

# TRANSCRIPT

## LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

### Inquiry into Homelessness in Victoria

Shepparton—Wednesday, 11 March 2020

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Dr Tien Kieu—Deputy Chair

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Ms Melina Bath

Mr Rodney Barton

Ms Georgie Crozier

Dr Catherine Cumming

Mr Enver Erdogan

Mr Stuart Grimley

Mr David Limbrick

Mr Edward O'Donohue

Mr Tim Quilty

**WITNESSES**

Mr Rob Bryant, Company Secretary,

Ms Maria Hutchison, Director, and

Mr Timothy Ridgeway, Support Worker, The Cottage, Shepparton.

**The CHAIR:** Welcome, and thank you again. Thank you for your submission. You will have met a lot of people around the table. Thank you very much for making the time. As you can see, this is being transcribed. All evidence—I just need to give you some formal information—taken at this hearing is protected by parliamentary privilege, and that is through our *Constitution Act* and the standing orders of the Legislative Council. This means that the information that you give today is protected by law; however, any comment made outside may not have the same protection. Also, any deliberately false evidence or misleading of the Committee may be considered a contempt of Parliament.

It is being recorded. You will receive a draft transcript of that. We encourage you to check that and just make sure we have not made any mistakes in representing what you have said today. That information will end up on our website and form part of this Inquiry—which is wonderful.

So I welcome you to make some opening statements, and then we will open it up for questions from the Committee.

**Mr BRYANT:** I am Rob Bryant, one of the founders. I volunteer at the Cottage a lot of the time, and I enjoy it so much. Tim Ridgeway, on my left, is a former resident of the Cottage and is now working at the Cottage and moved through transitional housing from the Cottage. And Maria Hutchison has created the Cottage conversation, which is at the heart of what we do. Maria is an expert in this field; however, she totally understands where everyone is coming from, including the people that are staffing and the residents and some of their experiences.

**Visual presentation.**

**Mr BRYANT:** As an opening statement, homelessness is the discussion here. It is interesting that we do have a lot of people that come to us as a result of drugs and alcohol or dependence on food, sex or gambling—and completely diminished of all their resources. If they have hit rock bottom and they have a willingness to do something about their issue, we are not too fussed about what their issue is. Maria makes it very clear that the substance is 15 per cent of addiction; 85 per cent is in the mind. So it is a matter of retraining the brain and getting some good solid habits around living, which the youth foyer mentioned.

We had a fairly chequered start in that there was a VCAT ruling required I think about 12 months ago. We started in June 2017; we have had 180 people come through the Cottage now. The VCAT ruling was very clear cut. Two members came to see what we were doing, and they said, ‘This totally fits with the new government guidelines for assisted accommodation, and you can do a little bit of training’.

If it was a rehab and it was all training and not much accommodation—if that was an influence—then that may not have got a permit. But we are clear that we have got a template that could be followed, particularly in the regional areas of Australia, that could set up three houses like ours accommodating 20 residents, which fits in with the new government regulation, where people are in safe, stable accommodation—the foundation of Maslow’s hierarchy of needs. Rather than stick to our presentation—you have seen that, and you know there are some recommendations by magistrates—I do not think we will go through that, but what I can do is give a summary.

**The CHAIR:** Great; thank you. Thanks, Rob.

**Mr BRYANT:** That is three pages of the key dates. We did not have any government funding to start with; we just said, ‘Hang on, there’s some pretty good training around this area that works on addiction’. There is Alcoholics Anonymous, Narcotics Anonymous, Primary Care Connect, Goulburn Valley community health. There are a lot of services. The whole of Welsford Street has public services and government services available.

What we need is for people to have safe and stable accommodation, so that they can then access that, and that is what we have set about doing.

How does a person find what they need? We cannot find it for them. I had some great experiences in Bangladesh many years ago with a group called the Hunger Project, and the Hunger Project's premise is that you do not see the hungry people as the problem, you see them as the solution. What we set out to do was to see, 'How do we actually flip this on its head, so that the problem of drug addiction, homelessness et cetera becomes the solution?', and it is to effectively train the trainer. What we are finding is that the people that are now employed at the Cottage are people that have gone through the Cottage program, so they understand people with the severe substance abuse disorders or the sexual disorders. You know, probably somewhere around three out of four people in the Cottage have had sexual assault. Have I got the stats on that? No. But as you go around our table it is very clear that many people have suffered at the hands of sexual assault. Trauma is the cause of substance abuse, and I suggest that homelessness itself is one of those mental illnesses—like hoarding, like whatever people end up getting from their trauma. It will come down to an addiction, so I suggest that homelessness is similar.

