

**Submission
No 47**

**INQUIRY INTO HOMELESSNESS AMONGST OLDER
PEOPLE AGED OVER 55 IN NEW SOUTH WALES**

Organisation: St Vincent de Paul Society NSW

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Submission to the Inquiry into Homelessness amongst older people aged over 55 in New South Wales

6 June 2022

Acknowledgement of Country

The St Vincent de Paul Society acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of the land on which we live and work, with deep respect. May Elders, past and present, be blessed and honoured. May we join together and build a future based on compassion, justice, hope, faith, and reconciliation.

About the St Vincent de Paul Society

The St Vincent de Paul Society NSW (the Society) seeks to shape a more just and compassionate society by working to address the causes of poverty and injustice.

The Society is a significant provider of services to people experiencing disadvantage. Our homelessness services include generalist accommodation and case management services in Sydney, the Southern Highlands, Wollongong, Nowra, Wagga Wagga, Deniliquin and Armidale, as well as community drop-in centres in Coniston, Coffs Harbour, Tweed and Ballina. While our domestic violence services have an increasingly strong focus on outreach, we also have physical refuges in Sydney's East, West and South, including two refuges that focus on supporting older women who have experienced domestic and family violence.

In 2020-21 our housing and homelessness services supported over 1,000 people experiencing homelessness who were over the age of 55, most of whom presented as single people. Almost two thirds of the older people we supported were male, with 72% born in Australia. 31% received the Disability Support Pension, 26% received the Aged Pension and 23% relied on JobSeeker as their main source of income.

As well as our homelessness and domestic violence services, the Society also manages long-term accommodation services, including social and affordable housing managed through our national community housing provider, Amélie Housing.

Our health services include Frederic House, which provides a harm-minimisation approach to aged care for men with complex needs who are at risk of homelessness, and the Matthew Talbot Clinic, which provides a range of bulk-billed and free health services to men experiencing homelessness. The Clinic's services include medical, psychiatric, optometry, and podiatry care. Individuals who have been referred to the Matthew Talbot Hostel following discharge from hospital or release from prison are reviewed by clinic staff to ensure continuity of care and follow up services are provided.

Our extensive network of members and volunteers also provide immediate care and assistance to people in their communities who are finding it hard to make ends meet. This includes financial and material support: food parcels or vouchers; assistance paying energy and other bills; no-interest loans; clothing; and household items including furniture.

Introduction

The Society appreciates this opportunity to respond to the NSW Government's Standing Committee on Social Issues Inquiry into Homelessness amongst people aged over 55 in New South Wales.

As a provider of aged care, health, domestic and family violence, and housing and homelessness services, we work with a diversity of clients over the age of 55 who are at-risk of or currently experiencing homelessness.

This submission has been developed in consultation with over forty caseworkers who work in our services, as well as nurses, team leaders and managers across more than 10 St Vincent de Paul Society NSW services. During these consultations, our employees outlined the challenges faced by people over the age of 55 who have specific needs and added vulnerabilities due to their age, employability, financial circumstances, and experiences of social isolation.

We have also met with people we assist across our aged care and housing and homelessness services to better understand their experiences of homelessness as a part of the ageing community. These conversations demonstrated the diversity of issues that play a role in the experience of homelessness, including the rising cost of living, a lack of secure, appropriate, and affordable homes, family and relationship breakdowns, domestic and family violence, and social isolation.

Through our consultation process, we identified a range of factors that limit the opportunities for early intervention and make it more challenging for older people to access and navigate age-appropriate services. Our employees, and many of the people we assist, also spoke about the lack of safe, secure and affordable housing as a major contributor to the risk of homelessness, and as a barrier to exiting homelessness.

We believe that there is a need for specialised, tailored services for older people at-risk of homelessness or experiencing homelessness. Yet such services will only have the desired impact if the NSW Government also recognises and responds to broader challenges impacting communities, including the rising cost of living and the crisis in housing affordability.

Recommendations:

The NSW Government should:

1. Ensure the homelessness service system is resourced to respond to the needs of groups at higher risk of homelessness including First Nations people, people with disability, people from migrant and refugee backgrounds, and LGBTQI+ people.
2. Continue to support the annual statewide rough sleeping street count.
3. Work to improve the quality and utility of Specialist Homelessness Service (SHS) data collection including adding a geographic indicator to enable spatial analysis of demand for services and making it easier for people to access this data.
4. Seek to better capture and share information about unmet need, including by making data collected by Link2Home more readily available, and by building service capacity to ensure greater consistency and accuracy of data collection.
5. Continue to develop data linkage projects that allow for improved longitudinal analysis of people experiencing or at risk of homelessness, and invest in research to help translate this data into evidence-based policy and service responses.
6. Improve access to regular and timely data on key housing indicators including the waitlist for social housing, current and projected social and affordable housing stock, and residential tenancies and evictions.
7. Advocate to the Federal Government for a 30% increase in the maximum rate of Commonwealth Rent Assistance.
8. Consider mechanisms to extend rental subsidies for National Rental Affordability Scheme tenants who will be at risk of homelessness as the Scheme draws to a close.
9. Mandate full implementation of Silver Level Livable Housing Design standards in line with the National Construction Code.
10. Commit to significant and sustained investment in social housing, including leveraging the Federal Government's proposed \$10 billion Social Housing future fund, delivering at least 5000 new social housing homes per annum for the next decade.
11. Increase the supply of affordable housing including through a more rigorous and ambitious approach to mandatory contribution schemes.
12. Strengthen protections for tenants to provide greater security of tenure and introducing a permanent hardship framework so that more renters can stay safely housed and do not exit into homelessness.
13. Increase Specialist Homelessness Service Program funding by 20%.
14. Identify opportunities to address the financial insecurity experienced by a large and growing cohort of older women.
15. Review funding arrangements for programs that support older people from marginalised groups to build and maintain connections with others in the community.

16. Invest in raising awareness amongst older people about how to access help, including supporting soft-entry points for groups at higher risk of homelessness.
17. Ensure homelessness services and housing products are better able to meet the needs of the growing cohort of older people experiencing or at risk of homelessness.
18. Investigate service gaps for older people at risk of homelessness who are not able to access the NDIS or aged care services, and work with the Federal Government to identify and implement solutions.
19. Invest in education and employment initiatives tailored to meet the needs of older people experiencing homelessness.
20. Invest in improved access and referral pathways for older people who are at risk of or experiencing homelessness, providing for both over the phone and face-to-face access points.
21. Extend the provision of tailored support to a wider cohort of people in social housing or subsidised private rentals who would otherwise be at-risk of losing their tenancies.

Response to the Inquiry into Homelessness amongst people over 55 in New South Wales

1.1. The rate of homelessness amongst older people and its impact

This section of our submission responds to Inquiry Terms of Reference (a) (i) (j) and (k).

Australia's older generation is growing at a rapid rate and is likely to more than double by 2057,¹ with over 23% of the Australian population expected to be over the age of 65 by 2056.²

The ageing of the population is reflected in the growing number of older people experiencing homelessness. Over the past three census periods there has been a steady increase in homelessness amongst older people such that 29 persons over the age of 55 years per 10,000 of the population were experiencing homelessness in 2016.³ Older women are now the fastest growing cohort of homeless people⁴. This trend is not unexpected: in 2010 it was described as 'a predictable crisis' based on demographic modelling.⁵ More recently, the Housing for the Aged Action Group estimated that 110,000 women over 45 years are at risk of homelessness in NSW based on 2018 data.⁶

While many older people experience less visible forms of homelessness, they also account for a significant proportion of rough sleepers. End Street Sleeping Collaboration data shows that of the 2047 people on the by-name list (a list of people sleeping rough in NSW), 455 or 25.3% are over the age of 55.⁷

With more than 50,000 applicants (over 100,000 people) on the social housing waitlist, and an acute housing affordability crisis (see section 1.3.1), the upward trend in older people experiencing homelessness is likely to continue.

