

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

Organisation: Older Women's Network NSW

Date Received: 13 June 2022



SUBMISSION

NSW UPPER HOUSE STANDING COMMITTEE ON SOCIAL
ISSUES INQUIRY INTO HOMELESSNESS AMONGST OLDER
PEOPLE AGED OVER 55 IN NEW SOUTH WALES.



Acknowledgment of Country

We acknowledge the traditional custodians of the land on which we work and live, and we pay our respects to Elders past and present.

We acknowledge the sorrow of the Stolen Generations and the impacts of colonisation on Aboriginal and Torres Strait Islander peoples.

OWN NSW supports the Uluru Statement from the Heart, the call for a First Nation's Voice enshrined in the Australian Constitution, and a Makarrata Commission to oversee agreement-making and truth-telling.

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EXECUTIVE SUMMARY

This submission to the NSW Upper House Standing Committee on Social Issues Inquiry into Homelessness Amongst Older People Aged Over 55 in New South Wales, is on behalf of all those older women working with OWN NSW.

We are older women, working almost exclusively with older women. The experiences we describe here are mirrored by the experiences of all workers in the 12 frontline services, as detailed in our joint Ageing on the Edge submission to this Inquiry.

For this submission, we have documented a contemporary snapshot of the day-to-day personal experiences of our staff, volunteers, and our members. We want to bring the Committee's attention to the urgency of this problem. It is not only older women who are homeless who are traumatised, but also those of us on the frontline. We are all suffering unsustainable levels of anxiety and stress with each phone call and encounter with a homeless older woman.

We endorse wholeheartedly all the recommendations from the Ageing on the Edge Submission to the Inquiry into Homelessness Amongst Older People Aged 55 and over in NSW and add our own recommendations, from frontline workers for OWN NSW.



KEY RECOMMENDATIONS

As part of the Ageing on the Edge NSW Forum, we call on the NSW government to:

1. Fund a **specialist older person's housing information and support service** that comprises an early intervention and crisis response.
2. **Lower the priority age** for social housing eligibility from 80 years old to 55 years old.
3. **Build 5,000 social and affordable homes** per year for 10 years, at least 20% of which should be dedicated to people 55 and older.
4. Adopt **concrete measures to address ageism, sexism, gender and disability discrimination** in government services, finance institutions, including banks, and private rental markets.
5. **Remove unnecessarily burdensome requirements**, such as, completion of 'job seeker diaries' to maintain temporary accommodation imposed on older people.
6. **Increase transparency and accountability** by improving data collection including:
 - Social and priority housing waiting list data broken down by age, gender, disability status and geographic area
 - The number of social and affordable housing dwellings available in NSW, including age and gender breakdown of allocations
 - The number of dwellings assigned under State Environmental Planning Policy
 - The number of dwellings built under the NSW Homelessness Strategy 2018-2023, the Social and Affordable Housing Fund (SAHF) and the Community Housing Innovation Fund (CHIF) (Housing for Seniors and People with a Disability) (Seniors SEPP) and the Public Housing Seniors Communities (PPOPH)
7. **Provide exemptions** to strict documentary evidence for housing applications, including identity documents, especially for Aboriginal and Torres Strait Islander people, older people from migrant and refugee backgrounds and older women escaping domestic and family violence.
8. **Adopt mandatory minimum accessibility standards** contained in the revised National Construction Code for all future constructions in NSW.



OWN NSW RECOMMENDATIONS

In addition, OWN NSW recommends the NSW government acknowledge the urgency of this situation and immediately:

1. Adopt a **Housing First approach to dealing with homelessness**. This is a model which prescribes safe and permanent housing as the first priority for people experiencing homelessness. It is delivered with a wraparound service of a multidisciplinary team of support workers who can help address complex needs through services like drug and alcohol counselling or mental health treatment. It is important to note that the individual's engagement with these support services is not required for them to maintain accommodation.
2. Provide **additional health care and long term counselling** services for older people, especially older women, impacted by homelessness and housing insecurity. This is in recognition that homelessness and the risk of homelessness lead to a myriad of health problems, including mental health issues.
3. Allocate **specific and targeted funding to Indigenous women**, giving the leadership, responsibility, accountability and decision-making power to Indigenous women, and Indigenous women's organisations.
4. Draft a **comprehensive plan and effective strategy to support those displaced by disasters** (including fires, floods, pandemic) with adequate funding allocated to portable, moveable, temporary accommodation villages and more permanent, well planned 'transition' villages.
5. Allocate **targeted funding** for public sector and community-based NGOs **to enable employment of older women** in agencies dealing with older women, and to upskill frontline workers (including police) in responding to the specific needs of older women.

