

TRANSCRIPT

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into Homelessness in Victoria

Melbourne—Thursday, 10 September 2020

(via videoconference)

MEMBERS

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Mr Enver Erdogan

Mr Stuart Grimley

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Mr Tim Quilty

Dr Samantha Ratnam

Ms Harriet Shing

Mr Lee Tarlamis

WITNESSES

Ms Jane Measday, General Manager, Social Support, and

Ms Katrina Leehane, Manager, Youth, Family and Community Support, Ballarat Community Health; and

Mr Warrick Davison, Assistant Senior Manager, Housing and Homelessness, Uniting Vic.Tas.

The CHAIR: Welcome back, everyone. I declare open again the Standing Committee on Legal and Social Issues public Inquiry into Homelessness in Victoria. I am very pleased to be able to welcome the team from Ballarat Community Health and Uniting—Warrick Davison, Katrina Leehane and Jane Measday. I apologise if I have mangled your last names. It is great to have you. This has been a really interesting day travelling to these regional areas. Joining me today is Tania Maxwell, Wendy Lovell, Kaushaliya Vaghela and Rod Barton. I am Fiona Patten, the Chair.

I would just like to let you know that all evidence taken here today is protected by law. That is under our *Constitution Act* but also under the standing orders of our Legislative Council. This means that any information that you provide to us today is protected. However, any comment repeated outside may not have that same protection. Any deliberately false evidence or misleading of the committee may be considered a contempt of Parliament.

We have got a great team supporting us here today. We have Hansard and the crew. They will be transcribing this session for us, and you will all receive a transcript of that shortly after. I really encourage you to have a look at that to make sure that we have not misrepresented you in any way, because ultimately those transcripts will become part of our report and will go up onto the committee's website.

We really thank you for taking the time to spend with us today. If you would like to make some opening remarks, then we will open up for a committee discussion. I think we may have lost Jane in that welcoming, but Katrina and Warrick, maybe if you would like to start I am sure Jane will join us again soon.

Mr DAVISON: Thank you very much. I think Katrina and Jane wanted me to start off. Just to make sure that I cover everything, I have got some notes here, so I will just read off those. Thank you for the opportunity to present today. My name is Warrick Davison, and I am the Acting Manager of Housing and Homelessness for Uniting Ballarat, Barwon and western Melbourne. I have worked in the housing and homelessness sector now for 16 years, and I guess I will just start by giving a little bit of background to Ballarat and our region's current situation.

Our current rental vacancy rate sits at about 2.6 per cent in our region, but at times such as May last year it was at 1.1 per cent. Prior to this it was as low as 0.5 per cent. A search yesterday of the local private rental market showed five one-bed properties listed in Ballarat and surrounds, and the cheapest of those started at about \$170. The next one was at \$210 per week. That means that if you are on Newstart or Youth Allowance, the only affordable place on Newstart was the \$170 a week property, and if you are on Youth Allowance, you are out of the market there.

So it is not only singles or youth that struggle to get into the market here; families struggle to get a foot in the door. We have anecdotal reports of agents receiving 40-plus applications going for the one property. We like to think that there is no bias in the rental industry, but when a single parent presents coming up against a professional working couple for an application for the one property, more often than not it is the professional working couple that get that property.

Affordable options in this region have decreased significantly, and short-term affordable options such as smaller rooming houses, hotel beds and other stock have just been removed from the market. This can be attributed to a couple of substandard accommodation providers being closed down, which is fine, but also the gentrification of hotels, who also provided short-term accommodation at an affordable rate, and providers also now moving towards the more lucrative tourist dollar, given Ballarat is a very popular tourist destination. In my 16 years working here, I have been able to identify over 90 affordable temporary beds, rooms and motels that are no longer available here in our region. So once you take that out of the market, we really do struggle. People

often have limited options left, and that is unfortunately why they end up coming into this homelessness system. This is just not a local issue, but this is reflected across the whole state.

The Victorian homelessness system, just to give you a bit of background, operates around the Opening Doors framework. Effectively we act as a funnel or a single entry point into a region where people can be assessed and prioritised according to their needs before being referred on to either accommodation or support, or both, through other supporting agencies. People's priorities are assessed according to their personal vulnerability, their current living situation and whether or not they have supports in place in the region. Entry-point workers who work at the entry point try to ensure the person who presents as homeless has access to immediate crisis accommodation—we may place them temporarily in a motel—and then we refer them on to other relevant supports, which could be mental health, alcohol, drug and alcohol, financial counselling or family violence services. The entry point is part of a larger local area service network which is made up of all the homelessness-funded agencies within the region.