1.1.1. Physical, psychological, and social impacts

There is extensive evidence showing that people experiencing homelessness and insecure housing have significantly poorer health outcomes compared to the general population.⁸ Homelessness can both increase a person's exposure to risk factors for injury and ill-health such as violence, social isolation, substance use and poor nutrition,⁹ and it can inhibit access to timely and appropriate healthcare.¹⁰

In NSW, the End Street Sleeping Collaboration reports that 55% of people on its by-name list have a physical health condition, the most common being dental problems followed by asthma. A similar proportion have a mental health condition, with depression and anxiety the most common followed by post-traumatic stress disorder.¹¹

¹ Australian Institute of Health and Welfare [AIHW]TT (2021) Older people

² Australian Bureau of Statistics (2008) *Population Projections, Australia, 2006–2101*

³ Australian Bureau of Statistics (2016) Census of Population and Housing: Estimating Homelessness

⁴ Older Women's Network (2020) Our Work: Homelessness < [⁵ Sharam, A. \(2010\) A predictable crisis: older, single women as the new face of homelessness, accessed 17 August 2018, <http://apo.org.au/node/22195>.](https://ownnsw.org.au/our-work/homelessness/#:~:text=In%202019%2C%20women%20over%2055,homelessness%20is%20a%20disastrous%20process.></p></div><div data-bbox=)

⁶ Housing for the Aged Action Group, 2020, *At Risk: Understanding the population size and demographics of older women at risk of homelessness in Australia*, accessible at: https://www.olderrental.org.au/sites/default/files/at_risk_final_report_web.pdf

⁷ End Street Sleeping Collaboration (2022) De-identified Survey Data. Available at <https://endstreetsleeping.org/survey-analysis-deidentified>, accessed 3 June 2022.

⁸ Australian Institute of Health and Welfare (2021) Health of people experiencing homelessness. Available at <https://www.aihw.gov.au/reports/australias-health/health-of-people-experiencing-homelessness>

⁹ Fazel, S., Geddes, J. & Kushel, M. (2014) The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. *The Lancet* 25; 384 (9953):1529–1540.

¹⁰ Davies, A. & Wood, L. (2018) Homeless health care: meeting the challenges of providing primary care. *The Medical Journal of Australia* 209(5): 230–234.

¹¹ End Street Sleeping Collaboration (2022) De-identified Survey Data. Available at <https://endstreetsleeping.org/survey-analysis-deidentified>

In comparison to younger people, older people experiencing homelessness have more complex physical, psychological, and social challenges, and experience significant unmet need.¹² This includes medically complex issues such as higher rates of chronic disease, cognitive and geriatric conditions.¹³ Older adults experiencing homelessness who use substances face additional health risks including interactions between substances and their medication, cardiovascular events, chronic pulmonary disease, and death.¹⁴

The experience of homelessness is an independent risk factor for poor health (even after controlling for other risk and protective factors) with people more likely to have poor health outcomes the longer they are homeless.¹⁵ The Manager of the Society's Matthew Talbot Clinic, a nurse-led clinic co-located with the Matthew Talbot Hostel in Woolloomooloo, reports that many of the people experiencing homelessness who present to the clinic do so with the health issues of someone decades older. This is backed by research which suggests that the functional status of older homeless adults is typically worse than those aged 20 years older in the general population.¹⁶

The relationship between health and homelessness highlights both the importance of intervening early, and the need to better integrate health and homelessness interventions for people who have experienced chronic and long-term homelessness. Healthcare services embedded into crisis accommodation and homelessness settings, such as the Matthew Talbot Clinic, is one such model.¹⁷ There is room, however, to enhance the role primary care plays in supporting people who have experienced homelessness to re-engage with the health system as they enter stable housing, reducing the risk that poorly managed chronic health conditions will contribute to a return to homelessness.¹⁸

Claire's Story

Prior to being referred to one of our domestic violence services, Claire had been in a 20-year domestic violence relationship where her partner was physically, verbally, socially, and financially abusive. She had a diagnosis of bipolar disorder and saw her GP once a month for her medication.

When Claire arrived at the service, she was 56 years old and extremely anxious; the thought of learning how to cook, clean and catch public transport independently brought her to tears on many occasions. She would regularly refer to herself as "stupid and useless".

Over time, Claire learnt how to cook meals, complete her daily chores without prompting, take her medication independently (once in a webster pack), and learn the local bus and train routes. She enjoyed attending onsite groups such as cooking, mindfulness, music and art therapy. Once Claire was in our refuge, she contacted her son and they started to speak again. After a few weeks, her son and grandchildren came to meet her. Claire was happy to finally have some family connections back in her life.

Finding Claire affordable permanent housing was difficult as in her relationship Claire had had no control over her finances (her partner had full control over money and bank accounts). She had previously assumed that her rent was being paid, but as it wasn't she had been evicted from her property with a

¹² Canham, H.J; Moore, P; Burns, V & Mahmood, A (2021) Shelter/housing options, supports and interventions for older people experiencing homelessness. *Ageing and Society*, p 2

¹³ Lee, Chuan Mei, M.D., M.A, Mangurian, Christina, M.D., M.A.S, Tieu, Lina, M.P.H, Ponath, Claudia, M A, Guzman, David, M.S.P.H, & Kushel, Margot, M.D. (2016). Childhood Adversities Associated with Poor Adult Mental Health Outcomes in Older Homeless Adults: Results from the HOPE HOME Study. *The American Journal of Geriatric Psychiatry*, 25(2), 107–117

¹⁴ Spinelli, Ponath, C., Tieu, L., Hurstak, E. E., Guzman, D., & Kushel, M. (2017). Factors associated with substance use in older homeless adults: Results from the HOPE HOME study. *Substance Abuse*, 38(1), 88–94

¹⁵ Oppenheimer, S.C., Nurius, P.S, and Green, S. (2016) Homelessness History Impacts on Health Outcomes and Economic and Risk Behavior Intermediaries: New Insights from Population Data. *Families in Society*. Jul; 97(3): 230–242.

¹⁶ Lee, Chuan Mei, M.D., M.A, Mangurian, Christina, M.D., M.A.S, Tieu, Lina, M.P.H, Ponath, Claudia, M.A, Guzman, David, M.S.P.H, & Kushel, Margot, M.D. (2016). Childhood Adversities Associated with Poor Adult Mental Health Outcomes in Older Homeless Adults: Results from the HOPE HOME Study. *The American Journal of Geriatric Psychiatry*, 25(2), 107–117

¹⁷ Canham, H.J; Moore, P; Burns, V & Mahmood, A (2021) Shelter/housing options, supports and interventions for older people experiencing homelessness. *Ageing and Society*, p 2

¹⁸ Davids, A. and Wood, L.J. (2018) Homeless health care: meeting the challenges of providing primary care. *MJA* (209) 5.

\$2000 debt. St Vincent de Paul Society NSW advocated to have the debt waived, and supported Claire to access a permanent one-bedroom Housing NSW property. As this property is located within a 10-minute drive from the refuge, Claire will continue to access the service for as long as she feels their support is required.

Claire is now living independently and enjoying her life. She catches public transport to the shops to do her shopping and see her doctor, she cooks meals for herself every day, keeps her unit clean and tidy, and continues to attend the refuge for social activities and groups. Claire also sees her son and grandchildren regularly.

1.1.2. Family impacts

Older people's experience of insecure housing and homelessness can impact family relationships and wellbeing.

Where someone is required to care for older family members with limited support or resourcing this can cause financial stress, contributing to a cycle in which the experience of financial hardship is passed down from one generation to the next.

Where an older person has no choice but to move away from family and friends due to a lack of affordable housing, this can erode family ties and the opportunity to develop intergenerational relationships, with younger family members missing out on the support and guidance of older relatives.

1.1.3. The cost of homelessness

As well as harming individuals and their families, insecure housing and homelessness results in significant and avoidable costs. People experiencing homelessness are more likely to access a range of other services, with the recent *Pathways to Homelessness* Report finding that the average cost to government over six years for people accessing homelessness services is \$186k.¹⁹ Only 9% of these costs relate to housing and homelessness services, while 84% relate to health and justice services. In addition to the direct cost of this service provision, increased pressure on services can reduce their capacity to respond to other people whose needs may be less acute.