The people that we have had in through our program who have suffered homelessness—we are suggesting that it is somewhere around about 60 per cent. I could rattle off five or six names that I have got down here—people that have owned their own home and are in a family dispute. And last Saturday—with the urge of having to have alcohol and having to have control—'I will live in my car. I will not be told what to do'. We do not tell people what to do much, except 'Be at a check-in at 8.30', 'Be at a class at 11 o'clock', 'Help with the meals', 'Do the dishes'—boy, I did not realise dishes could be such a good training tool. That is where in the mornings you often hear the arguments about who is doing what—'I'm carrying the whole weight of this'—all of the things that happen in a family and that get missed in an upbringing sometimes.

But then in someone like Tim's case, who comes from a really good, strong home, who had a session with us for three or four months or five months and ended up getting his own gardening business going, which was absolutely the push of what we were doing, he ends up back in the cycle again of homelessness. Tim is not only from a great family, he is not only a great staff member, he is not only an addict, but he is also somebody that is a shining light of what is possible when a future-based language is present. We base what we do on a future-based language—the conversation. We commit to building a transformational model, and that is just ongoing and ongoing and ongoing. Each person has their own future that they want to create. Are they willing? Are they willing to give up their addiction to the underlying addiction, which is the addiction to the illusion that we can control life? Often these people at that homelessness stage are saying, 'I can't do much, but I sure as hell aren't going to be told where I have to live'.

I think that 45- or 50-year-old lady last week—we were talking about our lowest points, and it was one of the lowest points for me—she saw a note about her transgressions while at the Cottage and she just could not handle it. 'That's exactly what my father says. That's what my partner says. That's what my brother says'—and with that she was gone, and she is living in her car. Until people have a willingness to transform their conversation in their head or with other communities, it is going to be difficult for us to come up with an overall remedy. There is no overall remedy. There is actually 100 per cent of people that are homeless, and there will be those that are like that lady and then there will be those that we see in the streets in Shep every day. Actually one of the fellas there, he wants to be there. And so we are not going to try and shift what people want. They have to have a willingness to own their part in it. This is where we are coming from.

If it is endorsed by Tania—180 residents in that two years. We had no government funding until last year when Damian Drum came in and had a look around and he said, 'It's ridiculous that you old blokes there that are putting this money in are doing that. It's unsustainable. We need to look at this through the Department of Health' and something else. So we have got a grant of \$100 000 for the next couple of years, which is wonderful. Prior to that, the Fairley Foundation, when we were going through our trauma with a planning permit—of course neighbours never want to have what is seen as a drug rehab in their backyard; in fact it has become the safest place probably in that area; we have our blemishes, but we have a pretty safe environment—put in \$24 000 to give us credibility, give us a kick off of support, and that was one of the greatest things we had.

It is not about throwing money at this issue; it is about throwing a conversation that will stick about sustainability. How do we replicate something like this? So you will see in this submission here to the ministry of corrections, I think—is there a ministry of corrections in State Government?

**The CHAIR:** Yes.

**Mr BRYANT:** So we have been to Ben Carroll's office.

**The CHAIR:** Yes, I think that is—

**Mr BRYANT:** Oh, we did send it in in the submission. Yes, that is right. Ben's office is going to be getting back to us with the idea of this being rolled out to different areas. We are training the staff, naturally, through people like Tim, to be able to roll this out at a very low cost. Our budget—and actually our profit and loss—was \$600 000 last year. It is almost embarrassing to see how cheap this is running, and people are getting paid full wages and we are staffed 24 hours a day. So I thought that was a bit of an issue for us. The 24-hour staffing has been the best thing that happened. I am really pleased with the whole VCAT process, including some of the support we got before the VCAT was ruled on.

So is there anything you would like to add as an opening statement, Maria?

**Ms HUTCHISON:** I do not think so. I think you have covered it off really well. And the bulk of it is in the presentation that you have got anyway. Most of you know about the Cottage. The key thing is about looking at what we are seeing coming out of prisons. Probably 40 per cent of our client base are forensic clients, often definitely criminals; however, their core disease is addiction. So when we are dealing with that, that is what we are addressing. We also got the stats to say that 50 per cent of people that have come from incarceration are going to be homeless. So of course that starts the cycle back again into addiction. So providing that opens up an opportunity to have those discussions: 'Once I've got a roof over my head, then I can talk about my drug addiction and my sexual abuse and my childhood, or getting my family back. But if I don't have a roof over my head, I haven't got the space or the capacity to do that'.