Since 1 January last year—I just had to pick a date—we have opened support periods for 2801 people that have presented to our agency and we have had open over 13 000 contacts with those individuals. So that is an average of 4.75 contacts per person. At the entry point we maintain a very active priority list for support and accommodation, which is split into an under-25 age group and an over-25 age group. The under-25s are considered youth and the over-25s are another sector as well. Currently there are 98 households awaiting support on the over-25 list and 62 on the under-25 list. Broken down, the majority of those are awaiting single-bedroom accommodation—there are 34; 26 are waiting for two-bedroom; and two families are waiting for three-bedroom.

We also manage the transitional housing stock for the Central Highlands region, and they are spread over specific target groups such as family, single women, drug, alcohol and youth. Unfortunately the majority of our options for youth are two-bedroom shared. That is what we have been given by the department to manage, and we manage those properties under the rooming house provision of the Act. This style of accommodation is not always conducive to good outcomes. Often young people that are experiencing homelessness have experienced some form of trauma, and placing then two strangers who have experienced trauma in a shared property has many issues associated with it. Ideally young people would have their own space, whether or not that is one-bedroom stock, so that they can purely just focus on engaging with their support workers and addressing their needs. One of the issues that we come up with is that young people can be quite complex in their needs or behaviours and we require them to be a sole tenant in one of our two-bedroom properties. That means we have to lock up one room, and it effectively further reduces our housing options.

Currently there is really high demand for supports and a more and more complex clientele. The referral system is based on a priority basis, so we refer the highest support and more complex clients into any vacancies that come up. So that means workers are engaged for longer periods of time with very complex clients and limited options to exit those people into. The current low vacancy rate in private rentals; the cost of private rentals; policy changes within public housing, such as privatising their internal transfers first; and the introduction of HousingFirst applications for long-term rough sleepers are effectively seeing the transitional housing program slowing right down and no exits from transitional housing, which in turn sees the priority list grow and grow.

As I mentioned earlier, there are 160 households on the priority list. Ninety-nine of those are unsupported at the minute. So that is 50 young people on the youth list and 49 on the over-25 list. I guess it needs to be noted that it takes a great deal of courage for a person to walk into a service like ours. It generally means that the person has explored every other option that they have at their disposal, and they have to really swallow their pride and seek assistance.

While current services do the best we can, despite our best efforts many still remain on the priority list and are waiting on supports for months and months at a time. There has been limited increase in homelessness supports in my time within the system. While programs such as the Private Rental Assistance Program are welcomed, they are based on stopping people entering the homelessness system from the rental market, and they are not specifically engaged to keep people that have already fallen out of it.

The programs that came out of the rough sleeping action plan were also welcome, and they have had really significant outcomes for long-term rough sleepers, but unfortunately rough sleepers only make up 7 per cent of

the homeless population. The rest are what we call the hidden homeless, the ones who are staying with friends or family temporarily or in short-term crisis accommodation or other accommodation forms.

The current COVID pandemic has placed an enormous pressure on an already-burdened system, and at this point the temporary supplements that are assisting people to get by—I am talking about the Centrelink top-ups at the minute—are set to reduce this month and further again in December. The recently released Anglicare report which looks into rental affordability across Australia—takes an annual snapshot of that—showed that only 13 listings out of 77 000 were deemed as affordable for somebody on Newstart, and that affordability is based on the rent not being over 30 per cent of somebody's income.

The Ballarat entry point yesterday fielded over 30 calls for people seeking assistance, and we are expecting this to increase dramatically as soon as the supplements and JobKeeper are ceased. When this happens, there is no way we are going to be able to respond to everyone. Currently we have 58 households we are supporting in motel accommodation. This is only achievable while we are having a temporary top-up in our crisis funds, and we already know that this is finite as well.

Without investment into support programs to allow for early interventions, many households' situations will continue to deteriorate and issues such as mental health, family violence and substance use can exacerbate. The only real solution moving forward is a significant investment into affordable, sustainable, long-term housing and also a correlation of investment into the housing specialist support programs to help people achieve their goals.

The majority of the homelessness sector is still operating on DHHS-funded budgets that have not changed in over 10 years, yet we are well aware that homelessness has increased dramatically in that time. So that is all from me. Thank you. I will pass over to Katrina and Jane now.

The CHAIR: Thank you—thanks, Warrick.

Ms LEEHANE: Good morning, everyone. My name is Katrina Leehane. I am the Manager at Ballarat Community Health of our youth, family and community support teams. I also manage our youth homelessness programs. I will actually read from a script as well, because there is a little bit of data.

