

# TRANSCRIPT

## LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

### Inquiry into Homelessness in Victoria

Wangaratta—Thursday, 12 March 2020

#### MEMBERS

Ms Fiona Patten—Chair

Dr Tien Kieu—Deputy Chair

Ms Jane Garrett

Ms Wendy Lovell

Ms Tania Maxwell

Mr Craig Ondarchie

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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**

Ms Michelle Fell, Client Services Manager, and

Ms Katharine Hodgens, Senior Manager, Junction Support Services.

**The CHAIR:** I will declare the meeting open again. Thank you again for making the time. Thank you for your submission; it was great. I just need to explain that all the 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. This means any information you give us today is protected by law; however, if you were to repeat comments outside, they may not be protected. Any deliberately false evidence or misleading of the Committee may be considered a contempt of Parliament.

You can see that we have got Hansard here recording your every precious word. You will receive a transcript of that in the next few days, or the next little while. I encourage you to have a look at it and make sure we did not make any errors, that we spelt everything right—that we did all of that. Ultimately it will be on our website and will form part of the Inquiry. So if you would like to, make some opening comments and then we will open it up for open discussion.

**Ms FELL:** So we are probably just going to between ourselves and talk a little bit on different topics.

**The CHAIR:** Yes, great; love it.

**Ms FELL:** So we will link between. I guess to start with I would like to thank you for coming to Wangaratta. I think all of us at Junction Support Services, the people that we support and even people in the wider community that we do not support think it is a really great step. So Wangaratta is a really important, I guess, regional area, a regional centre. Our work, 30 years ago, began in Wangaratta. That work started with a group of people, locals, identifying their concerns for their children when they grew older—if they had disabilities, who was going to care for their children. They pulled together a town hall meeting and from that point we had one program and one staff member. So that staff member turned out to be our CEO of 30 years. She just retired last year, and we have our new founding CEO, but that is how Junction began and that is how we are here today.

So from that point Junction now supports around 1500 people across our range of programs per year. Those are homelessness-based programs, but we also have programs in other areas. And of those we have 28 programs that provide that service. We have around 150 staff and 70 volunteers that make up our agency, and we cover all of north-east. So we go up to Corryong and over to Mansfield. So all our different programs cover different areas. So we are quite large in that sense, and I guess we are also proud that we have been an award-winning agency in the last couple of years. So we are trying to progress ourselves in the community to assist. I would like to say I am very proud as a Client Services Manager. That is what I am here for today. I oversee the four operational teams that make up our agency.

While we have four teams in our agency, we find that every team sees the effects of homelessness; it is not just in one particular area. Our four teams have different focuses. Some are children, some are adults, some are out-of-home care and some are youth and wellbeing and school-based programs, but they all experience homelessness. That means we are talking about supporting young people—so infants, up to children and young people. We are supporting adults. We are seeing more and more women in that 50–60 age bracket, who may be leaving family violence or a relationship breakdown entering the homelessness system because they are not able to find anything themselves. And that is their first time of experiencing homelessness—it is not intergenerational, it is not a frequent occurrence, it is a once off.

**Visual presentation.**

**Ms FELL:** We have provided a bit of a PowerPoint today. These are people who we have supported—we have tried not to identify them—and these are the words that they have shared with us. So we thought it might be nice today that—obviously you can hear our voices, but this is coming directly from them.

Today I am joined by Kat. Kat is one of our senior managers at Junction, and she has been with us for 14 years, and we refer to Kat as our homelessness expert. She has been working in the homelessness space for that period

of time, and today she is going to share some of her experiences working in that homelessness sector with you. I will hand over to Kat.

**Ms HODGENS:** Thanks, Michelle, and thanks to the Committee for hearing us today. So as Michelle said, we have been working in the north-east of Victoria for 30 years and working with homelessness in that time. Homelessness across north-east Victoria is a growing problem, and what we are seeing is fairly alarming. So over the past year Junction has assisted about 1000 people who were experiencing or who were at risk of homelessness. This number would be the tip of the iceberg when it comes to what is actually happening in our community.

