## TRANSCRIPT

# LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

### Inquiry into Homelessness in Victoria

Melbourne—Thursday, 13 August 2020

(via videoconference)

#### **MEMBERS**

Ms Fiona Patten—Chair Ms Tania Maxwell
Dr Tien Kieu—Deputy Chair Mr Craig Ondarchie
Ms Jane Garrett Ms Kaushaliya Vaghela

Ms Wendy Lovell

#### **PARTICIPATING MEMBERS**

Dr Matthew Bach Mr David Limbrick

Ms Melina Bath Mr Edward O'Donohue

Mr Rodney Barton Mr Tim Quilty

Ms Georgie Crozier Dr Samantha Ratnam

Dr Catherine Cumming Ms Harriet Shing

Mr Lee Tarlamis

Mr Enver Erdogan Mr Stuart Grimley

#### WITNESS

Ms Mellissa Edwards, Network Coordinator, Loddon Mallee Homelessness Network.

The CHAIR: Good morning, everyone. I declare open the Standing Committee on Legal and Social Issues Inquiry into Homelessness in Victoria. I know it goes without saying, but please make sure your mobile phones are switched to silent. That is not for you out there viewing; you can have yours as loud as you like.

Before I start, could I please begin by respectfully acknowledging the Aboriginal peoples, the traditional custodians of the many lands on which we are gathered here today, and paying my respects to their ancestors, elders and family. I particularly welcome any elders or community members who are here today to impart their knowledge but also any Aboriginal people who are watching the broadcast of these proceedings.

I would also like to welcome all members of the public who are watching this hearing today. As we know, homelessness is an issue that affects so many of us in our community, and we have been overwhelmed by the extraordinary interest in this inquiry. I would like to acknowledge and introduce my colleagues here. To start with, I am Fiona Patten, the Chair of this committee. I have Kaushaliya Vaghela, Wendy Lovell, Rod Barton, Lee Tarlamis, Tania Maxwell and Enver Erdogan.

We are very pleased to have Mellissa Edwards from the Loddon Mallee Homelessness Network. Now, Mellissa, just before we get going I have just got some formal words for you. All evidence taken at this hearing is protected by parliamentary privilege, and that is under our *Constitution Act* but also under the standing orders of the Legislative Council. Therefore the information you provide to us today is protected by law. However, any comment repeated outside the hearing may not have the same protection. Any deliberately false evidence or misleading of the committee may be considered a contempt of Parliament. As you are obviously well aware, this is being recorded. We have the Hansard team in the background hanging onto our every word, and they will provide you with a transcript, which will ultimately go up onto the committee's website but will also form part of the committee's final report.

I welcome you to make some opening remarks. We have received your submission, so thank you very much—it probably seems like an age ago that you submitted, but thank you. If you would like to make some opening remarks, then we will open it up to a committee discussion.

**Ms EDWARDS**: Fabulous, thank you very much, Madam Chair. I would firstly like to acknowledge that I am attending this meeting today from Dja Dja Wurrung country, so I would like to pay my respects to their elders, both past, present and emerging.

I would like to begin by just saying that my particular skill set in relation to the homelessness and housing sector is not so much around being able to look at the bigger, wider social, economic and systemic implications of providing housing and homelessness, but rather a lot of my experience comes from actually working at the coalface. Also, at the moment I work in a role as a Network Coordinator, so I work across the Loddon Mallee region, and that role is around providing support to workers in the homelessness service system through enabling them to access education and providing information about what is happening in the broader service system and also just generally a level of additional support, if you like.