In Victoria young people 10 to 24 years of age made up almost a quarter of presentations to homelessness services in 2016–17. In the Central Highlands area young people under the age of 25 made up 41 per cent of those experiencing homelessness and 27 per cent of clients entering into the service system through the entry point.

The social, economic and policy factors impacting on youth homelessness are specifically lack of affordable housing, including private rentals. Single people were the largest cohort of people, at 48 per cent, experiencing homelessness in the Central Highlands in 2016. There is a significant shortage of single-bedroom units in Ballarat, and a young person is competing for limited housing stock with single adults. Social housing stock in Ballarat has historically been the three-bedroom family properties. There is priority access to housing stock for other vulnerable cohorts, such as the individuals who had lost their homes as a result of the bushfires earlier in the year and were identified as a priority in that stock.

Accessible housing is needed for young people if they are to engage in support services and educational opportunities. Ballarat is following other city trends, with housing in the centre of the town being much more expensive with higher rents than the city fringe. The rental vacancy rate for regional Victoria in December 2019 was 1.7 per cent, and the average rental cost for a two-bedroom unit in Ballarat is \$293 per week. Ballarat entry-point data for 2017–18 shows that 88 per cent of all people who accessed housing support services were receiving government income support. The majority of young people accessing Ballarat Community Health services are facing financial difficulties, primarily receiving the independent rate of Youth Allowance—and that was pre-COVID, the \$462 per fortnight.

Young people experience discrimination based on age by the private rental market and some service providers asking, 'Why are they not at home with their parents?'. Often the underlying issues are caused by trauma, specifically family violence. As highlighted in the AHURI report, which is the Australian Housing and Urban Research Institute report, young people under 25 make up 41 per cent of those experiencing homelessness; however, they make up only 27 per cent of those actually accessing the entry point. This is of particular concern

when anyone requiring homelessness support in Ballarat must first register through the single entry points. More work is required to improve young people's access to early intervention homelessness support services. Ballarat Community Health level data shows that 41 per cent of clients accessing our homelessness support services have a prior mental health issue and diagnosis. There is also childhood experience of family violence, and 80 per cent report that sexual assault is often by a family member or a close family friend.

Assistance with life skills to maintain tenancy is crucial. Ballarat Community Health homelessness and support services provide young people with skills training to maintain their tenancy. This has been an effective strategy to build capacity and opportunities for young people. The implications of COVID have been identified by various social support organisations and networks. Sibling conflict has increased during COVID, and family violence referrals have also exponentially increased since COVID, which will exacerbate youth homelessness and require family violence programs and supports. It is anticipated that young people may feel stress and anxiety whilst they are transitioning back onto normal youth payments from the federal government COVID supplement payments and while trying to access employment opportunities, which will be difficult to achieve during this recession and pandemic. Ultimately we require more funding and investment for support workers and more funding for appropriate housing for this cohort. Thank you.

The CHAIR: Thank you. Jane, did you want to make a couple of quick comments before we start?

Ms MEASDAY: Yes, I apologise. My Zoom cut me off before we started. My only final comment is that, as a community health centre, we are really trying to learn how to deliver client-centred care. We are really trying to understand what services are required from the client's point of view, and what we are learning is that this requires a change in mindset. And if you think of these young people that are homeless, there are a lot of systems that have impacted on them, and they have not had a good start in life. And it is around 'How do we make the services fit their needs?' rather than having a mindset that they are difficult or they have caused these problems, whereas really they have been subject to a whole range of things that have happened to them. And for me the most tragic indicator of that or where we are not working is that young people can graduate out of out-of-home care to being homeless. For me that is just an example of how our systems are not necessarily working around the child. We are making the young person try to fit in, and it is up to them when they are 18 to get out there and make it on their own, whereas we have had care of that young person for a length of time as a society. And how come that is an outcome and that people are talking about jail being an outcome?

I think for me it is really about how do we shift our mindsets; how do we stop seeing these young people as difficult when we have looked at our young people at Ballarat Community Health who come into the homelessness sector and they do not have one other adult in their life? If you are thinking about the relationships being professionalised, really we should be trying to give young people social capital where they are making friends, they are making connections in the community that can support them—and that is a sign of a healthy community. But instead we have systems which are impacting on them and again just saying to them, 'You're not good enough; you haven't got this right'. For us it is really about mindsets. It is around really thinking about what we do as a service system that actually wraps around that young person and gives them natural social capital so they can flourish and not have a negative outcome.