So just a bit of a brief about what homelessness looks like in our region: it is an infant who was born into homelessness because a young mother—some as young as 15—is fleeing family violence and finding refuge at our young mums unit. It is a child who is camping in a tent with their parent because their family cannot secure rental accommodation or public housing. It is a young person who has resided in out-of-home residential care because they have experienced neglect, abuse and ultimately trauma and are unable to live with their family or are in foster care and have to leave care when they are 18 and live independently despite not having the readiness or living skills to maintain that property—and also that connection, too; they do not have connections to those community members. It is a family that is fleeing family violence with nothing but what they are wearing and carrying. It is also a single man who is seeking support, knowing that he is on the bottom of a very large waiting list and that often the best we can do for him is a swag—and which we have got none of anymore, either. And the waiting list in Albury-Wodonga—or Wodonga, mostly—is around 12 years for a single person, which is fairly alarming.

It is an older person in their 50s or 60s, especially a woman, who has experienced relationship breakdown or is leaving family violence and often has never sought support from our agencies. And it is also a professional person that has used ice for the first time and then ended up with nothing, also having had their children removed from their care. We have seen police and nurses who have had a workplace injury and have a long-term mental health injury and who also ended up with nothing and nowhere to stay. So that is just a bit of a brief of what homelessness looks like in our region, I guess.

Now, every one of these 1000 people in Junction who we have supported has their own story. And I am happy to share one if you would like to hear it.

**The CHAIR:** We would love to

**Ms HODGENS:** Excellent, okay. We had a young person who came in seeking support about three years ago, and he was an 18-year-old. He had been homeless since he was about 14 years old. So he had never had child protection intervention; he just kind of slipped through the gaps. He somehow slipped through the gaps with education. He had not been seeking health support, so he had lots of broken bones that had never healed correctly, and his teeth required surgery because they were so damaged and because he had never looked after them either and had no access to toothpaste or dental care. So we worked really hard with this young person and got him transitional housing, which was the short-term housing. That was great, but we could not get him to actually move into the property, so it was about three months to actually get him to feel safe and stable enough to go into the home. And then for him it was about sleeping in the lounge room because he did not feel safe in his bedroom.

So working with him—we worked with him for three years—and actually trying to get him to find accommodation was almost impossible because he had so many barriers with his mental health and drug and alcohol use and he had low literacy. He really, really struggled to access employment, so it was like one step forward, 13 back, which was really challenging for him. And we really worked hard with our office of housing. We are very, very lucky in Wodonga that they are really client centred, so they actually took this young person out and they looked at all the single-bedroom properties in Wodonga that we do have access to and they said ‘Which property would you live in?’, and he was like, ‘None of them; I don’t feel safe in any of them’. So we were like, ‘Okay, back to the drawing board. We’ll come back to this’. It was just about building up his resilience and empowering him to make the next step into his future. We were really lucky that he actually overcame some of those barriers, and he moved into community housing through BeyondHousing, which was great. So he is going really successfully. So he was able to go and get the surgery he needed for his teeth, but

that took six attempts to try and get him to Melbourne and a lot of support around that. I am just describing the kind of significance of the barriers that some of our young people have.

**The CHAIR:** Do you have contact with him now?

**Ms HODGENS:** We have not for quite some time, but that is probably because we had a really dependent relationship and he said, ‘You know, I need to take the next step and I don’t want to have to call on you for everything’.

**The CHAIR:** Great.

**Ms HODGENS:** So he is always open to come—he can call us whenever he needs to, but he knows that he needs to take the next step for his journey; a great story for us.

So you have been given the statistics in our submission—which is highlights. We have submitted a long list of recommendations about the solutions to homelessness, but there is one solution in particular that we would just like to highlight, and that is around early intervention, for which I will hand over to Michelle.

