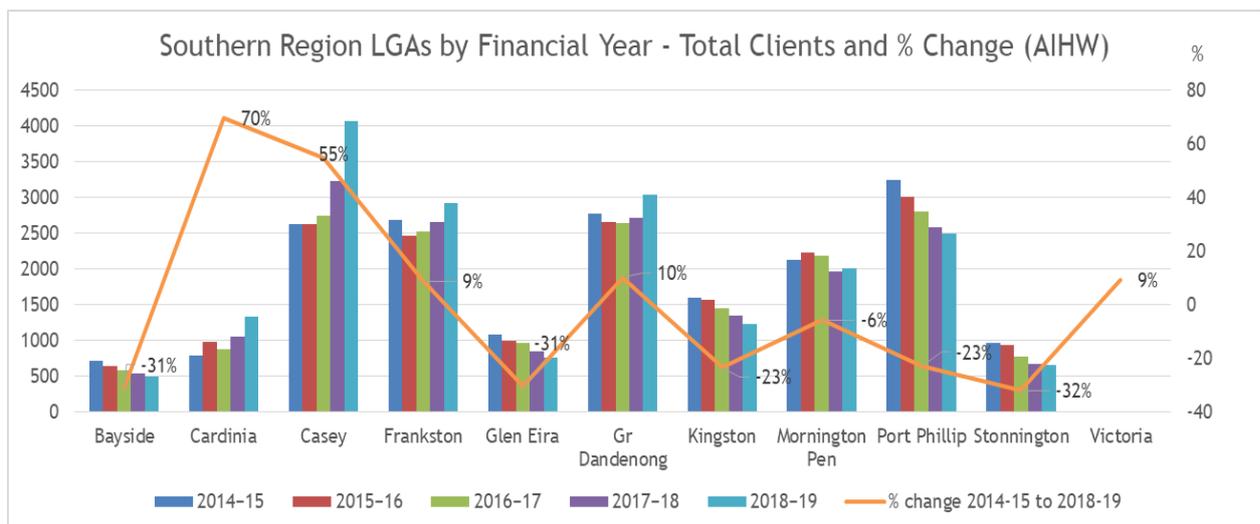


Figure 6 shows that when this data is broken down by LGA, there is great variation in the distribution of clients across the Southern Region, with some council areas experiencing huge growth in the numbers of people using homelessness services - 70% growth in Cardinia and 55% in Casey. Other areas have experienced reductions in the numbers of people using homelessness services - -32% in Stonnington and -31% in Bayside.

Figure 6. Southern Region LGAs by Financial Year – Total Clients and % Change



The largest numbers of people using homelessness services in the Southern Region in 2018-19 (2,000 or more clients) were located in Casey, Frankston, Greater Dandenong, Mornington Peninsula and Port Phillip. For the first three years of the time period, Port Phillip had the largest numbers of clients which has gradually reduced over time. In the second half of the time period, the largest numbers of clients were in Casey, growing to over 4,000 clients in 2018-19.

The data collected from Specialist Homelessness Services in Victoria and distributed by the Victorian Department of Health and Human Services (DHHS) is presented for the State and by each Local Area Service network (LASN) or region. This section shows some comparisons between the Southern Region (LASN) and Victoria to demonstrate the similarities and variations. Note that all data in this section is for households rather than clients, for the financial year 2018-19.

According to the DHHS data (DHHS, 2019a)

- the Southern Region has 22% of the total Victorian households assisted by the SHS however, the Southern Region has 34% of Victorian households in the no shelter or improvised/inadequate dwelling category assisted by SHS. This category can often be the most complex and difficult to assist with rough sleepers generally having more complex needs and having exhausted other supports.
- the Southern Region has a high number of households beginning support and leaving support still in the no shelter or improvised/inadequate dwelling category at 1,228 households. This may reflect the recent increase in funding for rough sleeper programs in the South, providing more scope to work with this complex group. However with few affordable and sustainable housing options, this group seems more likely to remain un-housed at the end of support.
- 19% of households in the Southern Region were living in short term temporary accommodation at the beginning of support compared to 10% of Victoria overall (see Figure 9). This accommodation is generally rooming/boarding house and hotel/motel accommodation. 41% of Victorian households in short term temporary accommodation at the beginning of support were located in the Southern Region.

Figure 7 shows that 45% of Southern Region households assisted by SHS were in the homeless groups compared to 33% of households assisted across Victoria. Having a higher proportion of people in the homeless categories in the South provides fewer opportunities for intervening early and can make it more time consuming and crisis driven in the nature of responses required to support them to exit homelessness. It is generally easier to keep households housed than to re-house them once they lose their housing and are in the “homeless” category.

Figure 7 Housing Situation at the Beginning of Support (%), South and Victoria

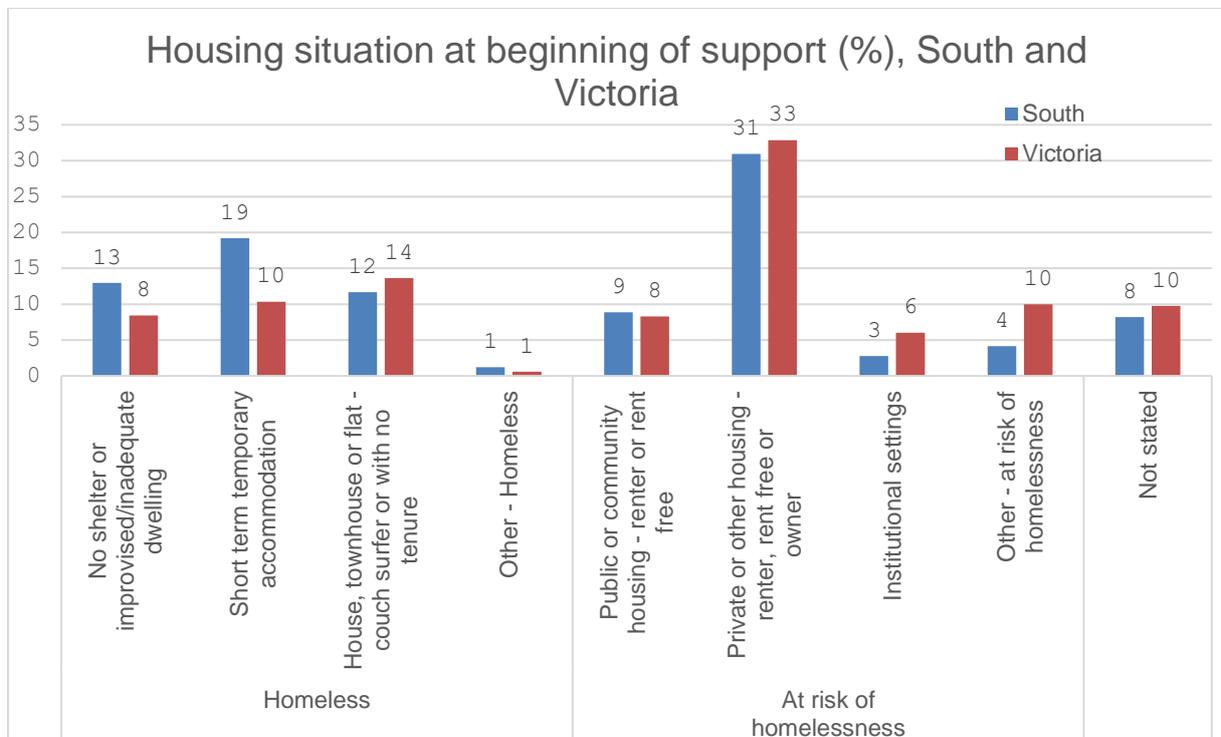


Figure 8 shows that households assisted in the South are more likely to exit services still in the homelessness category (42% of assisted households) compared to Victoria overall (29%). Correspondingly households across Victoria assisted by SHS are more likely to exit services in the housed/at risk categories than for the Southern Region (56% across Victoria and 49% for the South).