6. **Ensure all community centres, hospitals, health centres and GPs are linked to community hubs** where they can be provided with information and advice about the referral and housing options for older women experiencing homelessness.



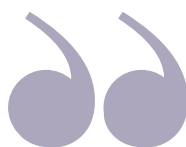
You're constantly, when you are case working, the first question you have is, "are they ready for that engagement?"

Because unless people are ready to try and make some kind of change, it's very, very difficult. So with case management, you are working with someone who is ready. They're turning up to a meeting. They're, saying, "Yeah, I wanna get these things. I wanna get housing", and I want to link them with these supports.

So you've already got someone on your side, but the frustration around it is twofold. One, there are so many obstacles, like particularly with street homeless people who are generally dealing with the most complex issues and also the ones that have come through the most significant trauma. Like everyone who is homeless has faced trauma, but those who are on the street usually have.

You have such horrendous trauma and I think most street homeless people have had at least six or seven significant trauma issues or moments in their lives, so they are ready. But then there are not the avenues available for me to get them what they want, no matter how hard they're working.

Catherine Hill, Director "Some Happy Day"



INTRODUCTION

We are heartened by the commitment demonstrated by the NSW government and members of the Standing Committee on Social Issues in initiating this landmark inquiry. Over the past decades, OWN has had invaluable support from successive NSW governments. We have worked alongside very impressive and committed members of the NSW Parliament who have listened carefully and incorporated our suggestions into policies and practices.

There are many research papers we can quote to provide the economic case for public and social housing; as well as numerous studies on gender inequality and its contribution to older women's homelessness. As these will be at the ready disposal of the Committee, we will instead provide the Committee with our experience as an NGO working at the grassroots on what it is like to have to deal with homeless older women.

This submission represents the views and experiences of older women working with OWN NSW. Firstly, we provide an overview of OWN's work on housing and homelessness to demonstrate our commitment to this area over the decades. We then provide a snapshot of the day-to-day personal experiences of our staff, volunteers, our members, with a selection of stories from older women who have contacted us recently. All these provide the background to our specific recommendations, which are in addition to those made in the Ageing on the Edge forum's submission. We believe that these recommendations, if implemented, would assist in reducing homelessness amongst older women and also tangibly reduce the stress of those working in this sector.





We also see a whole lot of older women now. I worked on Saturday last weekend. I had two older women, one who was in her 80s. One was in her 70s, who were getting moved out of their family home.

One was moved out by her niece. We're seeing a lot of elder abuse, even though they don't articulate it when we're going through our framework of questioning risk assessment, so we're checking that they are going to be OK in a motel.

What they're telling us looks clear to me that it's elder abuse ... I had a woman who moved from Sydney to Melbourne because her sons had convinced her to sell her property and she moved in with one of them and it lasted 3 months and she was out in Melbourne ... She was encouraged to do this by her family, and now she's homeless.

Catherine Hill, Director "Some Happy Day"



OVERVIEW OF OWN'S WORK ON SOCIAL ISSUES ON OLDER WOMEN AND HOMELESSNESS

OWN NSW is a community-based organisation run by dedicated volunteers. We have been a strong, and consistent voice for older women in NSW for more than 35 years and have been at the forefront of change, activism, and advocacy. Over this time, we have witnessed a growing concern for older women, and widespread agreement between OWN NSW, the NSW government, NGOs, local councils, community-based organisations, and older people, that older women are facing insurmountable structural barriers and are at increasing risk of homelessness. We are all committed to working together to support older women and ensure that they can access long term, safe, high quality, sustainable accommodation where they can age in place.