1.1.4. Impact on older people in vulnerable groups

Groups that are at greater risk of homelessness include First Nations people, people with disability, people from migrant and refugee backgrounds, and people from the LGBTQI+ community. Responses to homelessness must accommodate the needs of these groups.

First Nations people

Aboriginal and Torres Strait Islander people are at much greater risk of homelessness, comprising 24% of people accessing specialist homelessness services.

The *Redressing Aboriginal Homelessness Accord* highlights the need to better resource Aboriginal community-controlled organisations to deliver services to Aboriginal communities.²⁰ We support this recommendation, and acknowledge the ongoing need to build the competency of mainstream services to deliver cultural safe services to First Nations people.

¹⁹ Department of Communities and Justice (2021) *Pathways to Homelessness*. Available at <https://www.facs.nsw.gov.au/download?file=823631>

²⁰ NSW SHS Aboriginal Reference Group (2017) *Redressing Aboriginal Homelessness Accord*. Available at <https://homelessnessnsw.org.au/wp-content/uploads/2021/03/Redressing-Aboriginal-Homelessness-Accord.pdf>

People with disability

Compared with the population as a whole, people with disability have poorer housing outcomes. The type and severity of disability, together with the way in which it was acquired, all contribute to significant variation in a person's risk of homelessness.^{21,22}

Older people with disability may have had fewer employment opportunities and a lifetime of lower earnings.²³ An historic lack of community-based supports and suitable housing options means they may be less likely to have gained independent living skills. And for people whose parents have played a substantial caring role, the death of parent can be a trigger for homelessness.

People from migrant and refugee backgrounds

People from migrant and refugee backgrounds may have experienced greater exposure to risk factors for homelessness, such as trauma, and have fewer protective factors, such as social connections. For people seeking asylum, their visa status can restrict their economic and social rights and create barriers to employment in already competitive labour markets, leading to homelessness and housing exclusion.²⁴ They also experience a range of language and cultural barriers that inhibit access to services, while their visa status may exclude them from some services and supports such as social housing.

In 2021, St Vincent de Paul Society NSW participated in a research project facilitated by Jesuit Refugee Service Australia and Western Sydney University, which demonstrated how the high cost of living, a lack of rental history, and challenges to finding employment all contributed to housing instability for people seeking asylum. For older migrants or people seeking asylum, securing employment is likely to be even more difficult. The study highlighted how people seeking asylum will often 'sacrifice physical space, safety and security throughout their housing journeys in Australia', with 5% of respondents living in insecure housing (i.e. boarding houses) and 38% living with friends or extended family in overcrowded homes.²⁵

Anecdotally, caseworkers in our services report an upward trend in the number of older people from migrant and refugee backgrounds who have been brought to Australia by family members and whose relationships have then broken down. For these individuals, the experience of homelessness coincides with complex visa issues, and they require assistance from someone who can clearly articulate complicated migration advice to individuals who may have cognitive impairments or other geriatric concerns. This is a new and evolving cohort of people that will require specialised support. Similarly, women escaping violence require access to specific legal services that can provide advice across a range of intersecting issues, include both migration and family law.

LGBTQI+

In comparison to the mainstream population, older people within the LGBTQI+ community are more likely live in poverty and experience homelessness.²⁶ Older people within the LGBTQI+ community, particularly

²¹ Beer A., Faulkner D. (2009) *The Housing Careers of People with a Disability and Carers of People with a Disability*. Australian Housing and Urban Research Institute Limited; Melbourne, Australia: 2009. AHURI Research Paper.

²² Kavanagh A.M., Aitken Z., Baker E., LaMontagne A.D., Milner A., Bentley R. (2016) Housing tenure and affordability and mental health following disability acquisition in adulthood. *Soc. Sci. Med.* 2016; **151**:225–232.

²³ AIHW (2020) People with disability in Australia. Available at <https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia/contents/income-and-finance/income>

²⁴ Jesuit Refugee Service & Western Sydney University (2021) *A Place to Call Home: a report on the experiences of homelessness and housing exclusion among people seeking asylum in Greater Sydney*

²⁵ Jesuit Refugee Service & Western Sydney University (2021) *A Place to Call Home: a report on the experiences of homelessness and housing exclusion among people seeking asylum in Greater Sydney*

²⁶ Walton, R (2009) LGBTQI Older Women, *Parity Articles*, Housing for the Aged Action Group, <https://www.older tenants.org.au/publications/parity-lgbti-older-women>

trans, gender diverse and bisexual people, are also at greater risk of family violence by family members due to homophobia, transphobia and biphobia.²⁷

Intersections of age, sexual orientation and gender can make it harder for members of the LGBTQI+ community to access relevant services that can prevent or respond to homelessness. For example, people who have experienced a history of discrimination, isolation, stigma, and criminalisation of homosexuality over their lifetime may believe that if they are to access aged care services they need to hide their sexuality out of fear of prejudice. This fear is not unfounded, with some aged care policies and codes not acknowledging same-sex couples. Further, there is a lack of training for aged care staff on understanding LGBTQI+ issues.²⁸

Similar access barriers exist in other parts of the service system. Within one of our domestic and family violence services, for example, we are currently supporting a trans woman (in an outreach capacity), and while her current living quarters are not secure, she is too fearful to move to the refuge based on a history of experiencing transphobic abuse and discrimination within refuge settings. While there are some services such as The Gender Centre that provide specialised support to the trans community, our services report that many trans women struggle to access crisis accommodation services, particularly domestic and family violence refuges, as they will only trans women if they have capacity to offer independent living facilities.

Recommendation:

The NSW Government should ensure the homelessness service system is resourced to respond to the needs of groups at higher risk of homelessness including First Nations people, people with disability, people from migrant and refugee backgrounds, and LGBTQI+ people. This includes building capacity within mainstream services, growing the number of Aboriginal Community Controlled Organisations delivering housing and homelessness services, and improving access to social housing and private rental subsidies for people on temporary visas.

1.2. The adequacy of data collection

This section of our submission responds to Inquiry Terms of Reference (h).

While considerable data on homelessness is already collected, notable gaps mean we do not yet have a comprehensive picture of the extent of homelessness experienced by particular cohorts, including older people. There is also significant opportunity to better use existing data to inform policy and service responses, including improving access to spatial data on homelessness. With housing critical to preventing and responding to homelessness, it is also imperative that the lack of data on key housing indicators be addressed.

1.2.1. Homelessness data

The main sources of data about homelessness are the ABS Census and administrative data collected by Specialist Homelessness Services (SHS). In NSW, the annual street count is another emerging source of data and information.

²⁷ VIC Government (2021) Family violence support for LGBTQI+ communities, <https://www.vic.gov.au/family-violence-support-lgbtqi-communities>

²⁸ Australian Human Rights Commission (n.d) LGBT older people, <https://humanrights.gov.au/our-work/lgbti/lgbt-older-people>

While these datasets provide much useful information, issues and gaps include:

- The under-reporting of the experience of homelessness amongst some cohorts, such as First Nations people²⁹, and of some forms of homelessness. For example, because the Census excludes visitors to a household it is likely to significantly underestimate the number of people who are couch-surfing, temporarily staying with family or friends, or in unstable housing, which is how many older people experience homelessness.
- The absence of localised, timely information about the prevalence of homelessness and demand for services, with SHS data reported only at the NSW level, and Census data only available every five years.
- The lack of data about the causes of homelessness. While SHS data includes questions about the main reasons someone is seeking assistance, this is often taken as a direct marker of the underlying cause of homelessness but should be used with care.³⁰ For example, case workers in our services report that some clients do not disclose domestic violence when presenting to a service; this information is only shared once a relationship has been established.
- A lack of consistent and comprehensive information about the level of unmet need. This is partly because the number of people approaching services is likely to change in response to service resourcing and capacity (for example, people may be less likely to seek assistance if they know services are at capacity, and services that are under-resourced will have less capacity to promote their service); and partly because the way in which services understand and capture unmet need is inconsistent.
- A lack of longitudinal data that shows how people journey through the service system and provides insights into longer-term outcomes for people who have received support through specialist homelessness services. We appreciate the Department of Communities and Justice's 2021 publication of the *Pathways to Homelessness* report and interactive data dashboard and recommend ongoing investment in data linkage projects that allow for improved longitudinal analysis of people experiencing or at risk of homelessness, and in research that can help translate this data into evidence-based policy and service responses.