Figure 8. DHHS LASN Household Status at Exit from SHS (%), South and Victoria

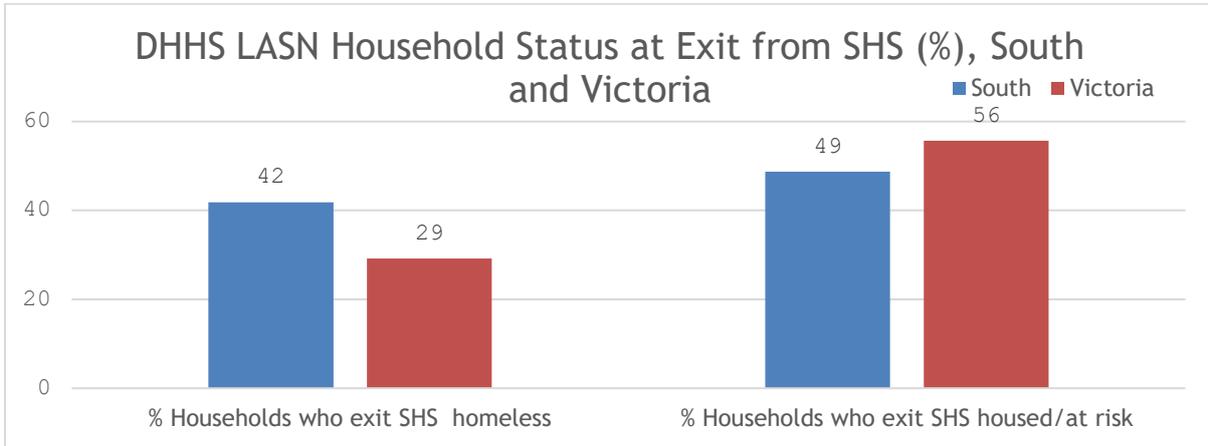
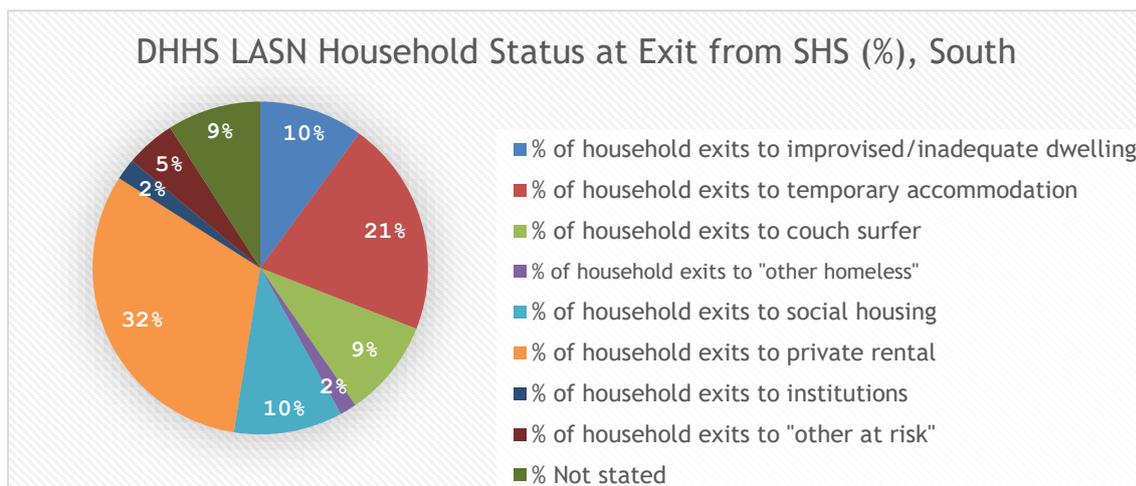


Figure 9 shows that for the Southern Region -

- 32% of all households assisted, exited into private rental
- 10% exited into social housing
- 21% exited into temporary accommodation, compared to only 12% for Victoria as a whole.
- 45% of households were first time service users, compared to 57% for Victoria. This may correlate with the higher proportion of rough sleepers and who tend to have a more chronic experience of homelessness.

On a positive note, Southern SHS assisted 4,342 households in private rental to stay in private rental, thus avoiding homelessness in 2018-19. This figure likely reflects brokerage programs aimed at supporting people to stay in private rental such as the Private Rental Assistance Program (PRAP) which has recently received additional funding and staffing.

Figure 9. DHHS LASN Household Status at Exit from SHS (%), South



2.2.2 Overcrowding in Melbourne’s South

Overcrowding is very severe in the outer Southern region of Melbourne and is likely to be increasing due to the crisis in housing affordability in these areas. This is likely to have an effect on homelessness services as over-crowded households disintegrate and more people seek assistance from homelessness services. Issues around over-crowding have been highlighted in the worst way during the Covid 19 pandemic.

Three LGAs in Southern Melbourne (Casey, Cardinia and Greater Dandenong) have some of the highest incidences of overcrowding in Victoria. The particularly high numbers of people living in severely and other crowded dwellings in this area of the Southern region warrant a closer analysis. This includes Cardinia Shire, which, although, has lower numbers of people living in crowded dwellings, has a very high proportion of its homeless population (57%) in the severely crowded category. Two of these LGAs, Greater Dandenong and Casey, have 4% of all Australians living in severely crowded dwellings category of homelessness. They have also had relatively high rates of Covid 19 infection.

The ABS counts people in severely crowded dwellings as homeless and people in other crowded dwellings as marginally housed and at risk of homelessness*.

Figure 10.* Homelessness, Crowding and Population %, Southern Melbourne as a Proportion of Victoria, 2016

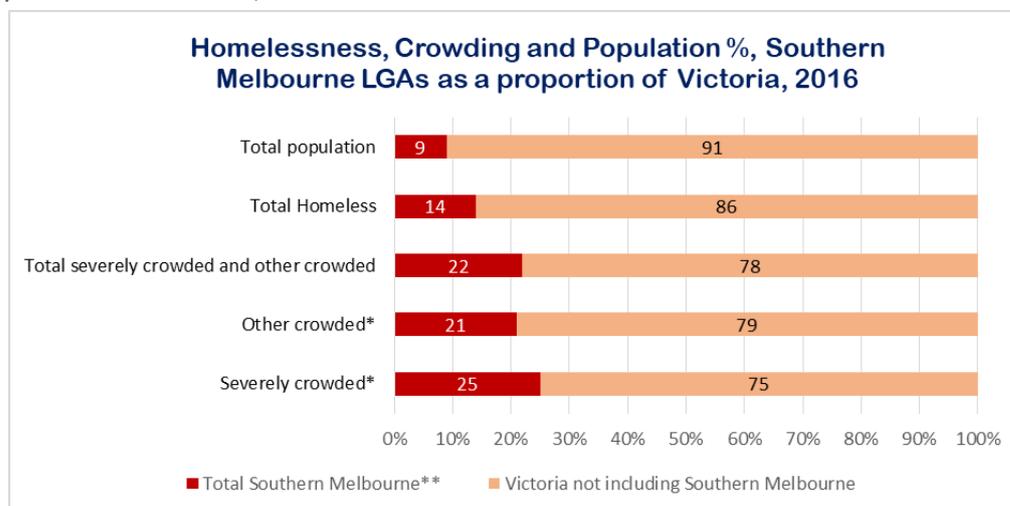


Figure 10 shows that in 2016, Southern Melbourne had:

- 9% of the total Victorian population
- 14% of the total people counted as homeless in Victoria
- Casey and Dandenong LGAs together have 24% of Victorians living in severely crowded dwellings and 4% of Australians living in this category of homelessness
- Casey and Dandenong LGAs together have 20% of Victorians living in other crowded dwellings and 5% of Australians living in this category of marginal housing
- 22% of the people living in severely crowded and crowded dwellings (combined) in Victoria (totalling **6,428** people across Cardinia, Casey and Greater Dandenong)
- 25% of the people living in severely crowded dwellings in Victoria (totalling 2,260 people in this category of homelessness)
- 21% of those living in crowded conditions in Victoria (totalling 4,168 people in this category of marginalised housing).

* Persons resident in dwellings requiring 4 or more extra bedrooms to meet this standard are considered homeless in the operational group 'Persons living in severely crowded dwellings', and those in dwellings requiring 3 extra bedrooms are considered marginally housed in the group 'Persons living in other crowded dwellings' according to the Canadian National Occupancy Standard (CNOS). People living in severely crowded dwellings are considered homeless by the ABS while those in other crowded dwellings are considered to be living in marginal housing.

**Southern Melbourne LGAs comprise Cardinia, Casey and Greater Dandenong

Figure 11. Top five LGAs in Victoria for Crowding, 2016

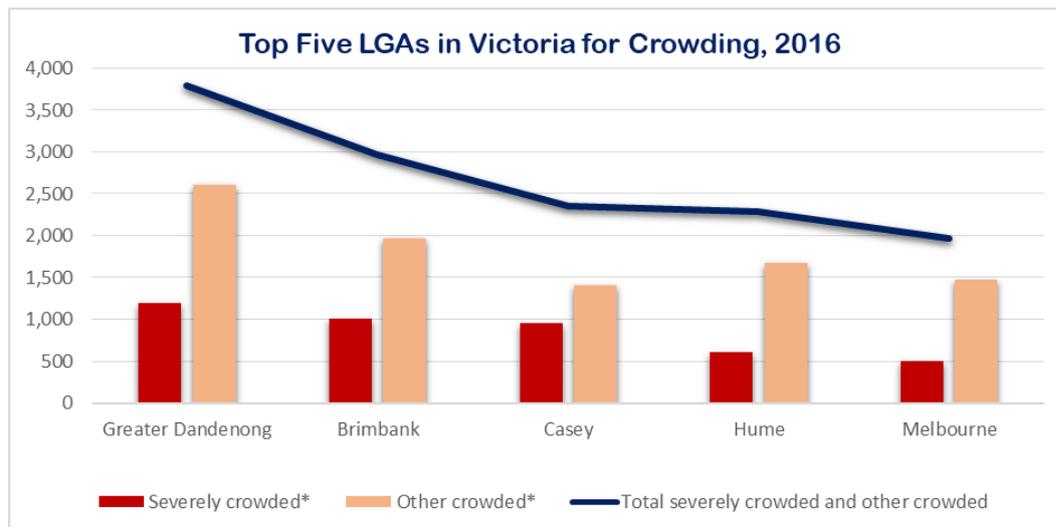


Figure 11 shows the LGAs with highest numbers of people in the severely crowded and other crowded categories in Victoria. Greater Dandenong had the highest numbers in Victoria, followed by Brimbank, Casey, Hume and Melbourne. Melbourne is the only inner city LGA on the list with all other LGAs located in the outer metropolitan areas of Melbourne.