In 2009, we published *The Disappearing Age* which highlighted the failure of the policies and responses to dealing with older women who are experiencing domestic and family violence. It was the first research report in Australia to draw public attention to the growing number of homeless amongst older women. We were puzzled and disturbed by the fact that although the evidence indicated that one in four women who have experienced an incident of physical violence in the past 12 months was aged 45 years and older (Australian Bureau of Statistics, 2006), public policy responses did not reflect this fact. Earlier studies we conducted informed us that older women were still experiencing shocking and disturbing violence despite their age (Mears and Sargent, 2002; Sargent and Mears, 2002).

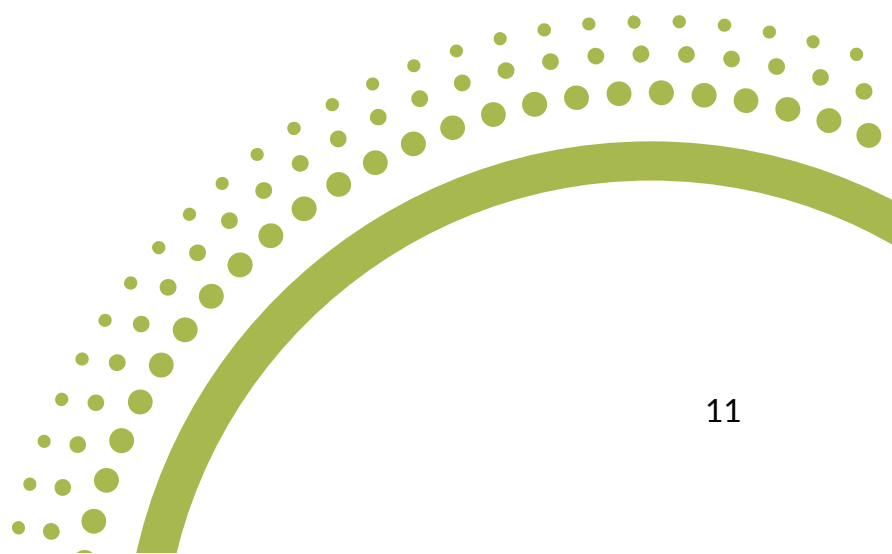
We found that as we had expected, the violence experienced by older women could also be more subtle and systematic. Older women were not showing up in the official figures on violence against women. However, they were increasingly appearing in the unpublished databases of homelessness service providers, as refuge residents, in medical screening programs, at hospital Emergency departments, long term inpatients in general hospitals, in prisons, psychiatric centres and in many other unexpected databases. We had brought the increasing numbers of older women at risk of homelessness to public attention and highlighted the urgent need to improve the capacity of the domestic violence, aged care and homelessness service systems to provide compassionate and sensitive support designed to meet the needs of older women.

Our next pathbreaking project, *It Could Be You* (2010), set out to listen respectfully to older women's stories and to give these women a voice. We spoke to women experiencing homelessness, as well as service providers for the project. We found that contrary to expectations, these were women who had been in paid work most of their lives or who have been carers, who were unexpectedly plunged into poverty, and subsequently homelessness, due to circumstances beyond their control. Contrary to the stereotype perpetrated of older women, all these women were courageous, principled and resilient, and had a range of valuable knowledge and experience. This was the first time that most of these very traumatised women had shared their stories. They were embarrassed, ashamed and blamed themselves because they did not see the systemic and structural barriers which facilitated their fall into homelessness.