So in regard to, I guess, my knowledge about the sector and what I would like to say, particularly in thinking about reviewing my initial submission and looking back over what has really not been a very long period of time but so much has happened since you initially put the call out for this homelessness inquiry, there has been a lot of work that has happened in the sector in response to COVID. I guess I just wanted to talk a bit about that. You would probably of course all be aware that there has been a big, concerted effort, a push by the sector, to provide housing for people that are in homelessness and to identify where those people are, so to essentially keep track of people in hotel and motel accommodation, and this response has been picked up by the media. It has been touted as being wildly successful, unprecedented in scale, and suggests that homelessness is solvable—I think that is probably really all true—and that the silver bullet in the scenario has been that they can keep in contact with people experiencing homelessness and then follow up with them over time to engage people in getting further accommodation, so long-term accommodation.

That has been the metro response. Meanwhile, here in rural areas the same thing has been happening but on a much smaller scale. Initially the motels and caravan parks welcomed us with open arms to provide that accommodation, because of the reduction in their business because of COVID. But a little bit down the track, when we did reopen the borders in Victoria and people were able to again go on holiday, it meant that a lot of the motels and caravan park owners either upped their prices or went back to refusing or opting out of doing business with the homelessness services. So what this has kind of meant is that the workers have gone back to square one, where they are now having to again balance their housing establishment funds and to negotiate with the individual business owners in order to provide what is a not-for-profit service. So it is clear that although we provide a response for a much smaller number of people our accommodation options are much reduced as well.

Another point of difference for homelessness services is that the majority of our workers actually operate from multidisciplinary teams. So unlike our Melbourne counterparts, who might work in very large agencies, like Launch Housing, for example, a lot of the workers here work for maybe a community health service and we sit alongside allied health programs and they might be managed by someone who oversees numerous programs. In my view, what that effectively means is that workers are not just geographically isolated but they are also organisationally isolated, so it makes it a fairly tough gig for workers in the rural areas.

We also all know that the best standard of practice in homelessness is to respond quickly to provide accommodation and support and to ensure that the person is then able to maintain that housing in the long term and never hopefully re-enter the homelessness system again. And ideally the worker has the time to do that, and what allows them to have the time to do that is providing that temporary accommodation. But of course we know too that this fails because of the lack of ongoing accommodation, whether that is emergency accommodation or whether that is transitional accommodation, and of course there is a long waiting list for social housing. None of this is new news to you, I appreciate.

The other way that this, in my view, fails is the service system has been set up on the basis of historical information, so a lot of programs are operating on client targets that are very outdated, and that is because the numbers of clients have actually risen. The understanding about the causes of homelessness is much more nuanced now, so of course the response from homelessness workers has to be much more detailed in terms of responding to those complex issues.

The other thing is that programs are often not funded to provide that long-term support. Effectively this results in workers having minimal time to engage with clients, and then clients sometimes are triaged and even go on to waiting lists in rural areas. So that is in a nutshell what happens in the rural locations, and really based on my experience and of course watching how workers interact with clients on a daily basis, I understand that if you cannot meet that initial expectation of the client in terms of having a roof over their head, it is very, very hard to continue to engage with them long enough to work with solving the issue on a long-term basis and also preventing the person from re-entering the homelessness service system again.

I just wanted to also come back, I suppose, to the issue of the pandemic and how things have been operating in this time and to say that the Department of Health and Human Services has worked really quite hard to ensure that we have got adequate funding and that there is a coordinated approach. That has been done with a great deal of success. But another observation I would like to make is that at a systems level DHHS is understaffed and under-resourced. This was obvious before the pandemic, so it has been very, very difficult for those staff in their roles to operate in this particular scenario. That has sort of played out, in my experience, in terms of DHHS staff maybe not having particular experience and knowledge of the homelessness service sector, which is difficult and can be problematic in terms of our communication with the DHHS staff.

The other issue has been that the social housing and information platform, or SHIP database, has proven inadequate to the task of providing that nuanced information that is needed in order to provide the service system response to clients in this time. Another, I guess, ongoing issue prior to the pandemic but also still as relevant as ever is the fact that we do not have good data coming out of that SHIP database. So unfortunately that also undermines the good work that is being done in the sector, because it makes it very hard to quantify the numbers. It makes it hard to justify the efforts of the service system response.