Council to Homeless Persons (CHP) pointed out in *No room to breathe; why severe overcrowding is a form of homelessness* (2018) that severe crowding is the most common form of homelessness in Australia. CHP provides a useful explanation of the impacts of overcrowding, summarised as -

...the privacy, health, mental health and safety of occupants are all at risk, as is the ability for them to meaningfully engage in work, job-hunting, education, relaxation and social activities or any number of normal or necessary activities. In the worst cases, overcrowding can exacerbate domestic violence, depression, and the spreading of diseases (CHP, 2018).

There is a need for research into overcrowding to better understand the causes and needs of the huge number of people in this situation in Southern Melbourne. There is likely to be a link with the high number of new arrivals as these areas have high numbers of both groups. However qualitative research is needed to understand this connection.

Research is also required into the type of supports that can best assist people living in crowded conditions. This should focus on support to prevent them from coming into the homelessness service system and other systems such as health, mental health, family violence, child protection, justice and corrections. The critical question about this trend is how will homelessness services cope if, or when, an additional 6,000 people living in crowded dwellings need their assistance? Is the current pandemic the driver for this group to leave their crowded dwellings? Where can they go at this time of economic and health insecurity?

2.3 Cohorts Experiencing Homelessness

Homelessness populations in Australia can be broadly categorised into two groups – people who are newly homeless/at risk of homelessness and people experiencing chronic homelessness. These two groups have different pathways in and out of homelessness and require different responses. The newly homeless/at risk group can benefit from prevention and early intervention programs to get them back on track and deter them from the homelessness service system, often needing only low level support (for example the Private Rental Access Program - PRAP). People experiencing chronic homelessness have compounded disadvantage and trauma, often from childhood, requiring intensive tailored individual support solutions to end their homelessness with some requiring life-long support to sustain housing (for example Journey to Social Inclusion - J2SI- and Street to Home).

The longer people from the newly homeless/at risk group experience homelessness the higher their chance of moving into the chronically homeless category. It is important to note that people in both of these groups may experience any type of homelessness and often move from one category of homelessness to another such as couch surfing, crisis/transitional accommodation, overcrowded housing, rooming houses and rough sleeping.

The largest emerging group in Australia are the newly homeless/at risk group whose income is insufficient to afford housing, putting them at risk of homelessness. Low wages growth, a growing gig economy and associated job insecurity, and low JobSeeker rates mean that this group is increasingly at risk of homelessness due to lack of income to afford housing.

This has been exacerbated by Federal Government policies increasing welfare conditionality, cuts to income support (SRSS cuts for asylum seekers), moving people onto lower paying benefits eg from Disability Support Pension to JobSeeker, Centrelink breaching and debt clawback through “Robodebt” (see Section 3.1). This ongoing trend of income being insufficient to cover housing costs is putting new groups at risk of homelessness including older women and men, single people and young people. This then leads to an exacerbation in personal factors such as stress, poor physical and mental health, food insecurity, unemployment, etc that starts to compound making it more difficult to resolve housing issues and increasing the risk of homelessness. Coronavirus supplements and rent and eviction freezes have assisted this group greatly during the pandemic. With increasingly higher unemployment rates due to COVID 19, this group is likely to grow in number and likely to remain unemployed for longer due to the recession, particularly if the Coronavirus income supplements are revoked.

There are emerging groups of people experiencing homelessness including older women, people affected by “Robodebt” and Centrelink breaching, people living in private rooming houses and asylum seekers. The increasing costs of private rental across the South, including outer metro areas, puts many people at risk of homelessness.

Permanent changes to Federal policy settings are urgently needed to ensure that Australians have the minimal income to meet their basic needs, including housing, food, and utilities, or this group of newly homeless is likely to continue to grow into the foreseeable future. There is strong concern that this group will increase exponentially due to the economic fallout of the current pandemic.

2.3.1 What do SHSN members say?

The following quotes sum up SHSN member feedback on the fundamental reasons for increasing homelessness in Australia and in the Southern Region of Melbourne in particular –

Simple ECONOMICS and lack of affordable housing

The reason behind this is because housing affordability is driving them out of the private rental market and public housing does not have enough stock to meet the demand.

People are being pushed out of the suburbs into semi-rural areas in which there are less jobs and opportunities, and access to support/health services and public transport is becoming increasingly difficult

Rough sleeping and inappropriate private rooming houses in inner south

Overcrowding in outer areas

Our members told us about new and emerging groups they are seeing in their work in the South. These include:

- women and children who have experienced family violence men and adolescents who have used violence in the home
- single men
- single women over 50 and over 50s generally who cannot afford increasing private rental costs
- people being released from hospitals, institutions, correctional facilities, etc
- rough sleepers
- young people, including young families
- people seeking asylum
- LGBTIQ people, who are often hesitant to engage with mainstream services due to discrimination
- people with complex needs, including experience of trauma, substance use and mental illness and including people with dual diagnosis – usually mental illness and substance use
- population growth in outer areas and changing affordability in outer metropolitan suburbs is pushing up homelessness and risk of homelessness in these areas

Our members reported experiencing waves of demand for homelessness assistance rather than incremental increases. The main reason for this increase according to the SHSN member survey is lack of social and affordable housing. This information was collected from SHSN members prior to COVID 19 and does not reflect new trends resulting from the pandemic.

2.3.2 What do SHSN consumers (clients) tell us?

Of 131 consumer respondents to the inaugural 2019 SHSN consumer survey, 36% said the reason for seeking assistance was homelessness and 25% reported family violence as the main issue for seeking assistance from SHSN services. This information was collected from SHSN consumers prior to COVID 19 and does not reflect new trends resulting from the pandemic.

The survey quotes below are a sample of some of the reasons consumers sought help from our services

I had nowhere to go, I was pregnant with my first child

I'm living with a friend but I have to move because it is too crowded and I am having issues getting approved for a private rental.

I couldn't work due to a surgery that went wrong caused me to be in pain 24/7, I couldn't do the essentials

I was homeless. No money, no house.

Becoming homeless due to domestic violence and having no luck getting into private rental again.

Chronic Homelessness. Had an ABI [acquired brain injury] back in 2004 due to drink driving. After getting out of hospital I was imprisoned for a while. As a result I didn't get any rehabilitation. Things got worse. I lost my job as I'd forget things, My relationship of 10 years failed. I eventually got into the wrong company and landed back in prison. That has happened a few times now.

Hungry need food and basic information about my area and support to help assist get back on my feet and I need some clothes as well.

I am currently homeless and fear or my safety as I have been sleeping rough and have been assaulted by a group of 5-6 men in the last week and have had my possessions stolen.

Homeless and unsuccessful in obtaining a rental property.

The vast majority of survey respondents (98%) reported that SHSN services has supported them in addressing the issues that brought them to the services. The following quotes illustrate the complexity and variety of experiences of homelessness and the service system.

I originally had no idea that these services even existed and this meant that it took some time for me to receive the help that I needed. I was also told that I could not go into refuge because I did not have any income. As a result I felt as if I was stuck in my situation of family violence. It also took over four months for me to receive any parenting payments. Centrelink was difficult to navigate and I would have liked more help with this.

It was very difficult just because of the emotional distress of the domestic violence I had been through. Even though the service was great, it was hard living in shared accommodation because I had never lived with anyone before.

This service is helping me find long-term housing ... best suited for me and my child.

I was supported by getting out of the abusive relationship and allowing myself to support myself.

Very persistent in meeting with us at the start, advocating for us a lot with other services, very helpful and very caring. Helped with linking us in with services that are specific to us.

I really appreciate you helping me stop doing something unreasonable and reducing my levels of stress so I haven't needed to do anything illegal. I really appreciate you making my community safe

They are currently trying to help me sort out this serious crisis and that's why I am here

I've known homelessness a lot. Dad was in and out of prison, I've couch surfed. This has been a stable time for me

I have accommodation right now, but even after two years there's still nowhere I can afford. And now I've aged out of the housing I'm in [youth] so there's this big push to get out, but if that does happen I'll just be homeless again only with no help to get accommodation.

My case manager and I are actively working on all the issues that require attention.

I have really liked staying here, this has allowed me to be stable and link in with services to address my issues. I have a drug counsellor a CCO officer, a mental health worker a parenting support, a housing worker and DHHS. I have had my child in a safe place and been able to keep him in my care. I am now in the process of getting my other child back and this housing has really helped me achieve this.

I now know how to cook, plan and budget

I am part of the PRAP program and am receiving help in navigating the private rental system. It has taken me 12 months since being discharged from hospital due to mental health to feel capable of accessing services.

Keep going along with my plan goals with Case Worker with my Case Plan.

This is going to sound terrible but money. The issue isn't that I can't budget for my expenses, it's that there just isn't anything to budget with.

30% of SHSN consumers surveyed said they were looking for private rental and 30% said they were looking for public housing (128 consumers answered this question). Only 4% were looking for community housing and only 2% were looking for rooming house accommodation.

Consumers were asked to identify the barriers to accessing this type of housing and the majority responded with lack of money and limited income, being reliant on JobSeeker and being unemployed or unable to work. Housing affordability and availability and long waiting times and wait lists for public housing were identified by consumers as the main barriers to accessing their preferred housing. Consumer quotes in relation to barriers to accessing housing included:

When I was homeless: Lack of information. Not having any support to apply for housing. Now it comes down to all the laws, rules and how other people are waiting too. I think Melbourne just got crowded and there isn't enough housing and the government doesn't really know what to do.

