



**Brotherhood
of St Laurence**

Working for an Australia free of poverty

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Thursday 9th October 2008

Family and Community Development Committee
Parliamentary Inquiry into the Provision of Supported Accommodation For
Victorians with a Disability or Mental Illness

Parliament of Victoria
Spring Street
EAST MELBOURNE
VICTORIA 3002

Dear Chairperson,

Please find attached a submission from the Brotherhood of St. Laurence to the Parliamentary Inquiry into the Provision of Supported Accommodation for Victorians with a Disability or Mental Illness.

And queries regarding this submission should be directed to Sandra Hills, General Manager Aged and Community Care on (03) 9483 1389.

Yours sincerely,

Tony Nicholson
Executive Director
The Brotherhood of St. Laurence

8 October 2008

SUBMISSION TO THE PARLIAMENTARY INQUIRY INTO THE PROVISION OF SUPPORTED ACCOMMODATION FOR VICTORIANS WITH A DISABILITY OR MENTAL ILLNESS

The Brotherhood of St Laurence (BSL) is a significant provider of services to people with a disability through its disability support program (Brotherhood Community Nexus), employment programs and a range of Home and Community Care Programs including Linkages, Respite, Planned Activity Groups and Flexible Service Response. In addition the BSL played a key role in establishing the Frankston/Peninsula Carers Group Incorporate, which consists of ageing carers of people with disabilities, and the BSL continues to strongly support this group.

Ageing Carers

One of the main concerns of the BSL is the lack of suitable supported accommodation options available for the children of ageing carers who are now reaching a stage where they can no longer care for their children who have disabilities. In these cases the parents have been caring for their children for most of their lives in their own home, but now their worry is; who will look after their children who are of a mature age, when they can no longer care for them?, and where will their children live?

A real life example of this problem is a sole parent aged in her late 60s who has a son aged 41 who has intellectual disabilities and is partially blind. This parent has been caring for her son in her own home since his birth, but lives under the continual stress of worrying about where will his son live and who will support him if she becomes ill or dies.

Another example is that of another single parent in her early 70s who cares for a son in his early 40s who has intellectual disabilities and suffers from a health problem leading to gross obesity. Because of his large size the parent is unable to even find even a suitable respite placement for him and so has no breaks from her caring role. The parent is now reaching a stage where she can no longer physically care for him because of her frailness and his large size. However there is no suitable accommodation for him and the situation is absolutely desperate for the carer. Indeed she has threatened suicide on a number of occasions.

Also many ageing parents and carers, such as those mentioned above, have a very poor quality of life because of the 7 days a week, 24 hours a day demand of being a carer. They have extremely limited opportunities for a normal social life and often suffer high degrees of social isolation. These caring demands also have a detrimental effect on the health, both physical and mental, of the ageing carers and this increases their concerns about being able to continue to care for their children.

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At present there is a waiting time of over 4 years for supported accommodation, and as of 31 December, 2005, there was a total of 2,559 people seeking supported accommodation within Victoria (Department of Human Services Register).

Clearly there is an urgent need for suitable supported accommodation for adults with a disability who have been living at home, but their primary carers, their parents, are now reaching an age where they can no longer care for them at home. This type of accommodation needs to be flexible so it can support people with varying degrees of disability and dependence. An ideal model would be one where there is accommodation ranging from fully independent through to partially supported with staff located nearby, to fully supported with staff residing with the people with disabilities.

This model of accommodation could consist of independent units in a particular location, other units in another location situated near support staff or a supported residential service and a group home based on the community residential unit for those needing fully supported accommodation.

Lack of Suitable Accommodation

The BSL is also aware of a number of situations where people with a disability are unable to obtain suitable accommodation in their local area where they receive the necessary supports to sustain a reasonable quality of life. To illustrate this situation the following case history is provided:

Vincent is 80 years of age and is the carer for Belinda who has an intellectual disability. They have lived and worked in the St Kilda area all their lives and have been living in a rented unit for the past 4 years. However, recently they were given 3 months notice to vacate the premises as it was being sold by the owner.