Recommendations:

The NSW Government should:

- continue to support the annual statewide rough sleeping street count
- work to improve the quality and utility of SHS data collection including adding a geographic indicator to enable spatial analysis of demand for services and making it easier for people to access this data
- seek to better capture and share information about unmet need, including by making data collected by Link2Home more readily available, and by building service capacity to ensure greater consistency and accuracy of data collection
- continue to develop data linkage projects that allow for improved longitudinal analysis of people experiencing or at risk of homelessness and invest in research to help translate this data into evidence-based policy and service responses.

²⁹ Australian Bureau of Statistics (2014) Cat. No. 2049.0 - Census of Population and Housing: Estimating homelessness, 2016, accessible at: <https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0>

³⁰ Unison Housing Research Lab (2020) [Submission to the Federal Parliamentary Inquiry into homelessness in Australia](#).

1.2.2. Housing data

Many important indicators of the health of our housing system are not currently measured, collated, or made publicly accessible, and significant improvements are needed to inform housing policy and service responses and aid accountability. We note the precedent set by other government agencies, such as NSW Health, in facilitating open access to regular, timely, localised, and disaggregated data.

Specific areas where we would like to see improved data collection and reporting on key housing statistics include:

- **Social housing waitlists:** Currently, the NSW Government publishes the number of applicants for social housing at the NSW level and each allocation zone annually, typically six months after the end of the reporting period. When new data is published it replaces old data, which is then removed from public record. Further, waitlist data is not broken down by demographic information such as age, gender and family composition. We believe it is in the public interest for the Department of Communities and Justice to improve access to waitlist data, including historical data.
- **Social housing stock:** There is a lack of transparency about exactly how much new social housing has been planned, funded, and delivered across NSW. The Society would like to see the NSW Government clearly and publicly report on the current and projected number of social housing homes across NSW, and at smaller geographies. Information about projected new stock should include the funding status of existing commitments, and the progress of these developments should be publicly tracked.
- **Affordable housing:** Information about the number of affordable housing homes state-wide and more locally is limited. For example, while the Greater Sydney Commission's *A Metropolis of Three Cities* included Affordable Rental Housing Targets to inform local government planning, we have been unable to find any information about how many affordable housing dwellings have been delivered as a result. It is disappointing that affordable housing has not yet been included as a performance measure in the Commission's reporting framework.
- **Security of tenure:** There is little publicly available data on how and why rental tenancies end in NSW, with the exception of the pilot bond-exit survey carried out by the Department of Fair Trading in 2020. To improve access to information about tenancies – and particularly evictions – we recommend Department of Fair Trading use the learnings from the pilot survey to inform routine data collection processes, and report on this data annually. We note that the Federal Parliament's recent *Inquiry into Homelessness in Australia* similarly recommended that state and territory governments ensure the regular publication of statistics on residential tenancy evictions.³¹

Recommendation:

The NSW Government should improve access to regular and timely data on key housing indicators including the waitlist for social housing, current and projected social and affordable housing stock, and residential tenancies and evictions.

³¹ Parliament of the Commonwealth of Australia (2021) *Inquiry into Homelessness in Australia*, House of Representatives Standing Committee on Social Policy and Legal Affairs.

1.3. Factors affecting the incidence of homelessness

This section of our submission responds to Inquiry Terms of Reference (b)

The three main reasons older Australians seek help from specialist homelessness services are housing crisis (21 percent); domestic and family violence (21 percent); and financial difficulties (17 percent).³²

While a smaller proportion of people present to homelessness services due to other forms of relationship or family breakdown, our caseworkers highlighted this as a significant issue that is often the result of complex unmet needs. Similarly, social isolation can mean older people have fewer supports available to them if they experience an adverse event that can trigger homelessness, and this can reduce the likelihood that they receive a preventative service intervention.

We note that the COVID-19 pandemic has impacted many of the factors that contribute to homelessness, affecting people's financial security, increasing rates of domestic and family violence, and leaving people more social isolated. The full extent of these impacts is yet to be properly understood.

1.3.1. Housing crisis: a lack of secure, appropriate, and affordable homes

A key driver of homelessness amongst all age groups is the lack of secure and affordable housing for people on low incomes.

For a growing number of people, home ownership is out of reach. As people near the age of retirement, the likelihood that they will be able to secure a loan and manage repayments diminishes, yet renting in the private market has become increasingly unaffordable. Anglicare's most recent Rental Affordability Snapshot found that:

- Only one rental listing in all of NSW was affordable for a single person on JobSeeker
- 0.5% of rentals for affordable for someone on the Disability Support Pension
- One percent of listings were affordable for a single person working fulltime on the minimum wage
- Only 2% of listings were affordable for people on the Age Pension.³³

While rents have climbed, the value and effectiveness of key government initiatives designed to support people in the private rental market has eroded:

- As of June 2020, approximately 538,800 households in NSW were receiving Commonwealth Rent Assistance (CRA).³⁴ CRA supports people on low incomes renting in the private market by providing a 75-cent subsidy for every dollar of rent payable above the rent threshold up to a maximum rate of payment, indexed to general consumer prices. This means it has not kept pace with steep increases in the cost of renting. As a result, more CRA recipients are now in rental stress (45.7%)³⁵, with the growing proportion people now receiving the maximum amount³⁶ no longer protected against further rent increases.
- The National Rental Affordability Scheme (NRAS) incentivised the delivery of approximately 34,154 new rented homes for low- and middle-income earners across Australia. It did this by providing investors with an annual National Rental Incentive for up to ten years for dwellings rented to eligible tenants at a rate of at least 20 percent below market value. The Scheme was closed to new developments in 2014 and allocations for dwellings constructed under the scheme are now expiring.

³² Thredgold, C., Beer, A., Zufferey, C., Peters, A. and Spinney, A. (2019) An effective homelessness services system for older Australians, AHURI Final Report 322, Australian Housing and Urban Research Institute Limited, Melbourne, <http://www.ahuri.edu.au/research/final-reports/322>, doi: 10.18408/ahuri-7318601.

³³ Anglicare Australia (2022) Rental Affordability Snapshot 2022.

³⁴ AIHW (2021) Housing Assistance in Australia. Available at <https://www.aihw.gov.au/reports/housing-assistance/housing-assistance-in-australia/contents/financial-assistance>

³⁵ Productivity Commission (2022) Report of Government Services: Housing and Homelessness.

³⁶ Productivity Commission (2019) Vulnerable Private Renters: Evidence and Options.

In NSW, 1,250 allocations have already ceased, while a further 5,227 dwellings will exit the scheme by 2026.³⁷ Across Australia, approximately 15% of NRAS tenants are over the age of 55,³⁸ and many will find themselves unable to afford higher rents at full market value.

The high cost of housing sits alongside welfare payments that have not kept pace with increased living costs – particularly those specific to people on low incomes; and low wage growth – lowest amongst lower income earners and older employees³⁹. That the JobSeeker payment is inadequate has been well documented.⁴⁰ While the Disability Support Pension and Aged Pension are set at higher rates, they still leave a significant proportion of recipients in poverty.⁴¹ With the Aged Pension system largely built on an assumption of home ownership, it is recipients in the private rental market who comprise the majority of Aged Pension recipients experiencing financial hardship.⁴²

The relationship between low incomes, high rents and poverty can also be seen within a broader population of older people, with two thirds of single women aged 55 and over who live in private rental accommodation now experiencing income poverty.⁴³ Poverty is a risk factor for homelessness, and with private renters more exposed to increases in the cost of housing, and having little security of tenure, the risk is particularly acute.

While the lack of affordable private rentals affects people of all ages, older people may have fewer choices available to them in response. Many older people are reluctant to leave communities where they have deep social ties, may rely on family or community support, and are familiar with the environment. They may also be reluctant to move further from health and other services and have less choice in the private rental market as many dwellings are not accessible.

