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Investment in **social housing** solves homelessness.

Early and responsive engagement improves outcomes.

Integrated support sustains housing and participation.



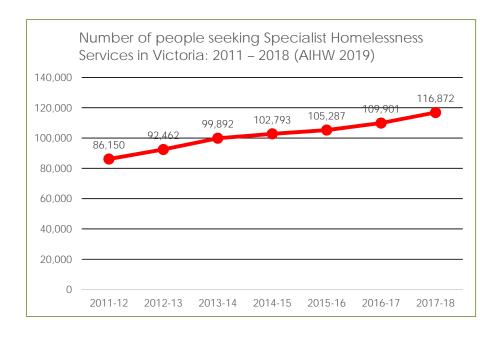








Demand



The 2018-19 data reveals that across that year 112,919 people sought help from Victoria's Specialist Homelessness Services (SHS), 39 per cent of whom were male, 61 per cent were female. VincentCare at NCH supported 5900 people (5.2%)











The Victorian Government needs to increase Victoria's social housing stock to the national average of 4.5% of all housing -6000 per year over 10 years.

CHP 2020-21 Budget Submission











Early and responsive engagement improves outcomes

Demand is greater than quality beds

Only 423 Government funded crisis accommodation beds across Victoria

Around 3,000 people per year can use these beds

The NW region had to find 9,000 instances of accommodation in 2018 for those who could not access those beds











Early and responsive engagement improves outcomes

The two largest causes of homelessness are accommodation needs, and domestic and family violence. These two causes alone are the main reason that 86,153 people present to homelessness services – 76 per cent of all presentations.

Case example – Family Violence services and Child Protection services Children at risk of being removed due to FV Risk of children being removed when women escape FV into homelessness











Early and responsive engagement improves outcomes

Private short term accommodation providers:

Hotels Motels Backpackers Rooming Houses

Since 2014, over 500 private 'housing of last resort' stock has been lost.

However, exploitative housing forms similar to rooming houses have popped up across Victoria.













"The time when I first left my husband due to dv, I was in a motel and that was not appropriate for me and my children. It was not the safest environment for children. I was given two options of motel rooms. When you have children involved, you need more care taken to accommodate children in safe places."











Early and responsive engagement improves outcomes

The longer a person stays homeless, the greater their risk of harm and death

The greater the risk of use of alcohol and other drugs

Accumulation of harm, physical and mental health decreases

Impact on children is significant and damages their relationship with their parents

Risk of death between 4 and 8 times that of the general population











Early and responsive engagement improves outcomes

No single solution

Safe, affordable long-term housing

Safe, affordable, secure temporary accommodation

Safe, accessible integrated support services



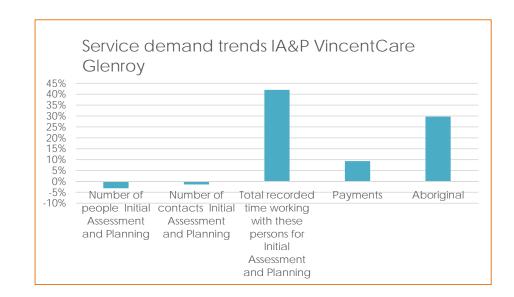








Integrated support sustains housing and participation





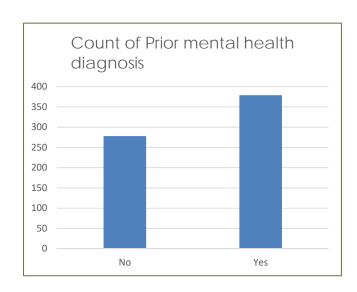








Integrated support sustains housing and participation



58% of people presenting at the VCV homelessness Access Point in the past 12 months had a prior mental health diagnosis











Integrated support sustains housing and participation

A 'pathways' approach centred on the service user

VincentCare's Homelessness Recovery Model

Trauma informed practice that responds to client needs

A focus on a recovery destination

Strengths versus deficits

"Co-location provides for stronger relationships between services, and more easily navigable service pathways for consumers." CHP











Integrated support sustains housing and participation

An integrated service system

Commissioning to enable service cooperation

Inclusion of LGBTIQ+ people

ANASH panel service collaboration

Ozanam House integrated support platform

17 per cent of clients presenting at Ozanam House identified as LGBTIQ+ (Dec 2019)











Integrated support sustains housing and participation

Cross sector partnerships

Local Area Service Networks need to be redesigned and recommissioned to focus on core responsibilities of service integration and service coordination