In summary, I just wanted to say that the lack of housing infrastructure, systems resources and funding to provide a not-for-profit service in a competitive market economy is really kind of like arming our rural

homelessness workers with knives to go to a gunfight. I know that sounds fairly dramatic, but I do not think it is overstating the case, particularly in light of what is happening with COVID.

The CHAIR: Thank you, Mellissa. I do not think that is overstating it. It certainly seems that there is a huge gap between what is available and what is needed. It seems that it is more acute in regional areas—because you are in regional areas. I will start the questions, and then we will sort of go around the committee team.

Just to follow up on that last bit of the statement you were making about the SHIP database—that basically it is not fit for purpose, for how you need to use it, and that you are not able to get the data from it—I am just wondering if you could expand on that. What data are you not able to get, and if you could have the perfect database, what would it look like?

Ms EDWARDS: Okay. That is a great question. So the example, I suppose, of particular relevance at the moment is that DHHS asked all of the services to provide answers to a question set that was about 40 questions long in order to get that information to respond to needs during this time. So they are things like understanding what sort of housing the person has applied for, what their history of homelessness is, other sort of information maybe about how many members there are in the family, whether they are single or whether they are partnered—so it is sort of a lot of demographic information but also very specific information to that person's situation. Unfortunately with SHIP you cannot easily just run a report and have all that information pulled up for you. You have actually got to go into each client profile and manually pull that information out, so you can imagine that that is a huge impost on the workers' time. So I guess it is about how the information together. I hope that answers the question.

The CHAIR: It does, and I think it is some of those more pragmatic and practical things that we can hopefully change. I do not know how many inquiries I have been on where the lack of data, the inability to collect and then see the data once it is collected, just seems to be a ubiquitous problem. While I have got the last couple of minutes of questions, I just wanted to ask your opinion on what more flexible funding packages would look like. I know we have kind of got these set—you have got so many weeks with a client or you can extend it to certain weeks. You recommended that there be more flexible funding packages, and I am wondering what you would like to see.

Ms EDWARDS: I think part of that flexibility really needs to be about the duration of the contact with the client, and that needs to be—just going back to SHIP—maybe supported to be able to engage easily to pick up and put down the client's file and the client's work as needed. The way money can be utilised—it makes so much difference to be able to really flexibly be able to respond to people's needs in terms of spending that money. So it could be something very basic that the person might need that you can purchase for them, and that is great if you have got the ability to do that. It could be about paying for things that they may need in regard to supporting their good mental health or their good physical health, but again much more flexibility built in—I think maybe not dissimilar to the way the family violence services practise, where they have an identified package of money that can be utilised for each client.

The CHAIR: Thank you, Mellissa. I think it is a really good point. I know you have sort of said it is problematic that you feel organisational isolation, but it almost seems like because you are embedded into health services there are actually some advantages to that in seeing the person in a much more holistic view. I will move to one of your members for Northern, Tania Maxwell.

Ms MAXWELL: Thank you, Chair. Thank you, Mellissa. Fantastic submission. You have articulated everything so well there and set everything out. Mellissa, having previously worked in the homelessness sector, I can absolutely understand everything that you have said and the significance of everything that you have mentioned. From a perspective of primary prevention and early intervention in the homelessness sector—which is something that I have tried to focus on throughout all of these hearings—I have previously worked with the ReConnect program. I am not sure whether you are familiar with that within the homelessness sector. I wish that there was further investment in that. What that program actually does is it try to have that reunification of a young person with their family where possible, and I think that further investment in that field could have the potential to reduce young people's risk of homelessness, so I am wondering whether you have had anything to do with the ReConnect program. One of the issues with that program is that it is that set time frame, and it can take a long time for families and a young person who is at risk of homelessness to engage. I wish that those

organisations utilising those programs were able to determine their own length of support that is required for each individual family.