And it is interesting. We were just speaking this morning about the fact that we have empty beds, and yet there are still—I am fairly sure—a few addicts out there who could do with us and who are homeless.

And that is what we have put to Ben Carroll. That is the reality. There are 5000 coming out per year. Probably only half of those are interested in doing anything, and probably only half of those are really at a stage where they are prepared to do whatever it takes. So it is not going to be for everybody, but I think really what we do is we just hold a safe space for people to find themselves. We cannot save them, but we can certainly hold a space while they find themselves.

**Mr BRYANT:** A third of the people at the Cottage at the moment are actually working, so we certainly see that as a great encouragement if they wish that. Others might be on a disability support. There is a young fellow who has only got 49 per cent blood flow in his legs at the moment. We have had him out on a dairy farm for the past week or so. I think we might have to bring him back in because he is struggling a little bit. He still comes to the meetings of NA, and he also comes to our Tuesday training sessions when Maria is running them, so it is a wonderful mix and match of what they want.

**The CHAIR:** Thanks, Rob. Tim, did you want to add anything?

**Mr BRYANT:** Many perspectives.

**Mr RIDGEWAY:** Without the Cottage I do not think I would be in the position I am in, to be honest. I have spent a lot of time living on the street. Without a house it is actually dereliction, so I spent a lot of my time in the city, in Melbourne, and before coming to the Cottage I was at serious risk of incarceration. I have still got charges to go through. Once the drugs get taken out of my life things actually go really well. I have been given every opportunity. I am well educated, but I have just got enough trauma and enough problems that once I start using drugs everything kind of goes out the window really quickly. My experience on the street shows me that people do not all need to fall through those gaps, you know? People in my situation—I do not know how to access government services because I have always had private funding from my parents. So when I try to get away from that private funding from my parents, how then do I access a service which I have no idea about? I

go to a place like Launch Housing and they say, 'Come back for an appointment on Wednesday at 11 o'clock', and I did not even know what day it was. How do I make it to an appointment in two days when I do not even know what day it is?

**The CHAIR:** Of course.

**Mr RIDGEWAY:** No watch, no money, no food, sleeping in a park—I do not really know what to do with that. I was not taught any skills to cope with that. My prob said there is a form of addiction there, because with the amount of trauma I have got it was a form of control; it was a form of safety for myself. I was isolating myself from my family and the community because I did not feel part of it, and what I have gotten at the Cottage is a sense of family and community and reintegration with my family—I am allowed back into my family home. It is a miracle.

I think what I see at the Cottage working there now is people who on a daily basis do better than they expect of themselves—that they are given opportunities to make massive improvements in their lives. You know, people who come in who have been on Centrelink their whole lives and then they start talking about getting a job. That is what really makes my day worthwhile—when I see things like that and the kind of opportunities we get. I would do this for free. It is a miracle I get paid for it. I love what the Cottage stands for and I love being a part of it. We need more of these available to more people. This is my eighth rehab, and of the rehabs I have been to it is probably the most successful because it is the least domineering. With the long period of time there is no cut-off to it; it is a sustainable model. There is a lot of freedom there. I could walk out the gate any time I want, but I have got everything I need provided for. It teaches me really basic functions of living.

**The CHAIR:** Fantastic, Tim. Thank you. In fact that is a nice segue because you were saying that the average stay is 52 days, and in your proposal, which is to look at 20-bed facilities to accommodate 100 people a year, normally when I hear about rehab and normally when we hear about programs like this it is not a 52-day program, it is usually much longer. As we heard from the foyer, it is two years there. So could you tell me about that 52 days? How are people ready to move out of the Cottage and sort of become outpatients, as it were?

**Mr BRYANT:** I will explain the 52 days first.

**The CHAIR:** Thanks, Rob.

**Mr BRYANT:** When I was in Damian's office in Canberra I put together a database. I am not that good, as I mentioned before, in IT. We did not exclude those people that had stayed for a couple of days. Because in the first week is when people disappear. They are just not going to put up with it and then they are gone within a week, so they were all included in there. In reality it is closer to three or four months now. We have not done a lot of stats, but I am sure you have seen the work that Think Impact have done for Haven; Home, Safe in Bendigo, and we are talking to them to get accurate stats. We have been looking for that for a while, but the unis wanted about \$50 000 or \$60 000 to do it and we are not going to spend money on that when we can actually spend it on people's recovery. So we need stats to come through. It is not fair to talk about the 52-day ones. I put them together and they were accurate, except that it did not exclude those people, so three to four months.