Organising time to inspect properties around school drop off/pick up. Open for inspections times are hard to manage around schooling and children.

I am looking for both public housing and private rental. I owe money to the ministry of housing so I think they will not help me until I pay it back. For private rental I get overlooked as I am on a single parent Centrelink pension which cannot compete with a double income working family.

I don't get enough money for private rental.

Trying to afford it on one income.

Waitlists are exhausting my caseworker cannot tell me how long I will be waiting for long term housing.

Not having any housing background and being a young couple. Not having past rental history, and being so young, my partner and I - so it's really hard

Waiting list - It's been 2 years since I've been waiting for a Public Housing.

No previous rental history, having five children.

Long waitlist, government changes, uncertainty, no updates, constantly not knowing where I am on the housing lists.

Wage and age and dog

Lack of options, cost of private rental, discrimination by private rental agents and landlords, supply and demand, too few properties for those trying to access them, lack of information

My history goes against me and my son, having been in prison

The market is expensive plus I struggle with looking professional on resume - I am young man on low income competing against 10 others on real estate - it's hard because you are dealing with families, and higher paid people all going for the same property.

It has been my health and my son's health that is affecting all that we do.

Consumers were asked, apart from long term housing, what they would like to see changed in response to homelessness. The majority of consumer respondents said more housing, more support and more crisis or temporary accommodation. The following quotes provide an insight into the ideas for improving homelessness responses from people experiencing homelessness and using homelessness services -

Have more available crisis motels in more areas. We had to go to Dandenong for motel accommodation which was nowhere near the children's school.

Support, guidance. Trying to figure out something I didn't know how to cope with. No one wakes up knowing how to be homeless when they've never been homeless in their lives before. I was just stuck. I didn't have support or guidance in which way I could overcome it. I felt like I was drowning

More crisis accommodation / supported accommodation; better access to these places, e.g. increase availability. More emergency accommodation (e.g. motels or other short-term options) funding and availability.

Since the closure of mental health institutions and the rising cost of rental properties all homeless services are stretched beyond their means. If these issues are not addressed (mental health) anything is trying to be done to help is only a band aid fix. In my 12 month experience I ended up become suicidal before my issues started to be addressed. I rang the Ombudsman and threatened to jump. Then I was referred to [the service] - nobody understood that because my son was autistic how hard it was to find private rental because of his behaviour. Or even how hard it was for my situation and my son's needs

Awareness about the causes, violence and mental illness...to adjust the stigma that is attached and encourage community support and change.

Better pathways to access education and employment so that long term housing options such as private rental become a viable option.

The longer people have to wait for services the worst their situation will become.

Homelessness needs to be taken seriously, anyone can be homeless.

3. Factors affecting the incidence of homelessness, including housing-market factors

This section discusses the broad range of factors and policies affecting the incidence of homelessness including market factors. Homelessness is primarily caused by the lack of income to afford housing which is a direct result of housing market and employment market failures. These markets are heavily influenced by a range of Federal policies including jobs, income support and immigration policies as well as financial incentives for home ownership and housing investment including negative gearing and capital gains tax exemptions.

The structural causes of homelessness outlined above are often compounded by a number of other complicating personal factors such as family violence, trauma, discrimination, poor physical and mental health, etc. These factors affect people who are newly homeless/at risk and people experiencing chronic homelessness, although these factors are likely to more acutely and systemically impact people experiencing chronic homelessness. The main factors and policies impacting on homelessness can be summarised as:

- Poverty and income support failure together with increasing unemployment means some people lack sufficient income to exist, never mind thrive and be well (mentally or physically). Underemployment and the casualisation of the workforce increase the pool of people who cannot afford housing. People on JobSeeker allowances, and young people in particular are trapped in poverty, contributing to the ever-widening increases in inequality in Australia.
- Housing market failure - relying on the market to supply housing does not work with the lowest income groups resulting in a housing crisis at the lowest end of the housing market –
 - home ownership is out of reach of very low income cohorts. Policies such as first home owners grant/programs do not assist this target group in any way as it is very rare for this income cohort to access home ownership
 - the rental market is too expensive and there is low availability of housing at the lower price range. The rental market is often discriminatory against our client group.
 - private rooming houses are filling the market gap for people who cannot access other housing but rooming houses are not affordable and are failing people experiencing homelessness.
- Lack of accessible, affordable, appropriate housing - there is a common assumption/myth that homelessness services have access to suitable emergency accommodation and to medium and long term housing. Community education about the housing crisis and what homelessness services can offer is required. The following factors affect the provision of accessible, affordable and appropriate housing in Australia -
 - Low Government investment in Australia in public housing – provision falling way behind demand nationally.
 - Lack of a national Homelessness and Low Income Housing Strategy and Action Plan to provide national solutions to these issues.
 - The scale required to make a substantial difference to the increasing numbers of people experiencing homelessness.
 - Housing needs to be appropriate, well located (especially near public transport) and safe as well as affordable.
- Mainstream Systems Failure – homelessness can affect every part of a person's life and our clients are subject to the failure of multiple mainstream service systems including health – physical and mental, employment and education, corrections and justice, drug and alcohol, family violence, etc which responsibilities across both State and Federal Governments.

Quotes from SHSN members about the factors impacting on the incidence of homelessness in Australia include:

Policies support the already rich sections of the community. Social or community housing is still stigmatized: whereas some communities in Europe and elsewhere see this as positive choices

A lack of imagination and commitment by all governments and the community.

3.1 Low Income, Poverty and Unemployment

As the cost of housing and living expenses increase, a greater income is required to live in Australia than in previous decades. It is extremely difficult for low income (working and non-working) people to afford housing. Underemployment and the casualization of work, with the move to a gig economy, and removal of penalty rates all make it increasingly difficult to pay for housing. The lack of sufficient income makes it difficult for people to afford accommodation and to engage in social and economic participation. This is together with the increasing costs of housing discussed in the Section (3.2). This has been highlighted in the worst way during the Covid 19 pandemic and will be exacerbated during any resulting economic recession/depression.

The Federal Government's income support policy is directly affecting many people's ability to afford housing with Commonwealth Rent Assistance incapable of effectively filling the affordability gap and Federal policies have been "progressively increasing the homelessness vulnerability of eligible [Newstart] recipients" (Launch Housing 2018:14). Increasing welfare conditionality, cuts to income support (SRSS cuts for asylum seekers), moving people onto lower paying benefits eg from Disability Support Pension to Newstart, and minimal increases over the last twenty years to some payments all contribute to increasing poverty and inequality in Australia.

People relying on Newstart and Youth allowance are often unable to meet even the basic affordable housing or indeed basic needs to live (food, warm clothing, water, etc). This is coupled with harsher penalties for non-compliance with income support conditions and increased breaching which can result in complete suspension of income support payments. Launch Housing's Australian Homelessness Monitor presents job seeker data that shows the number of payment suspensions increased "fivefold" between 2011 and 2016 (Launch Housing, 2018:12) leaving these people very vulnerable to homelessness. This was exacerbated with the Federal Government's debt recovery policy with Robodebt which left many people with high and unexpected debts.

The SHSN client group are mostly excluded from the private rental market due to high rental costs, lack of rental histories and discrimination. An increasing market in private rooming houses has arisen to fill this space. Rooming houses in the Southern Region of Melbourne commonly cost \$200-\$240 per week taking up the majority of a regular JobSeeker allowance, leaving little money for food, transport, clothing and other essentials. See Section 3.2 for more discussion about private rooming houses. This is summed up in a quote from one of our members –

For singles on Newstart there simply isn't any independent affordable housing. Rooming houses and caravan parks should not be considered a permanent way to live. Putting single people into rooming houses who have multiple complex issues including mental health and physical health related conditions is a recipe for disaster and causes a snowball effect and makes the person's health worse and then they give up, lash out and behave in unsociable ways.

The Morrison Government strongly addressed this issue at the beginning of the pandemic with the Coronavirus Supplement for those on JobSeeker and by introducing the JobKeeper scheme. This effective policy allowed those groups sufficient income to maintain themselves and their health at a time when unemployment was rapidly rising and the future of jobs was uncertain. In terms of economic stimulus, it is well documented that lower income groups spend rather than save extra income which in turn has a multiplier effect in stimulating the economy. However, plans to reduce the Coronavirus Supplement over time will return this group to extreme low incomes insufficient to pay for housing, health, food and other costs.

Maintaining the Coronavirus Supplement for longer, especially for Victorians, and introducing longer term evidence-based change resulting in a higher JobSeeker rate are some of the most effective policy levers to prevent and end homelessness available to the Federal Government.

3.2 The Housing Crisis

3.2.1 Private rental

There are three key factors impeding the use of the private rental market as an effective sustainable solution to homelessness in Australia - affordability, availability and discrimination. Affordability of private rental across the Southern Region of Melbourne has decreased significantly over the past 20 years. This has increased competition and demand for lower priced rental properties reducing the availability of these properties with fewer lower priced rentals available to rent. When these properties are available, people experiencing homelessness and disadvantage are often discriminated against in preference to other tenants.