Vincent receives the aged pension and Belinda the disability pension and they wished to continue living in the St Kilda area and the reasons for this are:

- *Familiarity with support services, transport systems, shopping precincts, banks, post office, community and medical services as well as having a number of supportive friends in the local area.*
- *Belinda has limited literacy and writing skills and therefore the local familiar services such as those mentioned above were crucial to her to continue to deal with the community independently.*
- *Vincent and Belinda also attend a local parish church regularly and had been members of this community for many years. Belinda also worked as a volunteer for the church during the week, which gave her a real sense of contributing to the local community.*
- *Vincent also attended the City of Port Phillip Cora Graves Centre on a weekly basis where he enjoyed socialising and interacting with a familiar group.*
- *Belinda was also happily involved in a number of community groups in the local area.*

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However Vincent's and Belinda's combined income of around \$30,000 per annum was not sufficient to pay for the rental options in the local area which were over \$300 per week. On the other hand Vincent's and Belinda's income was over the capped amount to receive housing support from the City of Port Phillip's community housing scheme. Also Vincent and Belinda were not a priority listing in regard to public housing.

As a result Vincent and Belinda were forced to move out of St Kilda and eventually found accommodation in Noble Park. While they can afford the rent on this property they are completely unfamiliar with the area and are having great difficulty in connecting with the local services which are not readily available as they were in St Kilda.

In summary, as a result of the lack of suitable accommodation options in their local area Vincent and Belinda were forced to move to a completely unfamiliar area and are now experiencing real social isolation which is adversely affecting their general health and well-being.

Another situation concerns a client of our disability services who has an intellectual disability and a mental health illness and is on a disability pension. This person recently received a notice to vacate his current home. He had initially applied for an Office of Housing property in 1994 but had to reapply early 2000 due to forgetting to inform the Office of Housing of his change of address. The Office of Housing has informed him that the only way to reduce his position on the waiting list is to seek accommodation in rural areas such as Gippsland or the Western District, but even then the Office of Housing could not guarantee immediate availability. However a move out of his local area with which he is extremely familiar would create real problems such as separation from family and friends and services.

This person has been supported by family and services over the years with the upkeep of properties and meeting rental costs. This person also has a companion animal in a small dog and this also hinders rental options.

The final example is in regard to a person with an intellectual disability who is on a disability pension and is currently seeking Supported Residential Service (SRS) type accommodation in the outer Southern Metropolitan Region. The only suitable accommodation that can be found is way above the disability pension rate and we have found that most people with a disability living in a SRS rely on family members to contribute to their accommodation costs. The only affordable SRS accommodation requires people to share rooms with two or more other people which is often not suitable for people with an intellectual or mental health disability.

There appears to be a lack of this type of affordable accommodation to meet the needs of people with a mild ID. Most accommodation is way above the pension rate which automatically discriminates against the majority of members who we support as their

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only income is the Disability Support Pension. Most SRS's rely on family members to contribute to the weekly cost. The only affordable SRS accommodation requires members to share rooms with two or more residents which then creates problems with privacy etc.

Conclusion

The work we have been doing with people with an intellectual and mental health disability has shown there is an urgent need for a wide range of accommodation options for these people. For example, SRS accommodation affordable for people whose only source of income is a pension is extremely difficult to find and certainly was not available in all the cases mentioned above. We believe specific funding needs to be directed towards pension only SRS so that the provision of this type of accommodation becomes more readily available.

In addition more flexible types of supported accommodation need to be available which can cater for people with a mild disability to those with severe disabilities. This type of accommodation needs to be purpose built, which may result in new accommodation or modifications to existing accommodation. This accommodation need only consist of a small number of units but needs to be available in many different locations so that people do not have to move out of their own familiar local areas. Adequate support services should also be available to ensure people with a disability or mental illness are not put at risk, and are given every opportunity to participate in their local community

Suitable affordable accommodation needs to be readily available for people with a disability or mental health problems so they can continue to live in, and be supported by, their local community.