The part that I have not mentioned and I will is that we have now got transitional housing, so we have not only got 23 beds, we have actually got another 20 beds scattered around Shepparton that also are not filled at the moment. The investors have bought properties and they have said, 'Right. In transition? Go to here'. Eight out of 24 are working at the moment, and two of those people are living down in Maude Street at another set of units, like anyone would, so there are no shifts. So we are very clear that in this model 23 beds is possible for the actual real focus in that time, and then the transitional housing starts and then you start getting into private rentals.

**Ms HUTCHISON:** Certainly in terms of addiction 30 days is really just the beginning of a detox, and that is what we are finding with people late term that are trying to find a private rehab. Where I have come from it was \$35 000 for three months and then there was nothing, so the family cannot continue to pay that \$35 000. To be honest, most of the clients at the Cottage do not have that family support anymore, so four months. If I stand in front of a magistrate then I am suggesting six months minimum, and then some of them have been there for 18 months, 12 months. Others have come because they are at risk of losing their relationship and they only

need 50 days, only need 60 days, to clean it up. They go home to their family—their wife and children. So there is a real mix of people that we see.

**Ms MAXWELL:** Thank you, everyone, for coming. As you know I do absolutely endorse the Cottage, having been there and seen how it works. Tim, thank you so much for telling your very personal journey. That was really emotional to hear you sit and tell your story. As I mentioned with the foyer, homelessness is not just looking at putting a roof over somebody's head, and I love that you guys are capturing a cohort of people and not only providing that roof over their head but also addressing those addictions. I think it is very important within communities that we have those multiple agencies, organisations and services to provide that holistic overview, because that is how ultimately we need to be addressing the issues of homelessness. It is not just somebody has left their home, it is why. We need to be asking the question 'Why?', and I know that you guys do that very well and provide that support.

If you had all the money that you required, what would you do? Would it be to expand the existing model of the Cottage? What would you do? Given the work that you have already done and evaluations and the experience of people residing in the Cottage, what would you see as being something you would like to do?

**Ms HUTCHISON:** Certainly that is initially getting more cottages. I think there is also a space of integration back into family, so I would love to see the Cottage conversations going to the parents or to the partners or to the children so that they can then deal with mum, dad, son or brother coming back. How do they deal with this? Also a conversation that starts really early on—the younger we get it the better, I think. From schools, a Cottage conversation that starts really early on about, 'Where do I fit in this community and how can I belong without having to fit in?'. Certainly that for me is to expand it, and to the other areas, because I come from an addictions space and it is a family disease, so Mum is invested and Dad is invested and—

**Mr BRYANT:** What you are saying is normalise it. That is what this model does. Everybody that visits the Cottage gets that, that this is actually, 'Every family's got this'.

**Ms PATTEN:** It is science.

**Mr BRYANT:** I have not struck one that has not, so normalise it. You have got your infant welfare centre and you have got the Cottage there. Call it something nice, not the rehabilitation centre. Then people come and they volunteer there, and you see the particular slide we have got up there that there is casual employment for residents. We get to Food Share, and we take residents in there. You have got a heap of volunteers at Food Share, and they mix with the residents et cetera. So normalising it via regional hubs like Dubbo—well, there is no point picking out one town.

**The CHAIR:** Yes. I think, Rob, that is just such a beautiful picture of where we could be going in this space and in that way addressing some of the stigma around addiction and around homelessness. We are desperately running out of time. Does anyone have one urgent question? It has got to be a quick one.

**Ms VAGHELA:** Thanks to all three of you for your presentation. Rob, in your experience—you spoke about willingness to change—what brings the willingness to change in people?

**The CHAIR:** In 30 seconds.

**Mr BRYANT:** In 30 seconds? Hitting rock bottom. So you have got to suffer enough to then actually realise, 'There has to be another way, and I can't do this on my own'.

**The CHAIR:** Brilliant. Well done. Thank you so much. And, look, any other information you would like to send us—if you got any evaluations, because I did not actually see one in the information we got—please forward it through to Lilian or Kieran.

**Ms LOVELL:** I am just going to add a comment, because I think Rob has been very humble and modest in this. The work that the Bryant and the Gash families put in and the money that they put in to start this in Shepparton has been sensational for our town. We had nothing to offer addicts in Shepparton until these two families stood up and started the Cottage, and I was very proud to be able to support them in getting that VCAT planning permit.