Also just touching quickly on SHIP, it is so antiquated and it is not conducive to information sharing, and I know the frustration of workers who would lose all the data. All the information would just disappear, so I think from a systems approach they need to look at that. But I would be interested to hear your reflection on the ReConnect program if you are familiar with it.

Ms EDWARDS: Yes, look I am. I do not have a great deal of personal knowledge of ReConnect inasmuch as the roles that I have worked in have either been generalist or working with older people in homelessness, but I do know that ReConnect is a great program and I know that it is very much needed. I know that a lot of young people who are estranged from family for one reason or another can benefit hugely in terms of having that sort of wraparound service in order to get them back in with support with extended family and immediate family. And on that issue of how long does that take, well, you know, what is suitable for one person is completely unsuitable for another person. So that length of time for workers to be involved is absolutely important in terms of its flexibility.

And, look, I would also go so far as to say that there probably need to be more links in programs like Child First and child protection services. There is an obvious connection between a background of family trauma and homelessness and re-entry into the homelessness service system. So I would think, yes, not only in working with teenagers, I would think that working with much younger children—keeping in mind that where families fall apart or where there are not adequate supports there is a possibility that people will enter the system.

Ms MAXWELL: Thank you, Mellissa.

The CHAIR: Thank you. Kaushaliya.

**Ms VAGHELA:** Thanks, Chair. Thanks, Mellissa, for your time today doing the presentation and also the submission that you have provided. In terms of the recommendations that you put in the submission, of course the first one is to have additional or increased social and community housing. I wish it was that easy. That requires a lot of funding. If we had that much money, we would have already had that and we would not be sitting and doing this inquiry. We will get there slowly, but that would be a long-term plan.

But the other recommendation that you have put is regarding increasing the workforce capability. We have had a lot of presenters, but sometimes some of the things just stand out during those different presentations, and in this one I have not heard much about increasing the workforce capability. I just wanted to know whether it is region specific or what it is, how big that issue is, and in case that gets addressed: is that going to help in addressing the homelessness issue that is being faced in that sector, because if the training is not available—and I do understand that for people who are working on the front line in this sector, it is not easy. Sometimes they bear the brunt of people who are facing a lot of trauma, but why is this? I would just like to know a little bit more about this.

Ms EDWARDS: Yes, absolutely. I think there are probably a couple of answers around that. One is that workers in rural areas are that bit more isolated and it can be harder to get access to services, so workers are expected to have a much broader knowledge—and more so than ever—of areas like mental health, drugs and alcohol, working with people across a whole gamut of age groups. You often will not have a specialist service in a rural area; they will be a generalist service. That means that anyone from 16 to 60 could walk through the door. So that is very definitely part of it, but I would also argue that broadly, right across the service system workers could probably be much better supported in terms of their education. That is metro workers as well. A lot of workers come from different disciplines. There is not a particular skill set that is able to be utilised to train up workers. I think that probably would be a very good thing if there was. There is a housing-specific qualification. My understanding is that it has not been widely taken up, and it is perhaps maybe a little bit too narrow in its focus.

Another issue that is interconnected and ties into this too is the fact that predominantly it is women that provide these services—that work in these roles. You have got a wide range of experiences from the workers and qualifications, but if you are talking about perhaps women that have maybe taken time out to have children, they have had a disruption to their study and work life. I think it would be really good if we could actually support people to become better qualified when they are in their job roles, and it would help with staff retention

as well. That is another big issue that we have in rural areas—holding on to staff and then actually finding staff—recruiting staff.

The CHAIR: Thank you. Another one of your northern representatives, Wendy Lovell.