Commonwealth Rent Assistance (CRA) adds some capacity to those on Centrelink incomes to pay for private rental, however it can serve to inflate rents and can be ineffective without other private rental price mechanisms in place. Programs such as the Private Rental Access Program and preventing evictions by assisting people to sustain private rental are useful for the newly homeless/at risk group. This is particularly useful for people who are employed or likely to regain employment but present more of an affordability challenge for people reliant on income support payments. However as the availability of lower priced properties decreases and demand for these properties and pricing increase, these programs will be increasingly challenged in providing longer term sustainable private rental housing. Gentrification in the inner South has seen reduced affordability in these areas. However there has been the assumption that outer metropolitan areas of the region are affordable, such as Frankston and Dandenong which have traditionally housed a lower socio-economic cohort. As the Rental report shows these areas are no longer affordable on a Centrelink income and there is **no** availability at the lower end of the market.

Anglicare Australia has been compiling a national report on the affordability of the private rental market since 2012, comparing actual rental listings with a range of household types and income groups to assess affordability. Since 2012, across the whole of Australia

- **no** properties analysed have been affordable for a single person on Newstart
- very few (between 0 and 4%) properties have been affordable for couples on the Aged Pension or single parents on the Parenting Payment
- for working people receiving a minimum wage, only 2% of rentals were affordable (Anglicare, 2019:10-11).

The report pointed out -

We know that many people on low incomes are avoiding becoming homeless by sacrificing other basic living needs to pay the rent – things like food, transport, heating or cooling, or visits to the doctor ... Many Australians are feeling the pinch. Housing affordability is rated as a top three issue by nearly a third of all voters in recent polls. Over 40 percent of Australians worry they could become homeless if their circumstances change, and over half feel stretched to meet their current costs (Anglicare, 2019:10).

SGS Economics and Planning produce an interactive Rental Affordability Index map of Australia <https://www.sgsep.com.au/projects/rental-affordability-index> showing affordability by postcode for different household groups.

This Index shows that all postcodes where there is available data in the South are “extremely unaffordable” on a Newstart income (see Figure 12).

Figure 12 Rental Affordability Index, Melbourne, 2019 Newstart

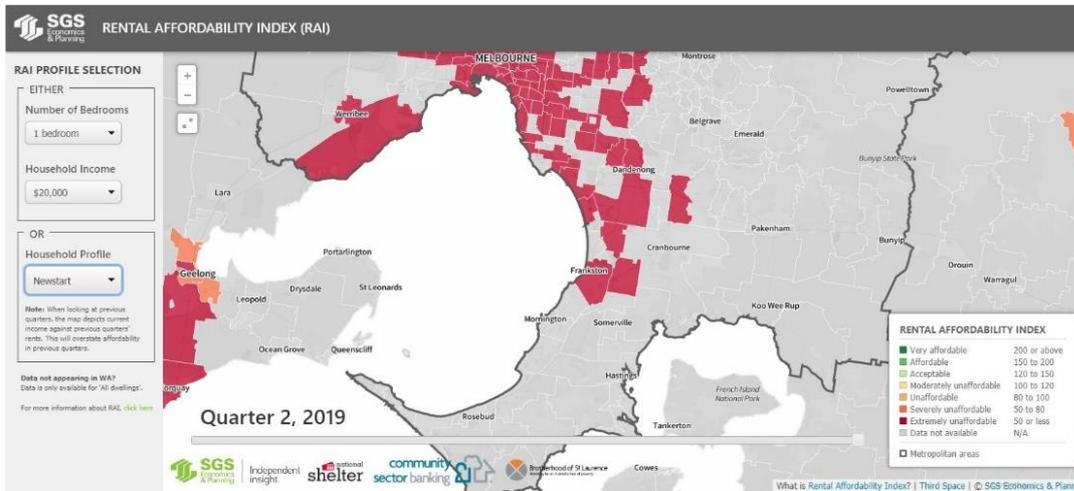


Figure 13 shows that where data is available, postcodes in the South are unaffordable or severely unaffordable for single pensioners.

Figure 13 Rental Affordability Index, Melbourne, 2019 Single Pensioner

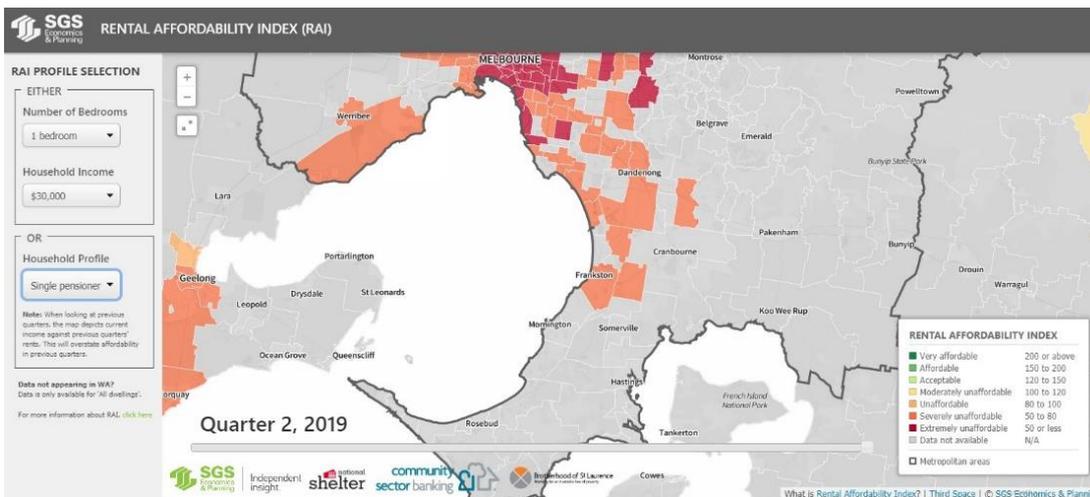
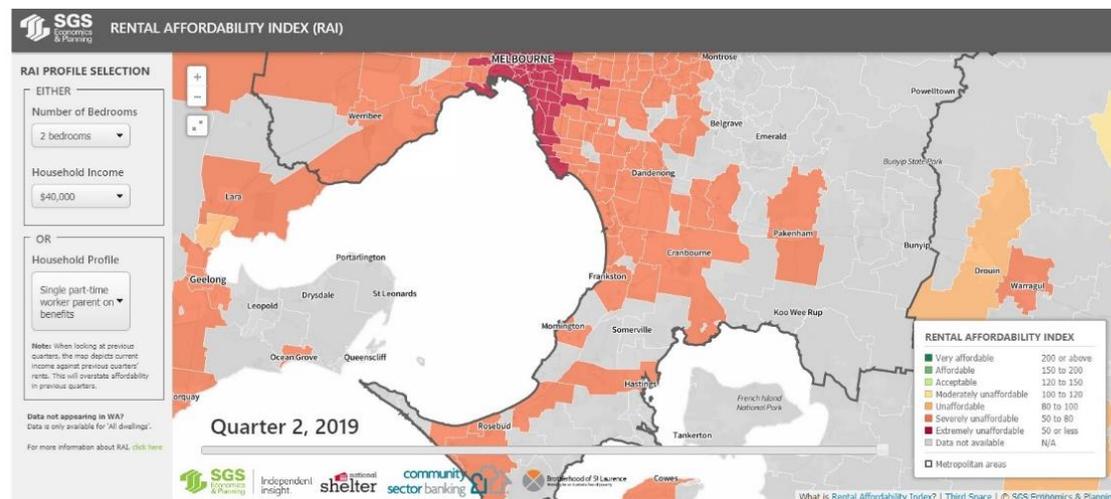


Figure 14 shows that where data is available, the South in either unaffordable or severely unaffordable for single part-time working parents on benefits

Figure 14 Rental Affordability Index, Melbourne, 2019 single part-time working parents on benefits



A recent AHURI report (AHURI, 2019) examining the supply of affordable private rental housing in Australian cities in relation to income, found that

- there is longer-term structural change in the private rental market, notably an increased concentration of supply at mid-market levels and more middle and higher income private renter households
- there is an acute, and increasing, national shortage of private rental dwellings for the lowest quintile household incomes households: 212,000 dwellings in 2016 (52,600 shortage for Melbourne). This shortage increased to 305,000 (62,800 shortage for Melbourne) affordable and available dwellings, as many of the affordable dwellings are occupied by households on higher incomes (AHURI, 2019:1 & 42).

Figure 15 shows that rental affordability and availability for the lowest income households is decreasing across inner middle and outer areas of Melbourne with shortages of affordable rentals across all areas (AHURI, 2019:46). Melbourne has the highest shortages in out of these five capital cities across inner, middle and outer areas, even worse than Sydney.