**Mr BRYANT:** Thanks very much.

**The CHAIR:** Fantastic. Thanks for that.

**Witnesses withdrew.**

**WITNESSES**

Ms Melinda Lawley, CEO, and

Ms Renae Ford, Program Manager, Youth and Family Support, The Bridge Youth Services, Shepparton.

**The CHAIR:** Thank you so much for coming today. All evidence taken at this hearing today is protected by parliamentary privilege, and that is under our *Constitution Act* and the standing orders of our Legislative Council. Therefore, the information that you provide today is protected by law; however, any comments you may make outside may not have the same protection. Any deliberately false evidence or misleading of the Committee may be considered a contempt of Parliament. As you can see, all evidence is being recorded by our parliamentary Hansard. You will receive a proof transcript of that over the next few days, and we encourage you to have a look at that and make any corrections. Ultimately that will go up on the website of the Committee and form part of our Inquiry process into homelessness. If you would like to give a few opening statements, then we can open it up for questions. Thank you.

**Ms LAWLEY:** I will start. Thank you for the opportunity to present our expertise and local knowledge of how young people experience homelessness in the Shepparton and broader areas. The Bridge Youth Service is a locally based and governed incorporated association, which began about 26 years ago to address youth homelessness. It was then called the Goulburn accommodation program. Specialising in young people between 12 and 25, it has delivered the specialist homelessness services we mentioned earlier for young people between 12 and 25. It also now has two other broad areas of support: we provide family services predominantly funded by DHHS and education re-engagement support program funded by the Department of Education and Training. So they are our three major program areas.

Each year the Bridge receives funding to provide the specialist homelessness services, and this includes addressing immediate homelessness needs and then looking for opportunities for family reconciliation and family mediation and referrals to other services for specialist support, such as mental illness and misuse of alcohol and other drugs. We work really closely with child protection, with approximately 100 young people who are heading towards the child protection system or may be involved with youth justice. Many of these may need support when they become homeless, so they are overlapping programs. The other area we have is our family services program, where we support young parents under 25. Our service continuum begins with pregnancy options and counselling and progresses to antenatal classes and then parenting programs, and as a Child FIRST provider we support very vulnerable young mothers who are more than likely experiencing family violence and homelessness. We of course have many examples of young people who utilise a number of our programs—and sometimes all of them—over a period of many years.

So today we thought we would provide a point of difference. We know you have heard lots of presentations about programs and facts and research. What we thought we would focus on today is what it is like on the ground—what it is like for young people, what it is like for the workforce. As the CEO I am very mindful of the type of work that our staff do. So the intention is that this provides a snapshot of what it is like when policies interact, when programs interact and when there are consequences that were not really foreseen. To do this our presentation will begin with a focus on the details of the local homelessness and housing system, which Renae is going to provide for you, and then we will focus on the workforce, like I said, and then our solution to youth homelessness—or trying, anyway. I will pass over to Renae now, and I will speak a little bit later.

**Ms FORD:** I am speaking on behalf of young people at risk or experiencing homelessness. Youth homelessness is significantly different to adult homelessness. As a youth organisation we are continuously ensuring we develop responses based on the needs of the developing young people, such as their age; adolescent development; physical, emotional and social development; experience; and dependency and supports. Housing needs to be safe, affordable and appropriate based on the needs and abilities of the developing young person. Most young people who are experiencing homelessness may be forced to leave their home due to family breakdown, violence or their family being evicted into homelessness after a crisis. That is when we are responding. The response is returning to family and friends: supporting a young person to attempt to mediate and reconcile the relationship with their family if deemed appropriate as there are no other reasonable or realistic options—‘What happened?’, ‘Can you go back and work it out?’, ‘Can we talk to your

parent or carer?', 'Can we make some changes?', 'Are you sure you can't go back there?', 'Can you stay with someone else in the meantime?', 'Are you able to go back?'—and we keep looking at other options.

At times young people return home or somewhere temporary to couch surf in order to have that roof over their head. This response may buy some time; however, the young person can remain vulnerable and at risk—at times further risk of exposure to violence, substances, crime and/or sexual exploitation.

The next response is utilising what we have locally: so supported accommodation options, supporting young people to utilise what the community has available to them. Given these supports are always at capacity and given the high need, when there is a vacancy there is an extensive process to gain access to these supports, depending on personal factors—things like age, risk, need, mental health, education, training, relationship status or if they have dependants of their own. We are talking about our local youth refuge. We have got one in Shepparton; the next closest are Wodonga and Melbourne. We were talking about our local youth foyer, who were here today; they are also in Shepparton and Melbourne. And there is our local residential rehabilitation; we have one in Shepparton, and the next closest are in Wodonga, Ballarat, Bendigo, Warrnambool and Traralgon.