**Ms FELL:** I have spoken with Tania about this this week, but for everyone else I will explain what I wanted to talk about. In our area, in Wodonga, we have been having a conversation around the Wodonga project. So the project is underpinned by the community of schools and services model, and that is an early intervention project. I guess that is the key message we are looking at, that we are generally working with people and trying to support people at that crisis intervention; however, we see a lot of the solution in the early intervention. This project is around supporting young people. They are in school, so it is around year 7 to year 12. It is undertaking a screening process of every young person in that school unless they opt out, and it is about identifying early risk indicators that may lead to potential homelessness or early school disengagement down the track.

This project was initially operated in Geelong, and they have had really great successes. So they saw a 40 per cent reduction in crisis presentation of young people and a 20 per cent reduction in early school leaving. So I think that is significant. This is a model that requires the community to come together and then build up. This is not a model where the government funds it and it gets put into your community and then you run with it. That has happened in certain areas, and they have not seen the results.

So what has happened here is the lead researcher in this space has worked with the local LLENs around Victoria. LLENs have had a discussion and NELLEN, our LLEN, thought this was a great opportunity and has then brought the community together. Junction has now taken on the lead and we have employed a project officer, which has been funded as a group and which has been really great and collaborative between Junction; NELLEN, our LLEN; Headspace; Gateway; and our local council. So we are in the exciting phases right now of starting that project work. We are looking at assessing the readiness of the community, because that is a really vital point. You cannot run this model if the community do not want it and are not ready. But we are really fortunate with our partnerships with our schools; they want us in the school. They want us to help the young people in that space. So right now we are assessing that. We will be looking at funding after that point, but I think it is a really positive development for our community to roll it forward.

I think this has moved over to Canada and Wales. They have had conversations in America. There are a few people in Queensland, New South Wales, the ACT and Victoria. So that is an exciting space for us. We have high hopes for this program, and hopefully we do get the funding and we achieve the results—or better—that the Geelong Project has. So that is a little bit of where we are trying to go to try and assist with some of the homelessness presentations that we are seeing in our community.

Again, thank you for coming and letting us speak today. I am sure there are some questions you may want to ask us or explore further, so I will hand it back over to yourselves.

**The CHAIR:** Thanks, Michelle, and that is great news. Just one quick question to start with: do your services—because just listening to the small snapshot you gave of some of the services—overlap with someone like NESAY?

**Ms FELL:** NESAY is situated, I guess, more in the Wangaratta down to Benalla and Mansfield area. So each program can be funded with different requirements. So NESAY and ourselves both hold a program called Better Futures. We would generally go Corryong and up to here, and NESAY would then go from Wangaratta down to Benalla and Mansfield.

**Mr BARTON:** You are geographically spread.

**Ms FELL:** Yes, geographically. So that sets how we would overlap. There are some programs where a young person may be transient, especially due to homelessness. You know, sometimes they are looking at, 'Where is a house? I will go'. And then it is around having a conversation with the client themselves and saying, 'Are you ready to transition to another service?', working with that service, 'How would you hand over?', because the client needs to feel safe and secure. They may have shared their story with one practitioner already. Do they want to share it again? So it is about services being flexible but also being in partnership to identify where is the best need for the young person or adult.

**Mr BARTON:** I will start off. Thanks, ladies, for coming in. One of the overwhelming themes when people are coming to us is, 'We need more houses'.

**Ms FELL:** Yes.

**Mr BARTON:** That is a given. Immediate crisis—we are not handling that well at the moment. Only three in 10 people are able to get emergency housing each night. That is not good enough. Put that aside. We are going to build lots more houses, yes. That is what we need. Housing First, we all believe—well, I cannot speak on behalf of the Committee, but I will speak on behalf of Rodney—that we have got to keep people in housing before we start dealing with any other issues or those things. The best people to make decisions about what should happen are you. You tell us: what do you think needs to happen?