Figure 15 shows the shortage of affordable and available dwellings for Q1 private renter households, sub-regions of five capital cities, 2006 and 2016

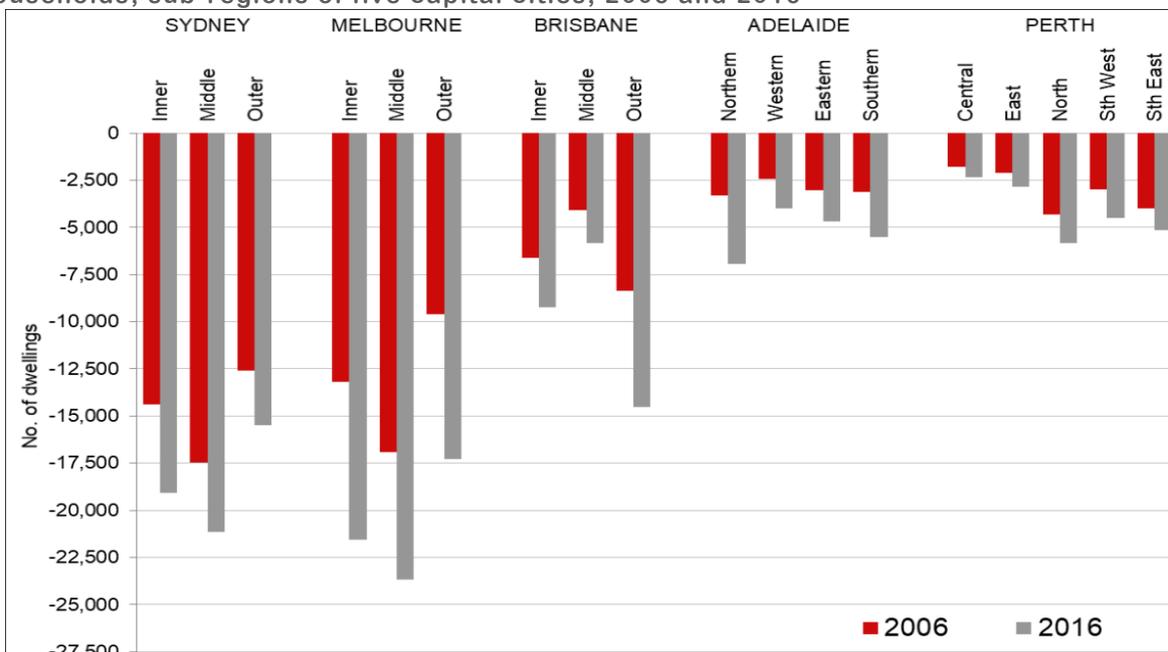


Figure 16 below shows that affordability is an issue for the lowest income household group across inner, middle and outer Melbourne with less households paying affordable rent in outer Melbourne (11%) than middle Melbourne (13%). 72% of households on the lowest income in outer Melbourne are paying unaffordable rents compared to 38% in inner Melbourne (AHURI, 2019:59).

Figure 16 Melbourne rental affordability of lower income households by sub-regions, 2016

	Paying afford. rent	Paying unafford. rent	Paying severely unafford. rent	Total	Total
Melbourne	%	%	%	%	Number
Inner	7	38	54	100	23,200
Middle	13	56	31	100	27,100
Outer	11	72	17	100	19,400

An exacerbating factor reported by SHSN members and consumers is discrimination in the private rental market. Real estate agents and landlords discriminate against low income people, especially those on Centrelink benefits, single parents, people from CALD backgrounds, Aboriginal and Torres Strait Islander people, LGBTIQ people, and people with disabilities and poor health/mental health, despite this being illegal. People who have poor or no rental history or those who have been blacklisted by real estate agents are at higher risk of homelessness.

Politicians don't understand homelessness or risk of homelessness - real estate is a business - no empathy (SHSN Member Survey Respondent)

The implication of these trends for people experiencing or at risk of homelessness is massive as there is simply not enough affordable rental housing to meet the demands and needs of our client group. It can take long periods of time and support for people to access rental housing and as rents increase over time it is increasingly difficult to sustain private rental housing on a low income.

This is likely to change due to the pandemic resulting in increased affordability and availability. However, more people dropping out of home ownership could put increased pressure on the rental market. More importantly, the question remains of where are the people dropping out of the rental market due to the economic downturn are going to live? Will the economic fallout of the pandemic cause a wave of people experiencing homelessness for the first time? Urgent joint State/Federal action is required to prevent this occurring.

3.2.2 Private Rooming Houses

Fewer affordable private rental properties mean that often the only accessible option for people seeking homelessness assistance is inappropriate emergency motel accommodation or private rooming houses. Neither of these options are affordable nor sustainable in the long term for most people. The situation with private rooming houses is becoming so dire with some exploitative managers taking advantage of people in a myriad of ways. Rooming house residents overwhelmingly report rooming houses to be dangerous and violent, dirty, and harmful to their mental health (Goodman R, et al 2013). Rooming houses are common accommodation for people with psychiatric illnesses who cannot access other housing options (Goodman R, et al 2013). Some rooming house operators take advantage of vulnerable people - ripping them off and standing over them - and providing extremely poor housing. It is not uncommon for residents go to rooming houses straight from mental health facilities.

The SHSN held a solutions-focussed Summit on private rooming houses in April 2019 bringing together over 100 participants to discuss the different factors/aspects of private rooming houses resulting in ideas/commitment for joint work moving forward to improve the safety and appropriateness of rooming house options for vulnerable people in the Southern Region. The SHSN Rooming House Summit Outcomes Report (SHSN, 2019) has specific recommendations on this issue and can be found on the [SHSN website](#).

3.2.3 Public and Community Housing

Investment in public and community housing (referred to as social housing) has declined in Victoria despite ever-growing demand and waiting lists. Social housing funding has traditionally been a joint Federal and State responsibility under the National Housing and Homelessness Agreement (NHHA), and previously under the National Affordable Housing Agreement (NAHA) and the Commonwealth/State Housing Agreement (CSHA).

The 2019 Productivity Commission Report on Government Services (ROGS) revealed that there are 200 fewer social housing units in Victoria than there were in 2014, despite homelessness being at crisis levels. Figure 17, from the ROGS report, shows that Victorian social housing spending per person is the lowest in the nation - average \$83 per person (national average - \$167). The report's findings were the worst for Victoria, which was recorded as spending \$530m on social housing, below NSW (\$1.37bn), Western Australia (\$829m) and Queensland (\$628m). Victoria's per person spending on social housing has also fallen each year since 2014-15, down from \$95.92 per person. These figures, together with the failure of the private rental market, go a long way to explaining how Victoria has found itself in the current housing crisis.

The Southern Region of Melbourne holds 22% of public housing applicants, many of them assessed as in need of priority access. 70 % of Inner South applicants were assessed as needing priority access, indicating more complex support needs (DHHS, 2019b). Over 40-58% of applicants in the middle and outer South were assessed as needing priority access to public housing (DHHS, 2019b).

The huge shortage of public housing has led to a reconfiguration of waiting lists over the last 20 years to those most in need. Yet even those in highest priority need often have to wait for several years to access public housing, exacerbating the issues that contributed to their homelessness. Our members report that some people have given up applying for public housing given the long waiting times and our consumers reported in the SHSN consumer survey that the wait for public housing is unsettling and stressful.

Community housing provides a safe, appropriate and affordable housing option for some Victorians. The community housing sector builds high quality housing that meets the needs of a range of groups for which the private market cannot respond. Community housing providers often have very strong relationships with local support agencies and work to strengthen local communities and are required to take 75% of their tenants from the Victorian Housing Register. However, the community housing funding model is not sustainable for housing people on very low incomes and requires subsidies to ensure it can house larger numbers of people on the lowest incomes. Increasing the amount of community housing and subsidising community housing providers to meet the housing needs of the lowest income groups would go some way towards ameliorating the homelessness situation.

3.3 Homelessness Service System

As the SHSN consumer survey results showed, Southern Region homelessness services work effectively under increasing demand and pressure and with less housing and exit options due to the housing crisis. 98% of consumer survey respondents said that services had helped them in addressing their main issue for presenting to the service. Despite this, services are continuing to be inundated with demand whilst housing options are increasingly unaffordable and inaccessible for people experiencing homelessness. Increasing demand, troubling emergency accommodation options, lack of exits into affordable, appropriate and sustainable housing and the need for tailored service responses to effectively respond to the different homelessness cohorts and the need for prevention and early intervention, are all issues impacting on the effectiveness of the service response to homelessness in Victoria.

98% of consumer survey respondents said that homelessness services had helped them in addressing their main issue for presenting to the service

(SHSN Consumer Survey, 2019)

3.3.1 Increasing demand on homelessness services

As discussed in Section 2.2.1 the usage of homelessness services and the number of people experiencing homelessness in the Southern region is growing overall and in outer areas in particular. The overcrowding in the outer South adds to the potential pressure on homelessness services into the future as well as services in related sectors. The failure of other service sectors to address their clients/patients' housing issues funnels more people into homelessness services. There is a belief, among the public, consumers and staff in other service sectors, that homelessness services have access to emergency housing when people need it. This is usually not the case.

For example, SHSN staff report patients being discharged from psychiatric hospital directly to homelessness entry points, sometimes even in hospital gowns. Family violence services only provide emergency accommodation for a short time and then women and children are referred to homelessness services to access housing. Funding community services to support their clients holistically, and making it their responsibility to do so, would provide better outcomes for clients. For example the mental health system could provide appropriate housing on exit from psychiatric hospitals with step down mental health supported accommodation, rather than sending patients to homelessness entry points on exit from hospital. This would no doubt provide better client outcomes than giving clients the run-around between different systems and shifting the cost and responsibility onto the homelessness sector.