Ultimately the response is independent living: supporting a young person to access independent housing options, such as transitional housing; ideally short-term housing responses to clients in need; the highest priority, as per opening doors in our community. Many organisations are putting forward the most vulnerable client in their organisation—limited capacity, sporadic meetings—given the high demand and backlog of public and social housing. We have no youth-specific properties in our area, and BeyondHousing manage these.

Private rentals: inspecting and applying for a house, depending on affordability, only to not be considered. Young people 18-plus can legally sign a lease. Affordability: a youth allowance payment is \$460 per fortnight, and a one- to two-bedroom in Shepparton is approximately \$400 per fortnight, leaving \$60 for everything else. Real estate agents and landlords will not consider this sustainable. It is highly competitive, and there is high demand and discrimination against our young people because they have no references, therefore they are a liability. Social housing, public and community housing, application processes, registers of interests, priority access, homelessness support—you are put on a waiting list with limited capacity for turnover and high demand. How long is the wait locally? In the last six months we supported 159 young people. The Bridge Youth Service successfully supported and transitioned four young people into this social housing option after 12 months of accessing our support.

Last crisis response, emergency accommodation: if all responses are exhausted and the young person has nowhere to go as of tonight, emergency accommodation is explored, mostly paid by HEF—Housing Establishment Fund—towards our local hotel-motels, caravan parks, cabins, camping sites and even shipping containers. There are limited vacancies. They are hesitant to accept our young people or community members who are supported by homelessness agencies, and they are known to inflate costs—minimum \$300 per week. A young person cannot sustain this independently. It is setting them up to fail and be in the same situation in one week's time, rotating through the cycle of the responses I have mentioned above.

Shared amenities that are barely acceptable is substandard living. Further, there is exposure to trauma and ongoing concerns for their own personal safety. Young people constantly circulate between these options until something safe, secure and sustainable comes along. Sometimes, when there are no options left, young people resort to sleeping rough in their cars, in tents, in unoccupied houses or in improvised dwellings. Further, what if a young person is under 18? What if they have children? What if they are a victim of family violence? What if they have a disability or a significant mental health diagnosis? Depending on the answers, these unfortunately further limit and complicate the options I have presented before you. Last year Melinda and I attended the Victorian Homelessness Conference, where the keynote speaker, Melanie Redman, reminded us of the Australian Institute of Health and Welfare data analysis that revealed 40 per cent of homeless Australian young people aged 15 to 24 who seek help from homelessness agencies are still unhoused at the end of their support period due to the lack of permanent housing options for young people. We resonate with this in Shepparton—in fact we believe there are more there. Further, the longer it takes to resolve a young person's homelessness the greater risk of lifelong impacts, including mental ill health, disengagement from work and education, justice system involvement and recurrent homelessness. We have asked the people what they need: they have told us they need a home. We are continuously working within a system that does not have enough solutions. The solutions are houses to call a safe, secure and sustainable home. Young people need a home.

**The CHAIR:** Thanks, Renae. Now, have you got the answer?

**Ms LAWLEY:** The answer? Well, I do want to reiterate what it is like to work in that field every day, and I think that is what we wanted to bring across today. It is a very difficult position to front up every day. When you do not really know about homelessness services, you go to the Bridge and you go, 'Well, you've got houses, haven't you?'. No, we have not, but you cannot say that. So it is this continual juggling. It is like a holding pattern at the airport. It is a 13-week support period. Well, that is not going to find a solution.

What I wanted to draw attention to today is what it is like for that workforce. How do you support a workforce where they know they cannot provide the very solution that the person is asking for for them? They build rapport; they look for other opportunities. Before I go on to the solution, I do want to say that what we can do with that time we are with them is to build the skills, similar to what the foyers said. You take that strength-based approach. I was going to point out that we say to them, 'Can you find a housing solution? Use your best practice frameworks, use a strength-based approach. Remember to emphasise and promote self-determination, but make sure you don't get them dependent. We don't want them to be dependent on the system', so they go, 'Arrgh!', and everything is going round and round and round. I suppose I just wanted to reiterate that. As a CEO I need to protect that workforce.