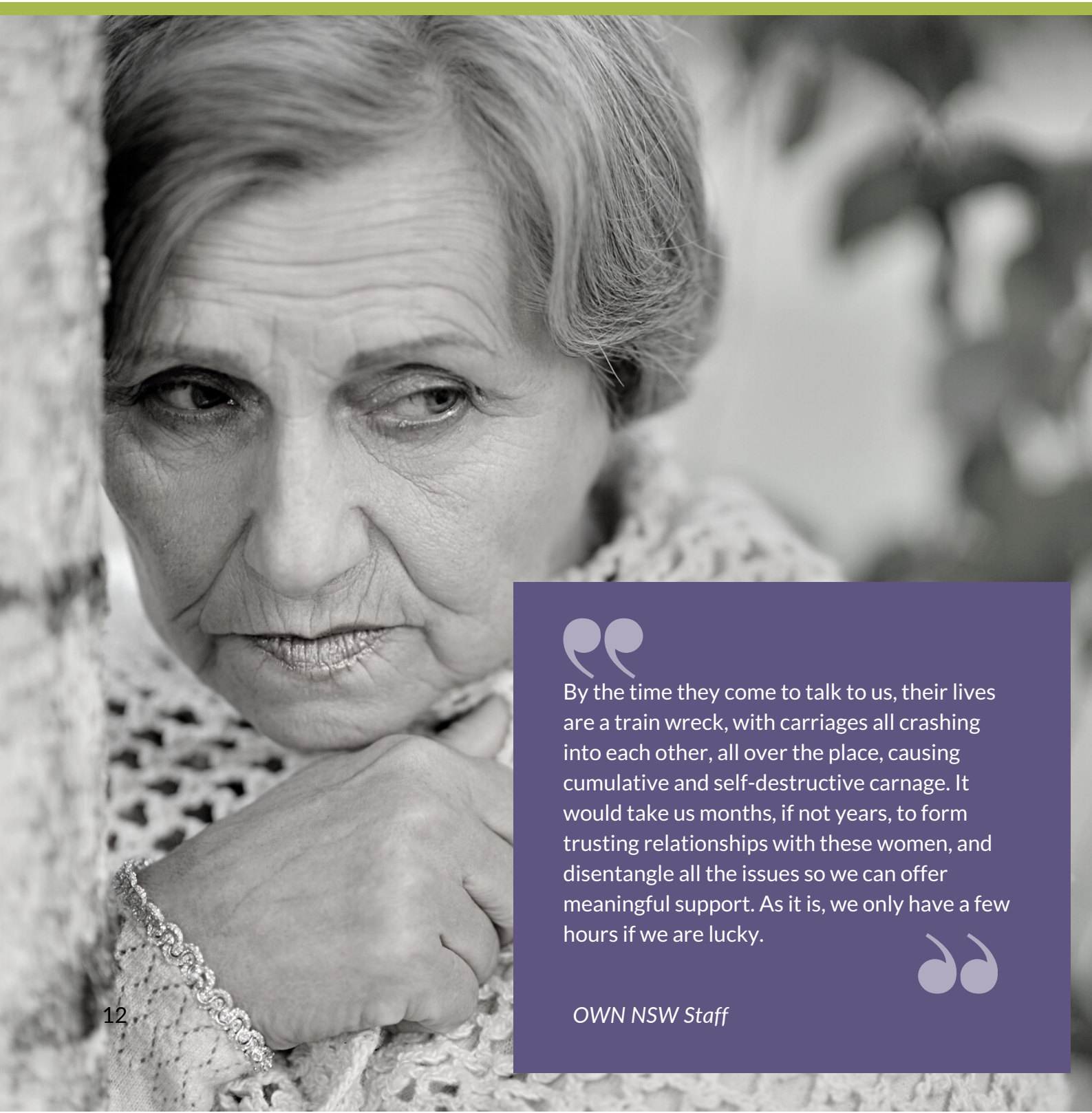
Their stories told us that even though they had been struggling to survive all their lives, only a few had previously experienced homelessness. For the majority, this was the first time they had become homeless. They had become homeless due to factors outside their control; losing their job was the most significant blow. This came about through being sacked, laid off or made redundant. Also, featuring prominently as factors that had plunged them into homelessness were disabling accidents, relationship breakdowns, as well as chronic and sudden illness. All these unexpected turn of life events could happen to anyone, hence we called this report, 'It Could Be You.'

In 2020 we wrote a policy brief, *Older Women in Australia: Housing Insecurity and Homelessness* (OWN, 2020), recommending concrete ways to respect the human rights of older women, and initiate social change. It presented an overview of the structural and gendered risk factors and vulnerabilities which lead to housing insecurity that older Australian women experience.

To date, very few of our policy recommendations on these issues have been systematically adopted by governments.



We are currently working on a project titled 'Ready to Listen' related to older women's expectations of safety in aged care. A survey of older women seeking their views has been completed, as well as a workshop. Our findings so far are that overwhelmingly, older women want to stay and age in their own homes, in communities where they have friends, family and established networks. The issue of safe, secure, affordable long term housing for older women is therefore also important from the perspective of aged care, and ageing in place.