For people on low incomes who are unable to rent in the private market, social housing should provide a safety net, but there is nowhere near enough. Lack of adequate investment from successive State and Federal Governments has resulted in a steady decline in social housing as a proportion of total housing in NSW. At 4.71%, it is now at its lowest rate since 2011.⁴⁴ This is a direct contributor to the high and sustained unmet need for social housing:

- The Productivity Commission reports that over 51,000 applicants—or more than 110,000 adults and children⁴⁵—were waiting for social housing in NSW as of 30 June 2021.⁴⁶ In parts of the state the wait time exceeds 10 years.⁴⁷
- The NSW Treasury 2021-22 Intergenerational Report reports that, if home ownership rates continue to decline, demand for social housing in NSW amongst retirees alone will increase by another 68,000 households by 2060-61.⁴⁸

³⁷ Department of Social Services (2022) National Rental Affordability Scheme Quarterly Performance Report, March 2022.

³⁸ Department of Social Services (2021) National Rental Affordability Scheme Tenant Demographic Report, April 2021.

³⁹ Kalb, G. and Meekes, J (2019) *The Characteristics of Individuals Experiencing Low Wage Growth and Consequences of Low Wage Growth*, Reserve Bank of Australia..

⁴⁰ More than a decade ago, the Henry Tax Review recommended a \$50/week increase to the JobSeeker Payment. Since then, recommendations to increase the rate have been made by the Governor of the Reserve Bank, KPMG, Deloitte Access Economics, the Senate Standing Committee on Economics, and dozens of community and social sector organisations and peaks. A growing body of research and data also shows that people on JobSeeker cannot afford everyday essentials. For an overview, see the St Vincent de Paul Society NSW Report Filling the Gap: The relationship between the rate of unemployment benefits and charity assistance for JobSeekers.

⁴¹ Davidson, P., Bradbury, B., and Wong, M. (2020), *Poverty in Australia 2020: Part 2, Who is affected?* ACOSS/UNSW Poverty and Inequality Partnership Report No. 4, Sydney: ACOSS.

⁴² Coates, B. and Nolan, J. (2020). *Balancing act: managing the trade-offs in retirement incomes policy*. Grattan Institute

⁴³ Duncan A, 'Behind the Line: Poverty and disadvantage in Australia 2022', Bankwest Curtin Economics Centre Focus on the States Series, #9, March 2022.

⁴⁴ Barnes, E., Writer, T., Hartley, C. *Social Housing in New South Wales: Report 1 Contemporary analysis*, (2021), Sydney: Centre for Social Impact

⁴⁵ Evidence given by the Department of Communities & Justice in Budget Estimates 2019-2020 advised that multiplying the number of applicants by 2.2 gives the approximate number of people waiting for social housing.

⁴⁶ NSW Department of Family & Community Services (2016) [Expected Waiting Times](#)

⁴⁷ Ibid

⁴⁸ NSW Treasury (2021) 2021-22 NSW Intergenerational Report https://www.treasury.nsw.gov.au/sites/default/files/2021-06/2021-22_nsw_intergenerational_report.pdf

The Federal Labor Government's election commitment to establish a ten-billion-dollar Housing Australia Future Fund represents a significant injection of funds in social housing and this should be leveraged by the NSW Government to radically boost supply.

1.3.2. Family and domestic violence

In NSW, one quarter of specialist homelessness services clients cite domestic and family violence as their main reason for seeking assistance, and women are three times more likely to say this is the main reason they are seeking help.⁴⁹ As outlined above, these figures likely under-represent the role domestic and family violence plays as a driver of homelessness.⁵⁰

For older victim-survivors of domestic and family violence in particular, the experience of domestic and family violence is often coupled with extreme social isolation and disconnection from friends, family and the broader community. Many of the older women supported by the Society have been in abusive relationships for long periods of time due to feelings of shame, being "too proud" to ask for help, or a sense of obligation to stay in a relationship for their children. In addition, some older women receiving assistance have not always recognised that their experiences equate to abuse due to their beliefs around traditional gender roles and responsibilities in the home. The experience of prolonged oppression can leave women with limited or no financial resources and can mean they have not had the chance to develop independent living skills such as financial management, and how to navigate systems and services, including Centrelink.

Our caseworkers report that some women who have been in abusive relationships for decades have also experienced intergenerational family violence, first from their partner and later from their children. While research into intergenerational transmission of violence is limited⁵¹, child-to-parent violence is known to be more common when the offending child has experienced violence from a parent.

We commend the NSW Government for responding to the high rates of domestic violence in the community through its commitment to deliver 75 new domestic violence refuges. While this as an important step, there remains a need to also increase funding for the SHS program so that services are resourced to meet current demand.

1.3.3. Financial difficulties

One in six clients of specialist homelessness services in NSW report that financial issues are their main reason for seeking assistance.⁵² Older people may be more likely to experience financial difficulties following the death of a spouse,⁵³ or due to the breakdown of relationships.

Financial insecurity is closely related to the lack of secure and affordable housing and is a gendered issue, with older women much more likely to experience poverty than men.⁵⁴ Women are less likely to have an adequate financial safety net due to a lifetime of lower average earnings – with the gender pay gap currently sitting at 13.8%⁵⁵ – and unpaid breaks from work due to caring responsibilities. This means that on average, women have just over half the superannuation savings of men at retirement age.⁵⁶

⁴⁹ Ibid.

⁵⁰ Grenier, B.R; Sussman, T; Rothwell, D; Bourgeois, G.V & Lavoie, J.P (2016) A literature review of homelessness and ageing: Suggestions for policy and practice. *Canadian Journal on Ageing*, 35 (1), 28-41

⁵¹ Besemer, S (2017) Intergenerational transmission of violence,

⁵² AIHW (2021) Specialist homelessness services annual report 2020-21. Accessed 2 June 2022 at:

<https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-annual-report/data>

⁵³ Kimbler, K.J; DeWees, M.A & Harris, A.N (2015) Characteristics of the old and homeless: identifying distinct service needs, *Ageing and Mental Health*, Vol. 21

⁵⁴ Bankwest Curtin Economics Centre (2022) Behind the line: Poverty and disadvantage in Australia 2022, *Focus on the States Series*, No. 9/22, March 2022

⁵⁵ Workplace Gender Equality Agency (2022) Australia's Gender Pay Gap Statistics. Available at

⁵⁶ Grattan Institute (2018) What's the best way to close the gender gap in retirement incomes?

In seeking to prevent an ongoing increase in homelessness amongst older women, State and Federal governments should prioritise efforts to improve women's economic security. To this end, we welcome the NSW Government's Women's Economic Opportunities Review, but note that to address the present insecurity experienced by older women who are no longer able to work, will continue to struggle to find employment, and/or have few working years left to prepare for retirement, the focus must extend beyond economic participation.

1.3.4. Family and relationship breakdown

Family relationships play an important role in preventing homelessness, reducing its duration, and helping people exit homelessness.⁵⁷ Conversely, the breakdown of relationships can heighten an individual's risk of falling into homelessness.⁵⁸

Caseworkers from our homelessness services have observed how a deteriorating relationship between a parent and an adult child is a common precursor to homelessness for older people, particularly when an adult child is also the primary carer for their elderly parent. In part, this relates to failings in the aged care system, discussed in more detail in section 1.4.2 below. The likelihood of being homeless is also much higher for those who separate, divorce, or become widows.⁵⁹

Mary's story

Mary (name changed for confidentiality reasons) came to Australia from Europe and had very few social supports besides her husband and husband's children from a previous marriage. With her husband as the primary breadwinner, Mary found herself with limited financial security following his death. Her husband's children did not stay in contact with Mary following their father's death and Mary found herself moving between different casual jobs to make ends meet. Mary was rejected from social housing because her new job paid her \$5 more a week than the cap, and this was an incredibly stressful time for Mary. As a result of this experience, Mary became depressed and was worried all the time due to the uncertainty of her situation.

After connecting with Vinnies, Mary moved into a property leased by the Society which she has now called home for the last four years. Having now become eligible for social housing she continues to wait for a more permanent solution.

Mary's story shows that many factors can combine to increase the risk of homelessness. In her case, a lack of financial security and social networks, a breakdown in the relationship with her stepchildren, and gaps in the supports available to people who fall outside eligibility criteria all contributed to her experience of housing insecurity.