Ms LOVELL: Hi, Mellissa. Thanks for your presentation and thanks for all the hard work that is done by all of the services in Bendigo. Mellissa, over the past five-and-a-half years the public housing waiting lists in Bendigo have increased significantly. In September 2014 there were 1119 families on the waiting list, a list that I considered as the housing minister then to be way too long, but that has now blown out to 2104 families in June 2020, which is an 88 per cent increase or an additional 985 families on that waiting list. What is even more concerning is that priority list, which are the homeless, people escaping domestic violence, and disability/special needs people. That has blown out from 400 in September 2014 to 1388 families in June 2020. It is a 247 per cent increase or an additional 988 applicants on that list. It is really quite an appalling stat. I was just wondering if you could let us know what has been happening in Bendigo that has led to such a large increase, particularly in that priority list.

**Ms EDWARDS**: Look, I would have to put that down to a couple of things. One is just a very fundamental issue of the population increasing. Bendigo, I cannot tell you off the top of my head, but I think our predicted population increase over the next 20 or so years is something like in the tens of thousands—maybe about 30 000 people—so undoubtedly when you have got an increase in population you are going to have an increase in social issues and need for the homelessness and other services.

**Ms LOVELL**: But that is really out of proportion to the growth. If the growth of the city is at 2.5 per cent, the growth in the needs in these areas should be about that as well, not 88 per cent for the general list and 247 per cent for the priority list.

Ms EDWARDS: Yes. Growth is absolutely part of it. I think also there is the fact that people really struggle to manage on a day-to-day basis if they are on a fixed income. I think where in the past you might have had a lot of people that were able to afford to enter into the private rental system, they cannot do that, particularly people on Newstart; they are sort of at the bottom tier of that support system in terms of the income that they get. It is nigh on impossible in some areas of our regions to actually get an affordable one-bedroom property. Forget about it if you are looking at Castlemaine, for example. You have got a lot of people that have come in to Castlemaine—retirees from Melbourne and that sort of thing.

That brings us around to the next cause of this, which is housing affordability. Places like Castlemaine, Echuca, Kyneton are highly desirable. They are all within a stone's throw, if you like, of Melbourne. Some people will actually work and commute to Melbourne, so that has increased the population. Retirees have increased the population. So there is a massive amount of competition for people to actually be able to enter into the private rental market, thus meaning people will want to get social housing. So all of those things are influential in those numbers going up.

Ms LOVELL: With the homelessness system, we know that it is normally funded for that 13-week episode of support, which creates virtually the revolving door of people coming into the system getting the 13 weeks of service and then going out the back door and coming back in the front door again very soon afterwards. Do you have any suggestions around what that episode of support should look like? Should it be flexible? Should they extend it? What would be the ideal episode of support?

Ms EDWARDS: It is really difficult to say, you know, the ideal. I would think a very basic number we would probably be talking about would be maybe three months. In my experience you would have people come into the service and you would be able to assist them by initially maybe providing some emergency accommodation, checking out whether there is available transitional housing and then working to get them put onto the waiting list. So all of that you might achieve within two weeks, but really what happens between that time and then the time that they get the housing? There would be a raft of opportunities there if you could continue to engage with the person. It is quite extraordinary some of the issues that people have that need to be worked on in order to sustain their housing.

**The CHAIR**: Wendy. We are coming to the end.

**Ms LOVELL**: Can I just have one more? Given that the funding is limited, if we were to make that episode of support longer or more flexible around producing outcomes for people, would you be in favour of doing that if it meant servicing less people, but bearing in mind that if you are actually producing an outcome, they will not be coming back through the revolving door?

Ms EDWARDS: Look, when you put it in terms like that, yes, I think I would. I think this probably is going to be a bit controversial to say, but one of the things that I think actually blocks the work of the sector is the issue of privacy. It can be really hard to work with people where you are effectively blocked from gaining the information that you need. It can also be incredibly difficult to work with people when they are not providing you with all of the information that you need. So it has to be a bit of quid pro quo. People have to be willing to work with you and provide the information that you need. So I think the terms of engagement, if you like, have to maybe be rethought a bit as well.

The CHAIR: Thanks, Mellissa. Enver.