**Ms FELL:** I think the Housing First is necessary. I think without a house you cannot work on the support needs or potentially the barriers or challenges that may have led someone to homelessness. But you also need to time that, really quickly, with the support services. If you put someone in a house, four walls and a roof does not solve their concerns either.

**Mr BARTON:** That is the key.

**Ms FELL:** So I think we need more housing stock, but we also need to look at the support that we have. And we also need to look at the length of the support periods. I am not sure if other people have spoken on this, but most of our homelessness-based programs are 13 weeks. This young person that we had here was three years. Luke was three years of support. Were we funded to do that?

**Mr BARTON:** So much for your 13 weeks.

**Ms FELL:** And that is the thing; you do not want to close the door to a young person and say, 'Sorry, your time's up now'. You have probably just built a relationship. He has just got trust. He probably has not even disclosed what is really going on yet. So I think that—marry up.

**Mr BARTON:** No, that is one of the themes that is coming through, that people have been highly critical of the—it is just not flexible enough.

**Ms HODGENS:** And even people going to the office of housing, like, yes, that is fabulous; they do have a house that is long term. That is great news. But our service is actually supposed to stop once they are housed. And when I was working in the youth space we actually could not stop because that is when the real work—yes, they have been in transitional housing; they are housed, so we can start working on their barriers. But in fact it is still temporary, so they do not feel safe. They do not feel like it is secure, so once they get into long-term housing that is when they actually relax and go, 'Hang on, now I can start working on something'. So, yes, we are funded to stop, but sometimes we have to hang on a little bit longer. But there are bottlenecks and waiting lists, and we do not have enough case management to manage that.

**Mr BARTON:** I think Ms Patten was just touching on a little area—I think she was heading down a particular way. Are we seeing overlap between the services?

**Ms HODGENS:** As in we are both working—

**Ms FELL:** Are you saying if someone—I guess to someone who is in—

**Ms LOVELL:** If multiple services are funded to do the same thing in the same area.

**Ms HODGENS:** Oh, not in our area.

**Ms FELL:** No.

**Ms HODGENS:** No, we are very different. In Wangaratta we will work with adults, over-25s. In Wodonga we work with under-25s in the homelessness space.

**Mr BARTON:** So there is an understanding among the services here?

**Ms FELL:** Yes. We are quite clearly funded in a rural area. There are not a lot of providers, which I guess can create other challenges. BeyondHousing provides the stock, we provide the support in Wodonga. In Wangaratta young people are supported by NESAY, we support adults and BeyondHousing provides the stock. Like, it is quite clear cut. I guess in metro there are a lot more providers, which I could imagine would provide more complexity, but in our regional area that is not the case. And what we find is there is not really a service provider that provides that holistic case management once they are in the office of housing. There is not an overlap in that space.

**The CHAIR:** That is a space that is really lacking.

**Ms FELL:** Yes, our service is for if you are at risk of homelessness or you are experiencing homelessness. If you have got an ongoing house—

**Ms LOVELL:** DHS did have a program called Services Connect, which provided that service, but this Government has disbanded it for some reason—and yet it works. One of the key themes that is coming through to us at every hearing is that people are very frustrated by the silos—this service delivers this and this service delivers that—and also the 13 weeks, which you mentioned, which creates the revolving door of them coming through for more services. But there does not seem to be a lot of collaboration to address the clients' holistic needs at the moment because of the way things are funded and also because we are funded for throughput not for achieving outcomes. So one of the things that the Committee could recommend is a recommissioning of the homeless services sector that would fund for collaboration to address the clients' needs holistically and also to fund for outcomes rather than throughput. Would you guys be supportive of something like that?