1.3.5. Social isolation

Friendships, intimate relationships, social connections, and community engagement are protective factors that reduce the risk of homelessness.⁶⁰ Older people may have fewer social ties if they are no longer

⁵⁷ Bevitt, A., Chigavazira, A., Herault, N., Johnson, G., Moschion, J., Scutella, R., Tseng, Y., Wooden, M. and Kalb, G. (2015) Journeys Home Research Report No. 6: Complete Findings from Waves 1 to 6, Melbourne Institute of Applied Economic and Social Research

⁵⁸ Peterson, M & Parsell, C (2020) The family relationships of older Australians at risk of homelessness, *The British Journal of Social Work*, Vol. 50, Issue 5, 1440 - 1456

⁵⁹ Ibid, no. 48

⁶⁰ NSW Government (2018) NSW Homelessness Strategy 2018 - 2023

working, have physical or mental health issues that limit opportunities for community engagement, or have been displaced from their communities.⁶¹

Social isolation can both contribute to, and be exacerbated by, problematic alcohol or other drug use, mental ill-health, and cognitive impairment including dementia, all of which can impact a person's capacity to form and sustain relationships. People from migrant and refugee backgrounds may find it more difficult to form new relationships due to language barriers, differing cultural attitudes towards community, and challenges navigating their new neighbourhoods, while older members of the LGBTIQ+ community may find it difficult to establish relationships or supports in the community due to more conservative attitudes towards sexuality.

The location of people's homes can also limit or support the opportunities they have to build and maintain social connections and access community activities. Residents in one of our social housing sites, for example, told us how important it was to live in an area where they could walk or easily catch public transport to the local supermarket, medical services, their place of worship, and homes of friends and family. The decline in housing affordability means that many people no longer have the choice to live in locations that support access to services and enable the development of community connections.

The St Vincent de Paul Society delivers a range of internally funded social inclusion services for people at risk of homelessness, which can also provide a soft-entry point to other services, as well as opportunities to intervene earlier when people are at risk of homelessness. Similar services have been funded by the NSW Government through the Community Builders program, but funding for this program has not kept pace with population growth and changing demographics.

People 50 years and older who are on low incomes, homeless, or at risk of homelessness, are also eligible for social supports delivered through the Commonwealth Home Support Program. If this program transitions to individualised funding arrangements as currently planned, however, there is a risk that some social inclusion opportunities will no longer be viable as people prioritise more immediate and tangible supports.

⁶¹ Kimbler, K.J; DeWees, M.A & Harris, A.N (2015) Characteristics of the old and homeless: identifying distinct service needs, *Aging and Mental Health*, Vol. 21

Recommendations:

The NSW Government should:

- advocate to the Federal Government for a 30% increase in the maximum rate of Commonwealth Rent Assistance
- consider mechanisms to extend rental subsidies for National Rental Affordability Scheme tenants who will be at risk of homelessness as the Scheme draws to a close
- mandate full implementation of Silver Level Livable Housing Design standards in line with the National Construction Code
- commit to significant and sustained investment in social housing, including leveraging the Federal Government's proposed \$10 billion Social Housing future fund, delivering at least 5000 new social housing homes per annum for the next decade
- increase the supply of affordable housing including through a more rigorous and ambitious approach to mandatory contribution schemes
- strengthen protections for tenants to provide greater security of tenure and introducing a permanent hardship framework so that more renters can stay safely housed and do not exit into homelessness
- increase Specialist Homelessness Service Program funding by 20%
- identify opportunities to address the financial insecurity experienced by a large and growing cohort of older women
- review funding arrangements for programs that support older people from marginalised groups to build and maintain connections with others in the community.

1.4. Challenges older people face when accessing services

This section of our submission responds to Inquiry Terms of Reference (d) and (e).

1.4.1. Accessing homelessness services

Older people at risk of or experiencing homelessness face when attempting to seek help include not knowing what services and supports are available, technological and language barriers that inhibit access to services, and a lack of specialised services tailored to their needs.

During interviews with residents in one of our long-term housing programs, every resident said that except for Centrelink or St Vincent de Paul Society NSW, they wouldn't know where to go for help. Casework staff from our domestic and family violence services also report that many of the older women they assist did not know where to go when they were at risk of homelessness.

The rise in digital service provision has created additional access issues for older people at risk of or experiencing homelessness. Examples raised during consultation included the shift towards Centrepay as opposed to cash rental payments, services that require people to upload documentation, and services where people may have to remain on the phone for long periods of time, such as Link2Home. One caseworker commented *"If you don't have a 'MyGov' account or if you struggle to use phones, people will*

often walk away as it's too hard". Older people with literacy issues or cognitive impairments are finding it particularly difficult to adjust to the shift towards newer technologies. With many older people reluctant to reach out for support for reasons including shame, the stigma associated with being homelessness, and a reluctance to 'burden' the system, any additional barriers to accessing services increase the likelihood that someone will simply disengage.

People for whom English is a second language face additional challenges when seeking to access homelessness services, or any government services and supports, as information and advice is not always available in community languages, interpreters are not always accessible, and there is a lack of bi- or multi-lingual caseworkers.

While Link2Home plays a valuable role connecting people with homelessness services, many of our clients and casework staff report that it does not sufficiently meet the needs of older people. While some of the older people we have assisted did not know about or understand the Link2Home service, for others the lack of face-to-face support was a deterrent to using the service. In addition, the Link2Home service's main focus is people who need crisis accommodation; it does not provide general information on housing options or take a preventative approach, linking people to other supports that they may need in order to stay housed.

Our casework staff also report that some older people we assist are reluctant to access transitional and crisis accommodation services with shared living spaces where they may be required to live alongside people with a range of issues and at very different stages in their lives. These environments can cause stress and anxiety, increase exposure to violence, and exacerbate the risk of relapse for people with a history of substance misuse.⁶² Recognising the value of targeted service provision, the St Vincent de Paul Society has two refuges that focus on supporting older women who have experienced domestic and family violence – one in Western Sydney and one in the Inner West.

In addition, some services are simply not physically accessible to older people, nor are they resourced to respond to the health issues experienced by many older people.

The problems older people experience when accessing homelessness services point to the need for more specialised support, discussed in more detail below.

1.4.2. Navigating a complex service system

"There are always going to be people who fall through the gaps, but there has to be someone to catch them lovingly" - Mental Health Nurse at Frederic House, St Vincent de Paul Society NSW

Nationally, there are very few homelessness services that specialise in supporting older people.⁶³ This means that older people do not always receive the advice and support they need to successfully navigate an extremely complex and disconnected service system.

People over the age of 65 can receive support to stay at home through My Aged Care, but this system is complex, and clients and caseworkers report that they find it hard to understand the services that are available and how to navigate the best options. Recognising the complexity of the system, the Australia Association of Gerontology has recommended that specialist homelessness services be better supported to understand aged care services and make appropriate referrals.⁶⁴

⁶² Canham, Custodio, K., Mauboules, C., Good, C., & Bosma, H. (2020). Health and Psychosocial Needs of Older Adults Who Are Experiencing Homelessness Following Hospital Discharge. *The Gerontologist*, 60(4), 715–724.

⁶³ Thredgold, C., Beer, A., Zufferey, C., Peters, A. and Spinney, A. (2019) An effective homelessness services system for older Australians, AHURI Final Report 322, Australian Housing and Urban Research Institute Limited, Melbourne, <http://www.ahuri.edu.au/research/final-reports/322>, doi: 10.18408/ahuri-7318601.

⁶⁴ Australian Association of Gerontology (2018) Position Paper. Older women who are experiencing, or at risk of, homelessness. Melbourne.

Once a person has registered for an aged care service, they can experience long wait times. In some circumstances by the time services become available, the decline in a person's cognitive and physical capacity means they require additional support and must be reassessed by the Aged Care Assessment Team (ACAT). It can take up to six weeks⁶⁵ to get an ACAT assessment once someone applies, which can further delay the process.