**Mr ERDOGAN**: Thank you, Mellissa. I have really enjoyed your presentation. I found it very informative. I must admit that some of the questions I had on my mind have already been asked by some of my fellow committee members, so I will pass the opportunity to ask a question at this stage. Thank you.

The CHAIR: Thanks, Enver. Rod.

**Mr BARTON**: Thanks, Mellissa. I just want to go back to the housing. We all know that it is all intrinsically linked, between crisis housing, transitional housing and social affordable housing. But what is your biggest challenge? Is it the fact that we cannot get a permanent house at the end? What is your biggest—

Ms EDWARDS: Sorry, can you just say that again? I was having difficulty hearing you.

**Mr BARTON**: Sorry, Mellissa. We all know that crisis and transitional and affordable housing are all linked. What is your major challenge at the moment? Is it the fact that there is no availability of affordable housing at the end and that is blocking the rest of the chain up? What is your biggest challenge? Or is your biggest challenge crisis housing—immediate help?

Ms EDWARDS: Well, it is both. It is access to that crisis housing. And to be really frank, it has always mystified me, as someone at the coalface, that we provide a not-for-profit service by entering into agreement with businesses. It just absolutely mystifies me. In a perfect world, in my mind, we would go back to having government-funded rooming houses. Rooming houses can be places where some people get trapped and stay forever and ever, and maybe it is not an ideal scenario, but for a lot of people it actually really fits a need. So maybe looking at the different types of transitional housing as well as—I do not know whether this is answering your question; I have probably gotten off task a bit—looking at working differently with business owners as well about providing that crisis accommodation. I think we need to look outside the square a bit. And the pandemic has sort of opened up that opportunity too. We have seen bulk purchase of accommodation with these business owners as one way of approaching this. To come back to what you were asking, I think it is all of those things. I could not really identify that there is one thing especially over another, but I suppose if you pinned me down to give you an answer about that, I would say probably emergency accommodation, because that is the time at which you forge that engagement with that person in order to continue to work through the myriad issues that they present with.

Mr BARTON: Chair, can I have one more question?

The CHAIR: You can have Enver's.

Mr BARTON: Thank you. Mellissa, I am aware of people from Melbourne moving up to rural and regional areas because they are in a bit of strife or they are escaping a violent partner or doing something along those lines. They find themselves up in—and I do not want to name one particular little place, but they end up in a place, and there is no employment. And when they do get jobs, we know wages are lower in these places than they are in Melbourne. But the rents are not necessarily that much cheaper. I was always surprised at how high rents were in these places. Are you experiencing people escaping Melbourne trying to find a cheaper way of living and just finding out they have become isolated with more financial pressure because of the circumstances?

Ms EDWARDS: Look, I think that probably accounts for a proportion of the population that we provide services to. I think also added into that mix is the fact that people—often—who experience mental health issues find it very difficult to settle in one place and are quite transient, and exactly the same sort of thing plays out—that life is not suitable for a whole raft of reasons. The cost of living is more expensive in rural areas as well, because you have to pay for not just your accommodation, which is priced not dissimilarly to Melbourne, but also travel—

Mr BARTON: No public transport.

**Ms EDWARDS**: and the cost of food and clothing, because you do not have big chain stores to buy things from in some of the smaller areas.

Mr BARTON: Thanks, Mellissa.

The CHAIR: Thank you so much, Mellissa. That was really insightful, and I think some of your thoughts around here are a departure from some of probably the more metro thoughts on some of these issues. As I mentioned before, this is being recorded. There are people behind these tiles studiously taking notes. You will be sent a transcript of this hearing today, and I would encourage you to have a look and make sure there are no misrepresentations on there. And thank you again. You have contributed greatly to our inquiry, and that will be reflected in our report, no doubt. Thanks very much, Mellissa.

Ms EDWARDS: Thank you. Thank you very much.

Witness withdrew.