**Ms FELL:** We definitely need to focus on the outcomes of the people that we are supporting right now, because I think we have been very clear that 13 weeks—things are not cold and they do not fit into a box. We are talking about people's lives here. I think certainly we have moved towards working more collaboratively, but people are stretched really thin; I think that really has an impact on collaboration. I think a lot of practitioners have absolutely great aspirations to work collaboratively, but if their caseloads are huge or if they have got clients in crisis, they are trying to help the needs. Sometimes it is hard to have that networking capacity or those collaborative meetings or—

**The CHAIR:** Yes.

**Ms FELL:** Yes, there are challenges there in that space.

**Ms LOVELL:** But that is where something like services can be provided—one caseworker instead of 27 caseworkers to a client actually brought that all together for that person rather than them—as you say, when they are in crisis they are not ready to deal with things, so they cannot cope with all the meetings that they have to attend with all these different caseworkers and things like that.

**Ms FELL:** But then you can also have some people who are experiencing homelessness who may just have our homelessness case manager. They may not have presentations of family violence or drug and alcohol or mental health—or they are not ready to admit that. So sometimes it is not about that there are that many people involved; it may just be a homelessness worker, because that is that physical need which they are at the point of being able to admit. There is not anything else there. That might come later, where there might be additional

caseworkers in that space, but sometimes that homelessness case manager might be actually trying to work with them around drug and alcohol to a degree and mental health to a degree and potentially family violence to a degree. So I think the requirements of our practitioners are also ever increasing, to be a specialist in homelessness but really a pseudo-specialist in all other areas. I think it is an interesting space.

Again, you start looking at the out-of-home care space, where young people are leaving care and we talk about support periods. We can have some of these children from 12 or younger up to 18 and they exit. They might go through our Better Futures or leaving care program and that might be to 21. We have had them for over half their life. We have still got young people calling our residential carers where they have lived and where we have worked. In one month it was 10 hours of previous clients calling to have a conversation, because it is still their support as well. So there are still those linkages to, sometimes, an agency when that agency has also been like a parental figure, and sometimes that can be challenging when you are looking at collaboration and having one person—or if they go to a different agency, there are a lot of complexities when you get into that space as well.

**Ms LOVELL:** Have you had any exposure to the Education First Youth Foyers and the holistic support that they provide?

**Ms FELL:** They are in Goulburn. No. I know Kat has attended a meeting regarding a youth foyer in the Wodonga area. There are conversations that have been had. I believe that is more sitting at the council now.

**Ms LOVELL:** Council are very keen on it.

**Ms FELL:** Yes.

**Ms LOVELL:** And is the need there?

**Ms HODGENS:** I believe so, definitely in Wodonga. Working with the youth in the homelessness space, there were so many people that were accessing the senior college—surprisingly still engaged in education, because that is their only safe place; that is the only place they feel connected—that actually could have better outcomes for their education and employment opportunities if they had a house.

**Ms LOVELL:** If they had a secure place to live in.

**The CHAIR:** If they had a safe place to live.

**Ms HODGENS:** So we had the Kids Under Cover house. You would have obviously heard about them. Back in prehistoric years we actually had a home. We had a KUC home, and unfortunately it did not work out with termites and whatnot, so we had to give it back to the department. But the KUC house was great because it was right near the school, they could walk to the senior college and it had a lead tenant, so it was very well supported. They could go to school and then they had somebody to come home to every night and help them with their living skills, so working alongside them. That was a really great opportunity. But yes, definitely I think that would be fabulous for Wodonga. And it is so hard because we are in a regional area and very far away from metro. We do not really get to see the stuff that the Geelong and Sheppartons get, because they get more of those pilot projects, whereas we are kind of forgotten about sometimes.