3.3.2 The Emergency Accommodation Crisis

Our member agencies have few options for emergency accommodation and often place clients in inappropriate and expensive rooming houses as well as low amenity motels and hotels. These issues have been raised in the *Crisis in Crisis Accommodation* paper by the Northern and Western Homelessness Networks both in relation to rooming houses and hotels/motels that are used for crisis accommodation by our member agencies in the homelessness sector (2019). The paper draws on an extensive survey of consumers of homelessness services. This paper raises awareness of the use of the Housing Establishment Fund (HEF) by homelessness agencies to purchase short term emergency accommodation in the private sector where no community options are available. As the paper points out, there are only 423 government funded crisis beds across Victoria for people experiencing homelessness and/or family violence.

Therefore with increasing numbers of people experiencing homelessness, more people are being sent to emergency housing which is not purpose built, does not have on-site support, and is often unaffordable and even dangerous. Clients often contribute financially to their stays to stretch the funding further. For some clients, this can provide a useful respite or stop gap but for others, this response is unsuitable. As the use of HEF to purchase unsuitable emergency accommodation increases, the morale of the homelessness workforce providing this service may also be affected. These issues were raised at the SHSN Rooming House Summit held in April 2019 (see Section 3.2.2). This issue was raised extensively in the SHSN member survey. Below are quotes from the SHSN member survey about this issue –

In the meantime they are housed in crisis accommodation such as motels which is very stressful for families and leads to them spending more money on eating out and takeaway food as motels do not have full kitchens to cook in. This then eats into the client's savings so they don't have the money to establish a new tenancy.

Housing support services have very few options for the amount of clients homeless. Very little follow up. Rooming houses are run by people who are not qualified. Women and young people are forced into places that increase the chance of further abuse and trauma. Very little options with case management to support when in [this] housing.

In addition, short term shelter options such as people sleeping in car parks or church halls do not end homelessness. These programs simply prolong and hide homelessness from the public and rarely have discernible long term outcomes for participants. The SHSN does not support the introduction of these temporary models. The SHSN advocates for emergency accommodation service models that are evidence-based with strong outcomes for ending homelessness in the Southern Region.

During the Covid 19 pandemic this program has been extended for people who have been rough sleeping. This has enabled the sector hold about 2,000 people in hotels and motels during the time of pandemic restrictions. Some of the hotels/motels have been of a higher quality than usually used, but some are still the type of accommodation referred to in the *Crisis in Crisis Accommodation* paper. As Mares recently pointed out in his article “Beyond Shelter”

Yet even with crisp linen, fluffy towels and a deferred checkout, a four-star hotel is not a home. The shelter mentality of “three hots and a cot” might be driven by the best of intentions: let's make sure that everyone has good food and a warm bed to sleep in tonight and that no one is left out on the streets. Yet as a response to housing insecurity it is expensive and ineffective, because people end up stuck in services designed for emergencies. A shelter mentality often compounds the very problems it sets out to solve (Mares, 2020:3).

The Victorian Government recently committed \$150million to house and support this complex client group which is commendable and this should be matched by the Federal Government to ensure there is sufficient social housing and support so this group of people can also “Stay safe. Stay home” as we in Victoria are all needing to do to control the spread of coronavirus.

3.3.3 Exits from Homelessness Services and Accommodation

The homelessness service system was developed in a different era – when private rental in some areas was affordable on Newstart and when public housing was accessed in a matter of months for people on the priority lists rather than years. The Transitional Housing Management (THM) system introduced in the late 1990s in Victoria, was established primarily as a stepping stone to public housing. In 2020, there

are blockages at all levels of the service system, with clients staying in funded crisis accommodation and THM accommodation for longer periods as there is little public, community or affordable private rental housing available in the current housing crisis as discussed above. This means there is less throughput and fewer vacancies to assist new clients entering homelessness. This affects the allocation of support services as well as accommodation.

3.3.4 Specialised support responses

SHSN members mentioned a wide range of issues relating to the homelessness service system's response to specific cohorts in the member survey to contribute to this submission. These included:

- few services are available for those with no income such as people from overseas (commonly New Zealand) and asylum seekers whose income support has ceased (SRSS payment).
- young people have less income and face discrimination in the private rental market. Young people are exiting the out of home care system into homelessness
- institutional exits into homelessness (from prisons, hospitals, etc)
- trauma informed practice is needed to work with complex clients, including young offenders, to break the co-morbid cycle of destructive behaviours.
- it is increasingly difficult to sustain services using a funding model based on co-contributions from a Centrelink income, particularly Newstart and Youth Allowance. Income is stagnating compared to costs of service provision and housing which continue to increase
- agencies are using band aid approaches to support homelessness rather than long term solutions to end homelessness as there is not enough time to support people to find long term accommodation, accommodation is too expensive and there are too many people who are homeless coming through the door.
- there are often long wait times for case management support and very little support available for people referred to emergency accommodation such as rooming houses and motels/hotels.
- support periods are too short and inflexible, focussing on throughput/output rather than outcomes for clients. Homelessness programs should have the capacity to stay on longer term with clients to be able to make links and engage the client to sustain their exits from homelessness services.
- there are not enough intensive support programs such as Journey to Social Inclusion, Melbourne Streets to Home, Intensive Case Management Initiative (ICMI), Towards Home to meet the demand for such services
- new programs do not come with dedicated housing leaving these clients to compete with existing clients for the same ever-reducing pool of housing. Lack of housing then limits the effectiveness of these supports, and of the Government's investment in these programs.
- stronger focus on prevention and early intervention with new programs needed including educating people about homelessness; addressing risk factors for homelessness when young, ie addiction, mental health, affordability, employment etc; housing/supporting people before they become homeless, and early intervention before housing situations breakdown and people are evicted

The following quote from the SHSN member survey reflects some of these issues raised above –

Where do I begin?! I can only speak from what I have seen from working in the homelessness sector for 5 years. So often people who are not provided an early opportunity to access support and safe housing end up in the cycle of homelessness. This can be because of a breakdown of housing, and then not being able to access crisis accommodation and then put into unsafe housing situations. For example a rooming house, a friend who wants sexual favours in return for a bed or on the floor of in somebodies already overcrowded house. Often this can be single men and women as there is less available for this cohort. I have seen many clients who then turn to legal and illegal drug use to handle the trauma that they experience from this. If there had been more options available when someone first entered the "system" so much of this could not have to have happened

4. Ending Homelessness in Australia - Solutions

This section of the submission presents a range of solutions to end homelessness in Australia. These solutions could apply across Australia, as well as in the Southern Region of Melbourne. The collective knowledge and experience of SHSN members show that homelessness is at a crisis point as demonstrated in this submission. So we commend this Inquiry and anticipate that these solutions will be implemented as a matter of urgency to prevent further increases in the numbers of people experiencing and at risk of homelessness in Australia.

The responsibility for ending homelessness sits with all levels of government in Australia – Federal, State/Territory and local government. All levels of government must collaborate and coordinate, using the policy drivers and financial mechanisms at their disposal, to end homelessness.

Based on this premise, the SHSN makes one critical recommendation to the Federal Inquiry into Homelessness in Australia –

That the Federal Government work, in conjunction with State, Territory and local governments, to develop a ten year National Homelessness and Low Income Housing Strategy and Action Plan.

The Strategy must set strong achievable targets to reduce and end homelessness, provide affordable housing affordable for the lowest income cohorts and include sufficient funding to support the required actions.

It is the responsibility of both the State and Federal Governments to work in partnership to address homelessness successfully. Local government in our region are also willing to play an important role. A national homelessness strategy would provide a framework for this to occur. For those of us who have worked in the homelessness sector for many years, we can see that the situation has gone from bad to worse as lack of sufficient income, poverty, intergenerational disadvantage and trauma compound without adequate interventions to stop the downward spiral. The numbers of people experiencing homelessness and the complexity of their needs will continue to increase if the national policy settings are not corrected.

The following section of this submission presents a number of solutions that can form the basis of an effective National Homelessness and Low Income Housing Strategy and Action Plan, focussing on the following four key areas:

1. Housing - increased affordable appropriate and safe housing, preferably public or community housing – short, medium and long term housing options are required with a focus on increasing sustainable long term housing options as the most effective solution to homelessness.
2. Prevention and early intervention – “turning off the tap” of people entering into homelessness by diverting them quickly and effectively away from homelessness
3. End chronic homelessness – expanding programs which are effective for ending chronic homelessness using a Housing First model.
4. Tailored supports to respond to the needs of specific cohorts – children and young people, families (including those escaping family violence) and singles – as well as reflecting geographical demand for different services.

Solutions must build on the knowledge and evidence of what works to end homelessness. We need to expand programs that are evidence-based and proven to work well and ensure that funding allocations reflects the actual demand for assistance.

In addition, it is critical for the Federal Government to urgently use the available policy levers to reduce poverty and inequality, by permanently raising Centrelink income support payments to a liveable level and concurrently implementing these solutions to end homelessness.

The Covid 19 pandemic has highlighted the need for a safe home and the capacity for Federal and State Governments to work collaboratively to address urgent issues. Let the collaborative national approach to the pandemic be a positive model for developing a national approach to ending homelessness.

The Australian Alliance to End Homelessness (AAEH) has developed a “Homes Beyond Covid” policy for ending rough sleeping nationally. Taking this significant opportunity to respond to the pandemic in ways that are sustainable and long term is critical for ending rough sleeping in the long term. Many of the solutions proposed in the AAEH document will be useful for ending other categories of homelessness as well as rough sleeping.