Then if we move on to 'What can we do?', I would like to draw attention to what is happening in Geelong. It is called the Geelong Project, and it is an opportunity to provide support earlier. If we have got this fantastic workforce that can work with the young people, work with the families, do family mediation, why can't we do that earlier? At the moment if you think of our response to youth homelessness as a continuum, the Bridge would be near the end. We are at the crisis end; we are up there with the youth refuge. We are trying to find a solution that is not really forever, but we will put something there as much as we can. So what if we use that workforce at the beginning, before the young person even knows they are homeless? I have worked with young people for a long time; they might not even recognise that they are about to be homeless. Why can't we use the expertise of that workforce earlier? That is what they are doing in Geelong.

What happens in Geelong is that they use a survey within a school setting, and that helps to determine the risk: the risk of youth homelessness, the risk of school disengagement and also—not as well researched, but it is still looking very good—of mental illness. So between those three risk factors, there is your risk of homelessness. That is what we would be dealing with when it gets bad enough. Well, we do not want to wait until it is bad enough. We want to work with them now, with a really skilled workforce that really, really values young people and can see their promise.

With this survey, the schools do it once a year. The results are then put into three tiers—the most critical, the ones that we should watch and do the most early intervention with and the other ones that are not so bad and that maybe just the school welfare system can support. So the concept is you use our workforce to go in there and start the family mediation then, start the communication skills, focus on that relationship not breaking down. What they have found in their evaluation is that reduced youth homelessness by 40 per cent, and that was in a very short time. They were seeing around 200 a year, and it did drop that much. Have you had the opportunity to listen to it yet?

**The CHAIR:** Not yet. We will.

**Ms LAWLEY:** So, yes, we have been really, really promoting that approach. It is also known as the COSS model—so the community of schools and services—and it talks about us all working earlier, so redirecting that effort and doing it within the school, which still provides a protective factor, they are still connected. Because we know that what happens with young people who are at risk of homelessness: they drop off from school very early. So that is our solution, and we are really happy to talk a little bit more about it. I have lots here, but—

**The CHAIR:** Great. Thank you so much, Melinda,

**Ms LAWLEY:** Questions?

**The CHAIR:** Absolutely. Just seeing that sort of Wizard of Oz whizzing-around cyclone that you are sitting in there, yes, being proactive and early would be so much more rewarding to your—

**Ms LAWLEY:** Well, just to hear those figures over six months: 159 young people, four into transitional housing, maybe four or five into the foyer—that leaves 150, 145, still not really housed appropriately. I suppose the other interesting point for me was we have got HEF—that is for these sorts of situations—but I do not know whether you would be really pleased with what we are paying for, you know?

**The CHAIR:** No, that is right, like a shipping container or a week in a tent.

**Ms LOVELL:** Really dodgy motels.

**Ms LAWLEY:** There are a lot of things happening in the system where they go, ‘Oh, are youth agencies involved—maybe it’s now \$20 more a week’, you know? It is not the best use of the funds, and of course we are not going to not put a roof over someone’s head, but it is not ideal, and I suppose that is what this circling is, this holding pattern.

**The CHAIR:** And working that 13-week model as well.

**Ms LAWLEY:** Yes, and then in Shepparton you think about we have events here, where young people are the first to lose their accommodation. We have fruit pickers come in. There are a whole lot of other things that are—

**Ms FORD:** Local to our community.

**Ms LAWLEY:** local to the community that are in this mix as well. That is what we needed to draw attention to.

**Mr BARTON:** Thank you, ladies. From our travels and what we are learning from overseas, Housing First is a key motivator. Clearly the youth issues and the demand for housing up here for the kids are a disaster—for getting kids into transitional let alone getting them into affordable housing. Obviously our goal is to keep people in their homes where it is safe to do so. From a social responsibility view, that is what we should be doing, but how do we generate and how do we push? I am only going to say this because I have a farm not too far from here, so I am familiar with the area, but in terms of having affordable housing options—I do not want to say tiny houses, because I hate that term—are there affordable housing models? How do you see affordable housing models—what we can do?

**Ms LAWLEY:** The foyer is a type of affordable housing model, but otherwise it is some sort of use of the houses that are already here, and it is using that social conscience, pushing social conscience on landlords. It is just saying, ‘How can you make that available?’. We have a workforce that would support young people while they are in the homes. At the moment we are looking at: is it possible for us to get some dedicated youth-specific houses, and then we support them?

One of our programs is called Cradle to Kinder. It is for young women under 25 with children, and it is a four-year program. If we could find a house, we can do the four years. We have this terrible situation that has just occurred where the young person is pregnant, about to have the child; the child will not be able to stay with this young person because they are going to be discharged into homelessness. So not only is this young person not in a home, we are now putting pressure on the child protection system to find a home for this child. This young person has done everything right. They have come to our antenatal classes—they are totally involved—and yet they are living in a youth refuge and cannot stay there. It is where all the different systems touch together, and this is what we are talking about.