In the interim, individuals may not have access to the support they need if they are unable to pay for it through the private market. A Team Leader within our domestic and family violence service for older women reported that *"no matter how many times we call up, begging for assistance for a client, we are told that they cannot give us an indication of how long the process will be"*. The My Aged Care website acknowledges long wait times to access support, noting that the wait for Home Care Packages can be more than 12 months.⁶⁶

Some older people aged 55-64 may be eligible for support through the National Disability Insurance Scheme (NDIS), yet for people at risk of experiencing homelessness there are many barriers to accessing the scheme. These include lack of documentation, few informal supports, limited involvement with health services and the cost of assessment. Recognising these barriers, the Joint Standing Committee on the NDIS recommended a strategy to engage with people with disability who are homeless be developed, with implementation supported by dedicated Homelessness Liaison Officers. These recommendations were noted but not supported by the Federal Government at the time, who maintained that homelessness was a state responsibility.⁶⁷

For older people who are not eligible for either the NDIS or aged care services, but who have health or other issues that mean are unable to work or live independently without support, there is a gap in services. One caseworker told us that it can feel as though they have no choice but to play a waiting game until a client is old enough to receive the support available to people over the age of 65. While there is some provision for early access to aged care services for people on low incomes, homeless, or at risk of homelessness, this process is not transparent and well understood. This service gap can also mean that some people enter higher care facilities earlier than they would otherwise have needed to, as this can be the path of least resistance when it comes to resolving a person's housing issues.

With gaps in the service system that exist at the intersection of homelessness, aged care, and disability service systems, there is a need to support more flexible responses. The St Vincent de Paul Society's Frederic House is one such example: it is an aged care service that provides a long-term home for approximately 60 men who would otherwise be homeless and are not able to access other services due to their complex medical and support needs. A Mental Health nurse from Frederic House described how the service aims to create an environment *"where people are given the existential freedom to be themselves"*. The level of clinical care required by men who access this service, however, means it sustains significant operational losses and the funding model is not sustainable in the long-term without additional Government support.

Amy's story

Amy is a 76-year-old woman who was referred to the Domestic Violence Response Enhancement (DVRE) program by a hospital social worker due to declining health. She was originally living in community housing with her child who has significant mental health concerns and was the perpetrator of violence towards Amy. When referred to St Vincent de Paul Society NSW, Amy was living in squalor with rubbish,

⁶⁵ HomeCaring Disability and Aged Care Specialists (n.d) How long does it take to get an ACAT assessment once I apply? *All you need to know about ACAT assessments* <https://www.homecaring.com.au/all-you-need-to-know-about-acat-assessments/>

⁶⁶ My Aged Care (2021) What is the wait time for services? <https://www.myagedcare.gov.au/node/1629280>

⁶⁷ Joint Standing Committee on the National Disability Insurance Scheme (2021) General Issues 2021.

food scraps and piles of hoarded magazines and newspapers strewn throughout the property. The tenancy/property she and her daughter were residing in was taken to the NSW Civil and Administrative Tribunal for the lease to be ended due to rental arrears.

Amy received a placement at a semi-supported retirement village through Housing NSW, however, all residents are expected to live independently. She lodged an application for a My Aged Care assessment in early 2022 prior to being discharged from hospital and was given short term out of hospital assistance through ComPacks for shopping and transport. Her My Aged Care reassessment has not been completed and St Vincent de Paul Society NSW caseworkers have made multiple attempts to have this fast-tracked, without any success.

This delay in reassessment has placed Amy at significant risk of physical and cognitive decline. Even though it is outside the scope of their funded service delivery, St Vincent de Paul Society NSW continue to provide transport to medical appointments, shopping and banking assistance, as Amy has no other additional support and without My Aged Care assessment codes, she is unable to access any other services as she is unable to pay privately.

Amy continues to receive ongoing assistance from the St Vincent de Paul Society NSW DVRE program while she awaits her My Aged Care reassessment. Without this support, it is likely that Amy would be readmitted to hospital as she has limited capacity to live independently without assistance. A timely response from My Aged Care would ensure that Amy could live a healthier and more fulfilled life.

1.4.3. Access to housing supports

While housing products and services are important components of the response to homelessness they are not always appropriate to the needs of older people. Caseworkers in our homelessness services highlighted specific issues in relation to the NSW Government's Start Safely Private Rental Assistance Subsidy and access to social housing.

Start Safely

While the NSW Government's Start Safely Private Rental Assistance Subsidy provides valuable assistance to many victim-survivors of domestic and family violence, it does not work well for some older women because they are unable to meet the work and income requirements. The Start Safely Program expects that tenants can maintain their own tenancy after receiving the subsidy for up to 3 years. Once an individual has been approved and secured a property, they are required to demonstrate that they are engaging in work and study requirements roughly every three months. If they do not meet these requirements, there is a risk that the Start Safely subsidy will be taken away. There are a range of factors that impact an older person's capacity to engage in education and employment (outlined in section 1.4.4 of this submission), that can make it hard for older women to meet these requirements.

Social housing

While social housing is an effective pathway out of homelessness⁶⁸ it is not always suitable for older people. Some dwellings are not physically accessible, do not meet specific health and social needs (for example, people with agoraphobia may be unable to use lifts), or are not located close to services and shops. With many older people lacking access to transport, proximity to public transport is particularly important.

⁶⁸ Writer, T., Barnes, E., Hartley, C., Wearing, A. Social Housing in New South Wales: Report 2 Future Impact, (2022), Sydney: Centre for Social Impact

Further, the residualisation of social housing means that some social housing sites house high concentrations of people with complex social issues, and this does not provide a safe and secure environment for older people who may have pre-existing vulnerabilities. As outlined above, significant new investment in social housing is required to meet high and growing unmet need and ensure the social housing system has capacity to provide support suitable to all cohorts. In delivering new social housing, the NSW Government should ensure both social housing infrastructure, and allocation policies, meet older peoples' needs.

Beverley's story

Beverley, a resident now housed in one of our social and affordable housing sites said that after waiting ten years for a home, she was apprehensive to learn that she had received a social housing property in a very rough part of the Lake Macquarie region. When she went to view the property, other residents warned her not to move in as it was too dangerous. One resident showed her injuries he had received after having been physically assaulted by younger residents in the complex. She said she was terrified and had to turn down the property. This resident stressed the importance of a safe place to call home and appropriate housing for older people.

1.4.4. Lack of education and employment pathways

That older people face barriers to employment has been widely recognised, and older people experiencing housing instability or homelessness face additional challenges, particularly if their history of homelessness is lengthy.^{69,70,71} This makes it harder to successfully prevent homelessness and support people to regain financial independence.

Factors that contribute to the lack of education and employment pathways for older people include physical and mental health issues that may affect an individual's ability to attend training, job interviews or work,^{72,73,74} long periods of unemployment meaning that a person's skills have not been retained or that their experience is no longer valued in the workplace, and discrimination against older people and people who are experiencing homelessness.^{75,76}

Considering this, our services note a gap in specialised education and employment pathways for older people who have experienced homelessness. More tailored education and employment programs⁷⁷ such as technical and vocation training may assist older people at-risk of or experiencing homelessness to

⁶⁹ Australian Housing and Urban Research Institute. (2019). *Supporting older Australians experiencing homelessness*.