By the time they come to talk to us, their lives are a train wreck, with carriages all crashing into each other, all over the place, causing cumulative and self-destructive carnage. It would take us months, if not years, to form trusting relationships with these women, and disentangle all the issues so we can offer meaningful support. As it is, we only have a few hours if we are lucky.



OWN NSW Staff

OWN NSW'S CONTRIBUTION TO THE AGEING ON THE EDGE SUBMISSION TO THE INQUIRY

OWN NSW has been an active participant and member of the coordinating committee of the Ageing on the Edge Forum. We have actively supported the work of the Forum, and been involved in raising awareness about homelessness of older women through webinars, and face to face events.

We have worked closely with Housing for the Aged Action Group, and most recently held a webinar prior to the federal election with independent candidates to gauge their perspectives on ending the homelessness of older women.

Our focus on housing and homelessness of older women also featured in our 2022 International Women's Day online event which we held with Housing Action for the Aged, Everybody's Home and Equality Rights Alliance. Called "Housing 4 Equality: Putting Women's Housing on the Agenda", it highlighted the fundamental point that without safe, long-term, secure, affordable housing, equality for women cannot be achieved.

Our commitment to the joint effort of Ageing on the Edge forum to improve housing outcomes for older people has seen us provide resources to further the objectives of the coalition. This included hosting two gatherings for older women with lived experience to tell their stories, in person as well as online. We also helped with transcribing these discussions; as well as the interviews held by the AOTE lead in NSW with older women with lived experience.

OWN NSW's submission is informed by our long experience, interactions with homeless older women, and research, as well as the recent community consultations with older women with lived experience of homelessness.

Despite decades of research, advocacy and discussion and widespread agreement, there have been no substantive state-wide structural supports put in place in NSW for older women experiencing, or at risk of experiencing homelessness. We are therefore hopeful that this inquiry will make the right recommendations to end the status quo.

AN NGO PERSPECTIVE FROM OWN NSW

OWN NSW provides a wide range of community-based activities, advocacy, assistance, and support for older women across NSW and have built an organisation for and by older women, with decades of experience, knowledge, and understanding of the ways to support older women.

We have a small number of paid staff positions (3 EFT). They work well beyond the hours they are paid and perform way above their pay grade under extremely stressful conditions. We rely heavily on volunteers who form an army of experienced, well qualified, knowledgeable older women who work with our paid staff. Most of these volunteers are not in the paid workforce, and many are struggling to survive.

Most recently, from November 2019, OWN members, paid staff and volunteers experienced wave after wave of trauma and severe disruptions. First, we experienced the worst bushfires ever recorded in New South Wales, then the ongoing COVID pandemic, followed by the worst floods ever recorded in the state. The resurgence of COVID with the spread of the Omicron variant, with the worst influenza season we have experienced for many years have impacted us all. None of us have been exempt from these tragedies. On a practical level, there are ever increasing calls on our time, with a seemingly endless number of older women seeking our help and support.



These disasters have impacted more on older women than on any other group in the community. We have been witnessing thousands of older people, our mothers, grandmothers, fathers, and grandfathers, in the aged care system, especially in residential aged care facilities, as well as those in receipt of home care packages, getting very sick and dying from COVID and influenza. It is shocking to think that so many died alone of COVID and neglect. The level of trauma that this has inflicted on all of us, with loved ones in care, cannot be over-estimated.

This is the backdrop in which we are dealing with the tsunami of homeless older women. Not only is homelessness traumatic for the vulnerable older people who are unable to access services in their communities, it is also traumatic for those of us who are trying to help them. We do the very best we can, but we are all exhausted from banging our head against the brick wall because that is what it feels like when we cannot find long term housing for these women. It is inhumane that we are allowing older women to become homeless when the solution is available. To punish these women by allowing them to become homeless because they do not have enough money to buy a house or to rent in the private market is insanity. One woman with lived experience of homelessness told us that "this is all so unnecessary" and questioned why she is made to suffer. It is a question we frequently ask ourselves, knowing that it is a rhetorical question.