Solution 1: Housing

Policies to increase affordable housing must include mechanisms to ensure the housing is affordable to the lowest income groups and remain so into the future. If affordable housing is only provided to lower and moderate income groups, Australia will continue to have a housing crisis at the lowest end of the income scale and homelessness will continue to increase.

There are many ways to increase the supply of affordable safe and appropriate housing for the lowest income groups. Increasing the supply of affordable housing must be at the scale required to meet demand, particularly from the lowest income cohorts. SHSN members were emphatic in the role that housing plays in ending homelessness – **Housing ends homelessness**. This was also pointed out by Mares -

There are many paths into homelessness but only one way out...But the only route out of homelessness is secure, affordable, decent housing (Mares, 2020:5).

Some people can be deterred from entering homelessness with minimal support/assistance whilst other people will need housing with support to end their homelessness and some will require long term support, even life-long. Despite all the best intentions of Governments, investment in family violence, mental health and other community service responses will be less effective without a corresponding increase in housing. Without housing, it is very difficult for these groups to address their issues for example, women and children escaping violence may return to live with perpetrators and people exiting psychiatric hospitals are likely to return to hospital more quickly if there is no sustainable housing available. All new support programs should include dedicated new housing instead of competing for the same limited unsuitable housing options as other programs. Housing needs to be near amenities, services and employment opportunities and public transport not just on random vacant land.

Australia, Victoria, and the Southern Region of Melbourne, need increased affordable, appropriate and safe housing, preferably public or community managed. Short, medium and long term housing options are required with a focus on increasing sustainable long term housing options as the most effective solution to homelessness. The numbers of increased public and community housing units should be high enough to meet the demand. The Everybody's Home Campaign states that Australia will need 500,000 social and affordable homes by 2026 (Everybody's Home, 2020). New housing needs to be affordable for lowest income groups and affordability measures need to be consistent across all program areas ensure consistency and effectiveness.

Many housing experts, economists and business have recently called for the Federal Government to use the delayed October Budget to invest in large scale social housing development as part of an economic stimulus package to lead Australia out of the looming recession. This will not only create jobs, but homes. The home is being reshaped due to Covid 19. Investing in social housing will provide safe and affordable homes where people can live, children can home school, people can work with the security that they are not one pay away from eviction and homelessness.

Increasing the supply of affordable housing at the lowest end of the market can be achieved using a variety of mechanisms:

- increase the scale of public housing development to make a real impact. There are many successful innovative projects but these need to be developed at a scale to have a real effect on reducing homelessness. As mentioned above, this would have a strong economic multiplier effect, creating many jobs at the time when Australia is facing deep recession.
- planning mechanisms, such as inclusionary zoning which mandates a percentage of housing in larger development, are required across the State to increase affordable housing. The SHSN recommends that the rate should be set at a minimum 15-20% of new developments set aside for affordable housing, with 10% being allocated for those on the lowest incomes.

- retain public land in public ownership to be used for public housing. The 2018 University of Melbourne report *Project 30,000: Producing Social and Affordable Housing on Government Land* identified a wide range of potential public sites that could be re-developed for public housing. State Government and local governments must commit to not selling any of these sites, and should utilise these sites as recommended by the report.
- diversify housing supply to cater for different needs. Housing can include tiny or smaller homes, apartments, town houses, self-contained rooming houses, and detached houses. Housing can be permanent or transportable depending on the situation. All types of housing are needed to meet demand. There should be more diversity and social mix in public and community housing including community development to support this occurring
- increase the amount of community housing and subsidise community housing providers to meet the housing needs of the lowest income groups. Community housing can help people connect to their local communities. As one of the SHSN members said

We want people who have experienced homelessness to firstly survive and then to thrive which happens through building communities – festivals, open space, natural environments, community facilities and spaces

- allocate taxes on un-tenanted properties to housing people experiencing or at risk of homelessness
- develop mechanisms to ensure the private rental market can provide some housing for the lowest income cohort. This can include working with, and even subsidising, real estate agents and landlords, rent capping and longer leases.

Solution 2: Prevention and Early Intervention

Prevention of homelessness occurring in the first place and early intervention when people are at risk of homelessness are two key areas that could be boosted to reduce the inflow of people into homelessness by diverting them quickly and effectively into sustainable options. This is critically important in this uncertain economy with likely high levels of unemployment into the future. As Mares points out –

Mortgage pauses, eviction moratoriums and income support payments like JobKeeper and the JobSeeker supplement are helping people to keep a roof over their heads in the short run, but unless these measures are maintained, spiralling unemployment is likely to push many more people into homelessness (Mares, 2020:4).

The SHSN recommends that Australia introduce a “Duty to Assist” law, similar to Wales, as a key tool for homelessness prevention and early intervention. This would apply to all government and community services, preventing people from other service systems entering into homelessness and would ensure that responsibility for responding to homelessness is shared across Government and the community rather than just homelessness services. This would be similar to mandatory reporting, making it a legal duty to assist people experiencing homelessness. It could prevent evictions for public housing into homelessness; prevent people being discharged from hospitals into homelessness and avoid people getting passed between different sectors, particularly those with complex needs. It would apply to schools, the NDIS, community services and health services. Introducing a “Duty to Assist” law is a paradigm shift that, together with housing provision, could help break the cycle of homelessness in

Australia. This would be supplemented by other prevention and early intervention programs. Prevention programs are best situated outside of the homelessness service system as they are designed to deter people from entering homelessness. Prevention includes community education, educating young people, family reconciliation and support, working with people living in overcrowded dwellings and programs to support people staying in their housing. Enabling young people to stay in State care until 21 is another useful prevention approach (see the HomeStretch Campaign). Early intervention programs assist when someone is at risk of imminent homelessness or newly homeless and include rapid re-housing programs to reduce the amount of time spent homeless. Developing new prevention programs focussing on overcrowding would be very useful in the Southern Region.

Solution 3: End Chronic Homelessness

Prevention and early intervention generally assist the newly homeless cohort, however, it is important to focus on chronic homelessness which requires a longer term, more intensive approach. People experiencing chronic homelessness often have multiple and complex needs requiring a range of supports to sustain housing and be healthy and well. There are several Victorian programs working successfully with this cohort including Journey to Social Inclusion, Melbourne Street to Home, Common Ground and Towards Home, as well as the rough sleeper programs. The evaluations of these programs (where available) provide the evidence of what works in an Australian context to support this cohort. These models need to be expanded and introduced to areas where they are not currently available to meet the existing demand from people experiencing chronic homelessness. Working to end chronic homelessness requires the following approaches:

- Housing First – providing housing before (or at the same time as) support. Housing is not conditional on accepting support or being “housing ready”. Supports are provided to help people sustain their housing and address their issues after accessing housing rather than the other way around. For this model to work, appropriate affordable housing needs to be available, preferably for the long term, as well as individually tailored wraparound supports
- persistent assertive outreach programs such as the Rough Sleepers Initiative and Community Connections Programs work well for this cohort by establishing ongoing relationships focussing on rapport and social engagement before tackling the bigger issues (employment, substance misuse issues, health, mental health issues, etc.) Outreach support goes to the person experiencing homelessness and works with them where they are at physically and emotionally
- providing ongoing supports for people with the most complex issues who may need lifelong support to sustain their housing. This could be similar to an NDIS support model with tailored individual packages of care to support this cohort
- A public campaign to change the perceptions about homelessness and educate the public about the trauma and experience of homelessness would support the above approaches.

Solution 4: Tailored Supports to Respond to the Needs of Specific Cohorts

It sounds simplistic but the solution is to build more affordable accommodation.

Providing more social and public housing is the overriding key solution. It is a basic human right for people to have a roof over their head. Give our people a home and we will put the support needed around them.

BRICKS AND MORTAR, BRICKS AND MORTAR, BRICKS AND MORTAR,

Housing is the solution to homelessness

Corporate and Government social responsibility to house all people regardless of circumstances HOUSING of all types in all areas for all communities.

Homelessness is complex with different pathways into and out of homelessness for different cohorts. Different service responses are effective for different cohorts – eg newly homeless/at risk and chronically homeless, young people, women escaping family violence, singles, etc. Different responses may be needed according to geography – eg the inner, middle and outer South require responses tailored to the needs of those communities as what works in the inner city might not work in outer metropolitan areas.

Ensuring that services and supports are responsive to the needs of the client group will be more effective than fitting people into prescribed programs with inflexible guidelines.

Tailored supports can include:

- educational youth foyers for young people engaged in education in every region/sub-region
- mentoring to support people with learning daily living skills and tenancy responsibilities. This could be provided as a peer resettlement program with people with lived experience of homelessness being trained, supported and employed to provide the mentoring service
- increase NDIS responsiveness to eligible people experiencing homelessness
- targeted Aboriginal and Torres Strait Islander service responses to meet the specific needs of this population group
- supports for people pre- and post- discharge/release from other sectors including custody, hospital, rehabilitation and psychiatric services
- permanent supportive housing models where housing and support are provided for as long as people need (see above on chronic homelessness)
- programs to prevent homelessness for people living in overcrowded dwellings
- improving responses to LGBTIQ people experiencing homelessness including improving mainstream services and providing specific programs to meet these needs
- increase trauma informed practice and responses.

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