<https://www.ahuri.edu.au/sites/default/files/migration/documents/PES-322-Supporting-older-Australians-experiencing-homelessness.pdf>

⁷⁰ Hanover Research Services National Institute of Labour Studies Flinders University, Adelaide, Australia. (2011). *Finding Work: Homelessness and Employment*. <https://cms.launchhousing.org.au/app/uploads/2011/04/Finding-Work-Homelessness-and-Employment-Research.pdf>

⁷¹ At Work Australia. (2021). *Long Term Unemployment Research Findings*. <https://www.atworkaustralia.com.au/wp-content/uploads/2021/08/atWork-Australia-Long-Term-unemployed-flyer-FINAL.pdf>

⁷² Burns, Leduc, J. D., St-Denis, N., & Walsh, C. A. (2020). Finding home after homelessness: older men's experiences in single-site permanent supportive housing. *Housing Studies*, 35(2), 290–309. <https://doi.org/10.1080/02673037.2019.1598550>

⁷³ Brown, Goodman, L., Guzman, D., Tieu, L., Ponath, C., & Kushel, M. B. (2016). Pathways to Homelessness among Older Homeless Adults: Results from the HOPE HOME Study. *PloS One*, 11(5), e0155065. <https://doi.org/10.1371/journal.pone.0155065>

⁷⁴ Australian Human Rights Commission. (2008). *Homelessness is a Human Rights Issue*. https://humanrights.gov.au/our-work/rights-and-freedoms/publications/homelessness-human-rights-issue#6_6

⁷⁵ Burns, Leduc, J. D., St-Denis, N., & Walsh, C. A. (2020). Finding home after homelessness: older men's experiences in single-site permanent supportive housing. *Housing Studies*, 35(2), 290–309. <https://doi.org/10.1080/02673037.2019.1598550>

⁷⁶ Kimbler, DeWees, M. A., & Harris, A. N. (2017). Characteristics of the old and homeless: identifying distinct service needs. *Aging & Mental Health*, 21(2), 190–198. <https://doi.org/10.1080/13607863.2015.1088512>

⁷⁷ At Work Australia. (2021). *Long Term Unemployment Research Findings*. <https://www.atworkaustralia.com.au/wp-content/uploads/2021/08/atWork-Australia-Long-Term-unemployed-flyer-FINAL.pdf>

increase their chances of employment.⁷⁸ Initiatives that promote collaboration between employers, social welfare, accommodation providers and older individuals experiencing homelessness may also foster more supportive workplace environments and increase workplace retention.⁷⁹ Strategies that have been identified to better integrate people experiencing homelessness into the workplace include transitional jobs; supported employment; alternative staffing and customised employment.⁸⁰

Recommendations:

The NSW Government should:

- invest in raising awareness amongst older people about how to access help, including supporting soft-entry points for groups at higher risk of homelessness
- ensure homelessness services and housing products are better able to meet the needs of the growing cohort of older people experiencing or at risk of homelessness
- investigate service gaps for older people at risk of homelessness who are not able to access the NDIS or aged care services, and work with the Federal Government to identify and implement solutions
- invest in education and employment initiatives tailored to meet the needs of older people experiencing homelessness.

1.5. Services to better prevent and address homelessness amongst older people

This section of our submission responds to Inquiry Terms of Reference (c) (d) (f) and (g).

Below we outline opportunities to improve access to homelessness services for older people, and the effectiveness of housing and homelessness interventions. We note, however, that the success of any homelessness initiative is heavily dependent on the availability of safe, secure, and affordable housing. Recommendations to improve access to affordable housing are outlined in section 1.3.1 of this submission.

1.5.1. Improved access and referral pathways

In our consultations with frontline homelessness workers, there was general agreement that more specialised support is required in response to the growth in homelessness amongst older people, and that opportunities for face-to-face contact should be enhanced.

To make it easier for older people to navigate the service system, there was support for a ‘one-stop-shop’ approach; that is, a service that could provide:

- early intervention and prevention support for individuals at risk of housing instability in the future if financial, social or health issues are not addressed

⁷⁸ Australian Human Rights Commission. (2008). *Homelessness is a Human Rights Issue*. https://humanrights.gov.au/our-work/rights-and-freedoms/publications/homelessness-human-rights-issue#6_6

⁷⁹ National Alliance to End Homelessness. (2013). *Overcoming Employment Barriers*. <https://endhomelessness.org/resource/overcoming-employment-barriers/>

⁸⁰ Ibid.

- information and referral services, not only for people immediately at-risk of or experiencing homelessness
- help with navigating other services that may assist older people including the NDIS, access to ACAT assessments, or My Aged Care
- increased awareness of how to access help by promoting services through services accessed by older people to information in the community by promoting services through ‘soft-entry’ points such as medical centres.

To help guide the development of a ‘one-stop-shop’ response to older people at risk of or experiencing homelessness, one model we can learn from is the *Home at Last*⁸¹ service which offers free and confidential advice, support, and advocacy for people over the age of 50 who are homeless, at risk of homelessness, wanting to plan their housing future, or on a low income with low assets. The program includes access to support not only by phone, but also via a drop-in Housing Information Centre in Melbourne, as well as access to interpreters, where required.

1.5.1. Specialised housing and homelessness services

As outlined earlier in this submission, older people at-risk of or experiencing homelessness face a range of challenges when attempting to access crisis, transitional and long-term housing. Social housing is not always suitable for older people, with some dwellings not providing sufficient accessibility, and others not able to meet specific health and social needs. Navigating the varied pathways and support options available also proves difficult for the ageing population, and this is exacerbated by a lack of face-to-face assistance. The *Wintringham* model in Victoria proposes some ways to address these challenges.

*Wintringham*⁸² is a not-for-profit organisation providing care and support for older people over 50 years and was funded to establish a range of coordinated housing services to older people living in poor and insecure living conditions. *Wintringham Housing* offers a range of accommodation options including full care accommodation; supported accommodation for people who want access to 24-hour support, and affordable tenancies in areas deemed safe across Melbourne and Regional Victoria. *Wintringham* fosters communal living and social connectedness through their supported accommodation options, and advocates for the rights of the elderly poor and homeless to achieve equality and social justice.

1.5.2. Tailored support to keep people housed

Many older people require support to remain housed, yet as described above this support is not always available, even for people living in housing targeted to people at much greater risk of homelessness.

The NSW Government’s Social and Affordable Housing Fund (SAHF) is unique in that it ties the provision of housing to tailored support. Over the past five years, the St Vincent de Paul Society NSW has delivered 502 social and affordable housing units through this initiative which has transformed hundreds of people’s lives. The Manager of one of our SAHF sites said that he saw “*people go from being homeless and helpless, to being happy, hopeful and helping others*”. In a consultation with older residents in this site, participants emphasised the important role that tailored support services have played in helping them to maintain their tenancies. In addition, people commented on the sense of community, with residents meeting for fortnightly morning teas and regular barbecues, and said they felt safe in their neighbourhood.

⁸¹ Housing for the Aged Action Group [HAAG] (2022) <https://www.olderrentals.org.au/i-want-change/about-haag/home-at-last-model>

⁸² Wintringham Housing Ltd (2022) <https://www.wintringham.org.au>

The St Vincent de Paul Society NSW Society was also a participant in the Sustaining Tenancy Social Housing pilot project, a DCJ-funded initiative that aimed to provide support to social housing tenants where there was a significant risk of tenancy failure. Through the pilot project, caseworkers were able to develop better rapport with participants, many of whom had a long history of being hard to engage, and strengthened supports and referral pathways with stakeholders and services. People assisted through the project became increasingly open to support, accepted referrals to other appropriate services, and were able to identify its benefit to their tenancy. The project highlighted the value of frequent client service visits or other forms of engagement, particularly for people over the age of 50 who made up 53% of referrals.

While both these initiatives illustrate the benefits of providing additional support to tenants at risk of homelessness, many have little or no regular engagement with caseworkers. For older people, this can mean that a deterioration in physical health, mental health or cognitive capacity may not be detected early enough to reduce the risk of homelessness.

Recommendations:

The NSW Government should:

- invest in improved access and referral pathways for older people who are at risk of or experiencing homelessness, providing for both over the phone and face-to-face access points
- extend the provision of tailored support to a wider cohort of people in social housing or subsidised private rentals who would otherwise be at-risk of losing their tenancies.

Conclusion

There are a range of factors that increase the risk of homelessness amongst certain cohorts of older people over the age of 55, yet there are significant gaps in responses tailored to meet their needs.

The St Vincent de Paul Society therefore supports greater investment in ensuring the homelessness system, and related services and supports, are better able to intervene earlier, and support older people to connect with and navigate relevant services. Accompanying this, the NSW Government must recognise and respond to the broader challenges that exacerbate someone's risk of homelessness, including the rising cost of living, housing unaffordability, and an insufficient supply of age-appropriate social housing.

We hope the information provided in this submission assists the Standing Committee on Social Issues in its deliberations on this important issue. Should you have any questions about this submission, please contact Rhiannon Cook, Manager, Policy and Advocacy