All the women seeking our help are deeply traumatised. Some carry the burden of years of suffering sexual assault and abuse, including from childhood; domestic violence, chronic illnesses and a wide range of mental health issues. Older women do not know where to go for help; and even more worrying, frontline service providers have no idea where to refer them. The reality is that there is nowhere for these women to go and be given the time and the support they need.

Our experience working with older women looking for housing, as well as those dealing with other issues, tells us that it is not enough to just give them a phone number to call. They have complex stories to tell, and often exhibit problematic behaviour which time-poor agencies have no capacity to deal with. We recall one older woman who is homeless and living in a motel with her daughter who is her carer. She would not divulge her real name, nor tell us her phone number, and would not come into the office. We had to meet her on her own terms, in a park, and to gain her trust before she told us what her story is. Even then, she wanted to keep telling her story again and again, and to meet up repeatedly. We do not have the resources to provide case management, nor to engage with her to get her to the stage where she can accept help. Our staff did as much as they could, even going so far as to meet outside of working hours without getting paid, but it was just not sustainable.




Before the pandemic, we got regular visits from a homeless older woman. She has no family or friends. She carried her possessions in a backpack. I don't know what her history is and didn't want to ask before I could build that trust. We were getting to that point, then the pandemic hit. We haven't seen her since and I often wonder what happened to her.

She was so thin. She told me that she prefers to sleep in Central Station, or on a train, than in the boarding houses because she could not stand the drug use and violence there. She had her phone stolen in one of them. She said, "I just want some place where I can live". She didn't want to go to crisis accommodation. She said, "What's the point? I get moved along after that".

I managed to get her a place with B Miles, because obviously, like any person who has been homeless for a while, she has mental health issues. She also used to serve in the armed forces. Well, that didn't work out because she refused to go there. It was a safe refuge, with only women, but it didn't have a place for her to smoke. I'm not talking about weed, or illegal stuff. Just plain cigarettes. That refuge didn't have a place for women to smoke, except outside the premises. The problem is that they locked the doors at 11pm. She didn't want to be locked in at night, and not be able to have a smoke. It was just too much for her.

OWN NSW Staff





Our work with homeless older women have shown us that a Housing First solution is essential. Housing is a human right, and the Housing First concept means that permanent housing is provided without a test of having to be 'housing ready'. It prioritises getting people quickly into stable homes, and then providing the wraparound service they require in the format that they choose. There are many studies which have shown it saves taxpayers money to house the homeless. Savings are made in the reduced costs to the justice and health system, and more importantly, it improves the wellbeing of those who are housed (AHURI, 2018).

One of our recommendations is for additional health care and long-term counselling for older women who are impacted by housing insecurity and homelessness. It is clear to us that these women have chronic health conditions which are exacerbated by their living situation; as well as mental health issues. We must recognise that having homeless people is actually an enormous cost not only to the individuals concerned, but also to the system; and everything possible must be done to support those who are already victims, while stopping people from falling into homelessness in the future. It is clear to us that homelessness drives people to drink and drugs in order to cope with their situation, to numb their pain, to forget their troubles and to deal with their trauma.

Our work in this area has also demonstrated that our current response to older women who are homeless, or becoming homeless, does not work and is not fit for purpose. We highlighted one of the stories from OWN NSW staff regarding her interaction with a homeless older woman who refuses to go into emergency or transition housing because all she wants is long term, secure housing. This particular older woman spends a couple of nights in a backpackers motel, and the rest of the nights either sleeping on trains, or in Central Station. This is preferable to staying in a boarding house where she says she feels unsafe. She has nothing in common with the younger, drug taking youth in these places. Her only vice is smoking cigarettes. It is ironic that having found safe refuge for her in a B Miles program, she refused to go there. She found out that she will be locked in the premises between 11pm and 7am, and unable to go outside for a smoke. We understand that B Miles had to take that decision to keep the inhabitants safe, and while this is appropriate for women who do not have a smoking habit, it excludes those who do.

We cannot stress enough how difficult it is to assist older homeless women with complex needs. A social worker from a hospital contacted us looking for safe accommodation for her client, an older woman.