**The CHAIR:** I promise you you are not forgotten. I promise you.

**Ms LOVELL:** Bill Tilley does not let you get forgotten.

**Ms FELL:** I guess there is another model in that space that we have been looking at. We are looking at Village 21, which is also under KUC as well. I am not sure if you have heard much about that. So that is a new model. It is looking at young people—

**Ms LOVELL:** I have never heard Kids Under Cover called ‘KUC’ before, but I am going to use that now.

**Ms FELL:** Really? That is what we refer to it as. Maybe it is a country thing. I better say ‘Kids Under Cover’ now. So we have had some conversations with them, and they have got a model in Melbourne. I am not sure exactly which suburbs there, but it is for people leaving care but also could be applied to a youth space. There are challenges with lead tenants. We have two lead tenant properties in Wodonga still. There are

challenges sharing young people with an adult in the house. Sometimes it is not suited to everybody. So this new model is around having, I guess, a block and you having individual units or apartments, and then you are having lead tenants but also live-in mentors and people on the block. So that is something that we have been touching base with them around and where that is up to. It has taken, I think, a little bit longer to become operational, but we are interested to see how that rolls out and whether there is something we can do rurally as well to support young people, whether that is leaving care-specific or youth-specific.

But I guess even our conversation today has made me reflect that we talk a lot about youth. There are a lot of models going into that space, but there is another cohort—we struggle with those from 18 to 21. They cannot go to a youth refuge. They might not be eligible for a women's refuge, and we do not really have men's shelters anymore. There is a big gap in that space other than HEF-funded hotels. But we are in a space now where there are limited hotels and not everyone wants to take that funding as well. So there are some challenges and there are some opportunities.

**Ms HODGENS:** The cost of accommodation in the regional areas is quite expensive, so actually trying to get HEF for a night is really challenging, especially if you are a woman with six children and you do not feel safe. Some of the places that we can afford are really inappropriate so are not an option. We are very lucky that the weir have taken in some of our families. If you have transport, that is great, but if you do not, then you are kind of stuck.

**Ms FELL:** And heaven forbid there is a local event on—you know, your winery weekends, those sorts of things. They have a really huge impact.

**The CHAIR:** Of course.

**Ms VAGHELA:** Thanks, Katharine and Michelle. You mentioned the case of an 18-year-old and what he went through. How often do you see such cases where the person has slipped through the cracks?

**Ms HODGENS:** More often than not, which is really sad. Yes, an incredible amount of people have slipped through, and even those that are just on the cusp of 17. We have a few young people at the moment that are 17, so they are still classed as children, but when we are trying to say, 'Actually, you can't go back home', child protection cannot take them because of the huge numbers of cases that they currently have. So the 17-year-olds do not get support, but they are still children, and even if they have been in care before, so when they were 15, because they are not on an order at their 16th birthday they actually are not entitled to leaving care, so the amount of support for them is zero. So we see a lot of people coming back through that have actually been in care before their 16th birthday.

**Ms VAGHELA:** And what is the reason? Why do they slip through the cracks? Why? What are the main reasons?

**Ms HODGENS:** That is a really good question. There are so many. We have the Navigator program, which is trying to pick up the most disengaged young people that are not attending school, but that is those that are still known to the schools. If they have dropped out of the school, if it is from primary school to the middle-years college or the middle years to the senior, then they have lost. There is nobody that has eyes on them. If they have never been known to child protection, if the parents have never sought help for them or accessed any services, there is kind of no eyes on them, so they just get forgotten.

**The CHAIR:** Is there something we can do to ensure that does not happen?

**Ms FELL:** It is an early intervention. I think we have spoken about the child protection system this week around their increasing demands. I think the threshold for risk has also increased, and what a community services organisation now sits with is higher as well. But the community services organisations, we are voluntary. Services may be getting involved, like family services or Child First, but if that family does not want that service and it is not reaching the threshold for a statutory involvement, then that has an impact as well. I think the complexity across all of our community is significant.