So we have a worker who will work with this young person for four years. Once that baby is born we can stay in there and support. We need the landlords to be aware of the fact that if they say to this real estate, ‘I’m willing to take a young person that has got support’, whatever, they are the sorts of changes we need to make.

**Mr BARTON:** And what work have you done around that sort of stuff, and how successful? Because I hate to say this: it does not sound very successful so far.

**Ms LAWLEY:** Well, yes. We got a solution to that one, didn’t we?

**Ms FORD:** Yes.

**Ms LAWLEY:** Just a week ago?

**Ms FORD:** Yes, and a lot of funding, a lot of advocacy. The young person is incredibly determined as well, and ultimately a bit of timing—something came up at the right time.

**Mr BARTON:** Are the landlords saying to you, ‘Look, we don’t trust you’re going to pay the rent’? Is that what the core problem is?

**Ms FORD:** Yes, ups and downs.

**Ms LAWLEY:** I think it is just there is so much demand on the houses, why take a risk? That is what I am talking about—that social conscience.

**Mr BARTON:** Kids matter; that is why we take the risk.

**Ms LAWLEY:** Yes, that is why we take the risk; that is right. But that is not always the case. So it is those sorts of opportunities. We are working with the Women’s Property Initiatives in Melbourne at the moment trying to say, ‘Can we afford to have a place that is just for, say, four young mothers to start with?’, because that is the one where we can have the biggest impact—it is two lives. So we are looking at that at the moment. Our board is very keen to work with them and see if we can basically purchase or fund a house that we can work with. So that is what we are talking about.

**Mr BARTON:** Just one more question. I am just curious. With the pickers coming into the area, are you saying that they come in and the rents get artificially pumped up when it is picking season?

**Ms LAWLEY:** Well, it is an artificial situation because it is the buyers’ market. Everyone is more desperate than normal.

**The CHAIR:** It is a sellers’ market, maybe.

**Ms LAWLEY:** Yes, a sellers’ market; that is right. We ought to get that right.

**Ms MAXWELL:** Just very quickly I would like to say thank you for the work that you do. I have worked in the homelessness sector and know how difficult it is—Melinda, what you were saying about looking after your staff—and I commend you guys so highly for the work that you do and the contribution that you make to those young people’s lives. Thank you.

**Ms FORD:** Thank you.

**Ms LAWLEY:** Thank you.

**Ms LOVELL:** I was just going to add, the reason why you are having so much trouble, and you have got 155 kids you cannot get into accommodation, is the public housing waiting lists here in Shepparton, which over the last five years have increased by 116 per cent. So we have gone from 600 in September 2014 to 1297 in December 2019 waiting to get access to public housing. So there is a big gap there. But also, even more importantly, the priority waiting list for the public housing has increased by 253 per cent—so from 180 to 636 families waiting on that priority list, and they are people who are actually at risk of homelessness, are escaping domestic violence and have special housing needs. So we need far more investment in that public housing space from this Government to assist you to do the great work that you do.

**The CHAIR:** Thank you so much. I loved your proactive approach of saying, ‘If we could’, and I am guessing that we need to be recommending that funding models look a bit different, so something like the COSS program can be implemented here and enable you to provide that support earlier and possibly for longer than nine or 13 weeks.

**Ms LAWLEY:** That is right, and what is interesting about that model is it has been picked up around the world. We have just been emailed a link to the *Seattle Times* because we went to a conference late last year and there was a reporter there, because they were so interested in the work that we are doing here. But we have got one site, and what we are trying to say is that there are other sites where we could be trialling this, and it is about the departments working together. Because it is done in a school, does that mean it is the department of

education? Or because it is the workforces coming from DHHS, do they own it? Who owns it? It is actually together, and it is that community. We all have to be working together to say, 'We've got the solution; how about you thinking about how to pay for it or realign it?', because that is what it actually is. They have the workforce, it is just they are waiting up here at the cliff.

**The CHAIR:** That is right.

**Ms LAWLEY:** Why can't we start it earlier?

**The CHAIR:** Yes, create a fence back there. Again, just to reiterate, and I am sure on behalf of the Committee, thank you so much for the work you are doing. Thank you so much for spending the time and giving a really thoughtful snapshot of what it is like to be in the middle of that hurricane. We really appreciate it.

**Witnesses withdrew.**