The CHAIR: Thank you, Jane. Thank you, Katrina and Warrick. That was really succinct. Sometimes these kids just cannot get a break, and we do not provide the right avenues for them. We know that if a young person is homeless then they are much more likely to be homeless as an older person as well. So we are creating a rod for our own back in not protecting these kids.

In the little time that I have got I just wanted to touch on what you were talking about—that 41 per cent of people experiencing homelessness in the Central Highlands are under 25 but only 27 per cent of them are accessing the services or are getting to the door at the very least. Have you got any specific recommendations for us on how we can bring more of those young people at least to the door so we can start helping them and providing those avenues?

Ms LEEHANE: I think, from the Ballarat Community Health perspective in some of the work that they are doing with homeless young people, quite a few young people are not aware of the entry point and are not even aware that if they are sleeping on a couch, they are homeless or at risk of homelessness. So there are elements of that sort of thing around awareness and knowledge and where to get supports, because obviously the earlier our workers are involved—you know, early intervention is key in maintaining private rentals or shared

accommodation or even looking at family reconciliation reconnect-type programs that can link young people back if they have got family conflict—they can actually look at other alternatives.

But I think it is quite difficult for a young person to present at an entry point and say, 'I'm homeless. I have nowhere else. I have nowhere else to go to'. That can be really confronting. For young people I think it is really challenging, so when they do go to the entry points it is probably when it is quite dire and they do not have anywhere else to go. I think some of the work that we probably need to do as a sector is to try and link them into more early intervention programs before they get to that point—around employment, education and training—and link them into those avenues, because we do know that if they are not linked into education and if they are not linked into other proactive social activities things can disintegrate quickly.

The CHAIR: Spiral.

Ms LEEHANE: Spiral down, and they are actually ending up within the homelessness sector. So there is some work to do, but we do need some early intervention programs, not just youth homelessness programs.

The CHAIR: So we saw something like the Geelong Project, which I think encapsulates that idea of early intervention, earlier.

Ms LEEHANE: Yes.

Mr DAVISON: Definitely, but I also think the reality is that even if they do—the early intervention is brilliant, and that is exactly what we need—we still need to be able to respond, and often with young people, if you cannot respond then and there, you miss capturing them, because it is like, 'Well, they couldn't help me today', so they do not come back again, which is what we do not want. But I think out of the 62, I think I said, 50 of those youth were unsupported, and that is because there has been no significant investment in support programs. Ballarat Community Health are still operating on two youth support workers who were there when I started. It is the same right across: the Entrypoint, for example, is still in the same boat; we are still operating on what we were funded at when it commenced in 2009. There is still no development in that area so that we can actually capture and get support. If a young person presented today, we would assess them and put them on the priority list—but how long are they going to be waiting for before we can actually refer them on to a specific youth support program? We cannot say, and it depends on how bad things are for them. That early intervention is really key to turning people out of the system.

The CHAIR: Thank you. Rod.

Mr BARTON: Thank you, Chair. Thank you, Warrick, Katrina and Jane. I will not go into the early intervention, because I think Ms Maxwell will have plenty to say and ask about that—surprisingly. But I just want to know something about your own experience in terms of—and one thing that really concerns me is—these kids trying to obtain a rental property. It is a given we need more properties—that is a given. But when these kids go in and deal with the agents, what is your experience? Can you tell us a bit more about your experience when you are trying to get these kids into properties.

Ms LEEHANE: I guess from my perspective and my team's perspective in terms of rentals we tend to find that young people that are probably 19, 20 or 21 years of age that are linked into education and also have a part-time job are more appealing to agents—and that is quite rare. In the youth homelessness service system, the type of young person that we are usually dealing with is someone that may have difficulties in articulating themselves in a way that other professionals would feel is appropriate in an interview with a real estate agent. They also, I guess, are younger. Due to family violence AOD issues and mental health issues, with either themselves or family, they have difficulties with literacy levels—so filling out forms. So our staff actually assist with those processes. But generally people that own private rental properties are seeking, on the whole I would suggest, the middle-class families that actually can pay rent and that have paid employment. They do not tend to look initially or firstly at a 15-year-old young person to rent their property—that is in our experience. However, in saying that, we have some relationships with some real estate agents, which is I think are testament to our staff around building those relationships and actually suggesting that this young person is really proactive, very committed and is very good at paying rent and their bills; they can maintain a tenancy; we have worked with them for this amount of time; and we have done some tenancy and life and living skills with them around independent living—and they can then support them in that process.