I have been working with a 66-year-old woman for 2 years, who has metastatic breast cancer, which has metastasised to her bones. She is very unwell, is in significant pain and has great difficulty walking and getting around. She also has suffered significant trauma in the past and now is chronically depressed and has PTSD and generalised anxiety. She drives everywhere but does not have a disability parking permit.

I managed to get her onto the priority housing list last year and since then she has been offered 5 properties. The first 2 or 3 properties were completely unsuitable for her needs, so I managed to have her rejection of these properties not recorded. The housing officer at [LOCATION] has worked really hard to find her a suitable property but the last couple of times she has booked a date and time for lease signing and collection of the keys, she hasn't been able to get a carpark to pick up the key, due to construction work in [LOCATION], and has panicked and abandoned the offer.

She has an offer on the table today, but she is saying she is too worn down and overwhelmed to accept it. She would rather continue living in her sister's home. The home is squalid, and her sister is abusive. Alternatively, she will move into her car (she had been living in her car when we first met a couple of years ago). The last two years have been a monumental struggle for her. During this time she has become sicker and sicker.

If only I could have taken her 2 years ago to a well-resourced frontline service provider, well networked into local services, who could immediately find her a home where she could enjoy living for the rest of her life. Once she had a place to call home, she could then receive support services, a disability sticker, rehabilitation, and ultimately palliative care services in her own home.



The social worker in that situation described in Page 18 wanted to know if someone in OWN NSW could accompany this older woman, and help her. Unfortunately, OWN NSW does not have the resources to provide the support all these older women need. We are not funded to be a frontline service provider, a case manager, or to be a referral service for that matter, but we have taken on the latter role. We have found that it takes a lot of time to follow up and to help these women. OWN is caught in bind. We have distressed older woman needing help urgently and we want to assist them, but they do not want to live in crisis accommodation, inappropriate, transitory accommodation, or unsafe boarding houses and there are no accessible stable, short or long term, safe housing options available. Consequently, older women are often having to 'choose' to return to couch surfing, living in cars, and trying to be invisible to stay safe. Staff get demoralised and distressed because hearing these personal stories have an impact, especially when there is no positive outcome.

This story of the older woman with cancer illustrates that it takes more than a phone call to provide support to older women who are homeless/housing insecure. What we have found is that it takes more than a phone call. They wish us to be there for them as they battle an unsympathetic bureaucracy; and to help them navigate the system. This is why the proposal of a specialist housing service for older people is necessary.

OWN NSW wishes to make the obvious point, but one which has not been widely accepted (including by the NSW government) that many of these emergency/crisis accommodation and transition housing options are not designed with older people in mind. Many are not accessible, and are not safe for older people. This is why one of our recommendations is for a minimal building code be implemented for accessibility because it assists not only those who are older, but also young mothers with prams, as well as people with disability, to access housing.





My marriage has ended after 40+ years, I was fortunate to be taken in by a friend (temporarily). I am storing my belongings. I cannot afford to rebuy/resettle in the same area where I have been living for decades.

Life can change in a heartbeat. We need to be prepared to move, if need be, move out of your comfort zone, to secure a home. However, it is certainly not at all easy to secure homes/rental wherever you look.

Homelessness is sadly everywhere. Where I had been living on the South Coast of NSW it is certainly at crisis point, up the North Coast where my family lives, it's just as bad, and unaffordable for me to buy - same on the central coast, along with other areas in NSW where family live. It simply came to where can I afford to buy. I have had to look further afield, a 6-hour drive inland to afford to buy another property. Away from friends and family and my trusted medical team. As someone with chronic medical needs it will be extremely difficult to re-establish those connections again. I am a disability pensioner and will be making a brand-new start.

Renting anywhere, it's near impossible. What did someone once say: 'life wasn't meant to be easy'? However for so many, life 'not being easy' means living in mouldy tents, vans, in their cars, under bridges and couch surfing. This isn't good enough. We need more 2 bedroom-like demountable classrooms, home style accommodation, that can be utilised in times of natural disasters such as fire, floods, and so on, to set up instant towns on vacant land, with own power sources, etc, to assist. These instant towns can also be used for homelessness, giving people the opportunity to have somewhere safe to live, shower, gain counselling, and prepare to seek work should this be an issue, calling on volunteers to assist in these communities from within the residents and others. To assist those through these difficult times. Thank you for listening. I'm one of the lucky ones really.