Mr BARTON: And would those agents come back to you and say, ‘Hey, listen, this kid’s lost their way and they haven’t paid their rent for the last month’, and then you can intervene and say, ‘Hey, what’s happened?’?

Ms LEEHANE: Yes, we can and we do and we have in the past, and I guess that connection with the real estate agents is really key because then we can mitigate some of that stuff. It could be something that has happened that has triggered them in their life that has made it that they have not been able to make their payments—there might be a legitimate reason—so again it is that early intervention and that communication with real estate agents to support the young person in order for them to maintain their tenancy.

Mr BARTON: Thank you.

Mr DAVISON: I think the component of that—sorry, adding on—is often when they do re-engage. They may have already closed with the client, so when they re-engage they have to pick that up on top of their current case load, which can often be a difficulty, given that we are funded now on targets rather than outcomes. So one of the issues support services have to navigate is that you have got to keep an amount of turnover through so you meet your funding requirements, when really, you know, it may be that an extra six months working with that person may have negated the issues cropping up in the first place. So that is just something else that comes into play as well.

The CHAIR: Thank you. Kaushaliya and then Tania.

Ms VAGHELA: I will not ask a question; I will leave it to my regional colleague. But I would like to comment on that point by saying thanks to all three of you for presenting today and giving these presentations. Thank you for the great work that you do in the 70 programs and services you provide the wonderful youth who are facing homelessness in Ballarat and the western region. Thank you.

The CHAIR: Thank you, Kaushaliya. Tania.

Ms MAXWELL: Thank you, Chair. Thank you, Warrick, Katrina and Jane for presenting today and thank you so much for the work you do, the important work you do. One of the things I am hoping—and I would be interested in your feedback—is that this inquiry will cover a range of issues. We know first and foremost social housing has been mentioned in every single committee meeting that we have held, and there is a cohort of people that we need to support in the here and now. There are so many complexities with people at risk of homelessness as well. Having worked in the sector previously, it is an area I am very passionate about. I myself was actually homeless at 16 and sleeping in a car, so I understand the nuances and the difficulties that young people can have.

I am hoping that we have a suite of services. Early intervention I believe starts when children are at school. Let us link them into support services. If there are mental health issues within the family, let us ensure that we have that family reunification so that we can work through ways that, if it is safe to do so, those children can remain with their family. Do not even get me started on out-of-home care. There is so much work to be done in that space. Let us not even get them to out-of-home care. We are missing the mark on that. We have so many children coming out who are left defenceless, and the support services are just not there. There is no longevity in the support services. As you say, it focuses on KPIs, as opposed to outcomes. I believe that if there was improved funding to extend those support services being able to be provided, that in turn would to some degree prevent people from losing their tenancy and then becoming homeless again.

There are just so many areas that need to be addressed and I really, really hope that we do not just look at social housing and that this is an inquiry that is able to really look broad spectrum at the issues and complexities that are leading to homelessness. We need to be building resilience. We need to be empowering these young people. We need to create improved self-esteem, address those mental health issues. As you can tell, I am very, very passionate about it.

The CHAIR: And do you have a question?

Ms MAXWELL: Thank you so much. So do you see what I have raised today and would you say that that is a fair assessment of things that we have heard, experiences—that this is a complex issue and we need a much broader strategy?

Ms MEASDAY: Yes, and I think it is around taking the client-centred and family-centred approach and looking at what that family needs and building the service system around them rather than making them bounce around in between all the different systems. I agree, it is very much about building people's capacity and trying to find people natural supports around them rather than the professional relationships always being part of their lives. So it is very much around that early intervention—the coming in and building up family skills—because often it is that family conflict, it is the family violence, that does make things very unsettled. But it is very much about sitting with a family in a very respectful way and finding out where we can actually make a difference and where we can build them out rather than creating systems and making people try to fit into them and them bouncing around in them.

And I agree; if we could do something around—I mean, Ballarat Community Health is not an out-of-home care provider, but certainly we see that that group of young people, if we could make a difference with what happens in that pathway, we could build a better society.

Ms MAXWELL: Thanks, Jane.

The CHAIR: Thank you, and, Tania, thank you for your passionate comments.

Ms MAXWELL: Sorry, I got carried away there.

The CHAIR: Warrick, Katrina and Jane, thank you so much for being with us today. Thank you for your submissions, and yes, thank you for the work you do. Solving homelessness, as Tania quite eloquently puts, is not just about homes. It actually is a much broader picture, and I think you really exhibited that and talked to that today, so thanks very much.

Witnesses withdrew.