OWN NSW Member



Most recently, OWN NSW was involved in an initiative to send a 'Love in a Bag' to older women in Lismore and surrounds who have lost their homes, or have had their homes damaged in the recent floods. As we do not have a group on the ground in the area, we relied on the Koori Mail, as well as the Country Women's Association there to assist us in the distribution of the bags. The CWA told us that it was taking longer than expected to hand out the bags because the older women wanted to talk, and share their stories. They were all traumatised, and some remain homeless.

There is no question that this recent natural disaster has highlighted how critical it is to have a plan and a strategy on how to assist those who have lost everything in the floods. The same applies for any other natural disaster. It is beyond comprehension that so many months after the disaster that people remain homeless. We would like to highlight that every decision made regarding rescues and rehabilitation must be made with older people, especially older women in mind. We recall that emergency centres were not equipped to deal with older people who cannot just sleep on a mattress on the floor because they cannot get up in the night to go to the toilet. We need not only the gender lens, but also the age lens, applied to policy making.

We are therefore calling on the government to provide immediate funding to community organisations to be earmarked to respond to the needs of older women, including the hire of fulltime and permanent part time older women workers in community-based NGOs, in hospitals, in residential aged care, across the NSW public sector and in cities, and regional, rural and remote areas. OWN NSW could immediately employ 10 older women and pay them a wage to provide the type of support older women require.

In the short term, this would provide secure, ongoing paid work for thousands of older women, and lift us out of poverty, and enable us to continue to make a valuable contribution to our communities. This initiative would have an immediate and very powerful impact on communities, particularly in regional and rural NSW, with many older women in rural communities to be lifted out of poverty, enabling them to spend time building on readily established long term relationships, working patiently with older women in their communities to cooperatively solve many problems. The medium and longer-term benefits of this investment would be a decrease in rates of poverty and homelessness among vulnerable older women.



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Most people don't have drug and alcohol issues until they become homeless; so I think 66% of people who are street homeless have taken up, you know, took out drugs and alcohol after becoming street homeless. ...

People are using ice and amphetamines to stay awake at night because if a woman sleeps at night, she has a risk of being assaulted. So she would rather use ice during the night to keep her awake and then try and find a place to sleep during the day, and sleeping during the day is tricky and difficult. We will also hear them say 'I just take it to stop the pain' or 'I do take opiates, because I just want to sleep'. So it makes complete and utter sense that they are using it as harm minimisation, to manage the trauma ... They're re-traumatised every time they have to sleep out ... The decline in mental health is a result of straight homelessness or even the secondary homelessness because they're having to manage in environments that are incredibly complex and incredibly unsafe and they're in constant financial crisis.

Catherine Hill, Director "Some Happy Day"

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CONCLUSION

Due to decades of neglect, we are now faced with devoting of our time and energy to supporting older women who are homeless and those of us at immediate risk of becoming homeless, while at the same time advocating for sector wide change. We join the others in the sector who are frustrated and stressed with having to deal with the results of government inaction in providing enough public and social housing. OWN NSW wishes to remain optimistic that we are entering a new era, where, with increased support, commitment and funding from the NSW government, and careful and considered allocation of resources, we can show that we really care about ending the homelessness of older people, especially older women, and build caring communities. It calls for political will and an end to the ideological dogma which puts the responsibility for a good life and a good retirement squarely on the individual. This utterly fails to take into consideration the fact that we do not all have the same start in life, that gender inequality is a systemic problem which robs women of opportunities to participate fully and to be remunerated fully for the value of their work.

We can bring about the urgent changes required to ensure older people in NSW have immediate access to the most basic human right, safe, secure, affordable, accessible and sustainable, housing. With the support of the NSW government, we are confident that we can make change, and ensure that all older women can age in place.

Housing is a human right. It is one of the most fundamental foundations of maintaining physical and mental health, as well as building a decent life. We are overdue for a serious investment in ending homelessness. The economic returns are undeniable, the social rewards are undebatable, and the wellbeing gains for the individual are unquestionable.

Homelessness is a political choice. We urge the Committee to listen carefully and act.

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