**Ms HODGENS:** Even looking at primary schools, we had a referral for a young girl. She was six years old and she was going to school, but she was not present. She was sitting in class but she was not engaging. Things were definitely breaking down at home and there was nothing really—it was only that we could support her

with family violence counselling that we were able to put eyes on her. But the school can see that there are all these issues but that it is not enough risk. It is looking like her trajectory will not be successful, because she will start disengaging from school, she will stop accessing services, and that is where it slips. There are no early intervention programs there—

**The CHAIR:** Jumping in.

**Ms HODGENS:** Yes.

**Ms MAXWELL:** And at that age you need the parents' consent too, and often they will not consent, so that is another way that these children slip through the gaps, because the parents just will not allow services in the home.

**Ms FELL:** And that is what is really hard. When you are getting up to 15–16 a young person can provide informed consent and be involved, and that is where that gap is between parents wanting to be involved and then the statutory system saying, 'Well, this is what has to happen'. And we have got a program called Finding Solutions, which in essence is kind of conditional consent. Well, if you do not engage with the voluntary service, we then need to report back to child protection. Sometimes that is enough of a carrot for parents to go, 'Oh, this is serious, I need to do something'. Sometimes they are like, 'I don't care still'. I think our agency prides itself on assertive outreach. If a client says, 'No, I don't want to talk to you today' or they swear at us and they hang up on us, yes, we will give them a bit of time and maybe we will text, maybe we will send a letter, we will try calling again, but then it is also trying to listen to their voice. So where is that line between being assertive but also being respectful?

**The CHAIR:** Yes, that is right—not breaching those boundaries.

**Ms FELL:** Not badgering them, yes.

**The CHAIR:** I was interested in your notion of incentives—it really sort of stuck out, this notion of incentives for clients to stay in homes. I think that is a really interesting idea because of that kind of recidivism in homelessness. I just wonder if you could expand on how you see incentives working. I see you have used it a couple of times—incentives to landlords, incentives for people to take on skills training.

**Ms HODGENS:** So when we are talking about incentives to landlords, the New South Wales side, Albury, has a program where landlords actually have private rental properties and they say to an agency, 'Here, can you please manage this house'. It has access to our clients that are homeless, and then they kind of manage that, and if anything breaks down, they actually fix it. So more people give their private rentals because there is an assurance that if anything gets damaged, then it will be fixed. So that is a great incentive. It is actually giving landlords incentives to actually want to rent to our clients, because we find that so challenging. Even as a landlord myself when I am talking to a private rental they will give me all the doctors and all the people that make quite a lot of money. It is not a great property, but they are like, 'Yes, we'll show you only the doctors. Don't worry about anybody else, because they are not important. We only want you to pick from this group'. So landlords are not even seeing people that experience disadvantage. I think that is a huge gap in our area.

**The CHAIR:** Do you happen to know what that program is called in New South Wales?

**Ms HODGENS:** It is Homes Out West that manages that.

**Ms FELL:** And we have a couple of staff that do have their rental properties in that space. Are they are community and socially minded? Yes. Could it be promoted wider? I am not sure. The first time I heard about it actually was from them when they had been involved in it, because it is over on the New South Wales side. But there is definitely not that in Victoria.

**The CHAIR:** Just following through the other areas where you are saying incentives for public housing tenants to purchase housing and I think that incentive about managing a home, have you seen that in practice?

**Ms HODGENS:** I believe that it happened a very long time ago in Wodonga, where actually people contributed to helping maintain their house as well. So if there was a broken door or something, they would be the ones that would mend the door. It was actually building them up to have some ownership of their homes

and be proud of their homes. So then eventually it would go into their names and that would be their place and they would contribute money, like a mortgage—so they are paying rent and then that turns into a mortgage.

**Ms LOVELL:** There were some public housing properties that were done like that under the Cain and Kirner era that ended up with people having huge debts, and they still owe more on the houses than what they own in equity on them, so it was a very flawed system.

**Ms HODGENS:** Yes.

**The CHAIR:** I think where I was struck was in incentives for people to stay in their houses, to maintain that and manage that. I guess that is that notion of maintaining that support once someone is in the housing system and giving them goals within that.

**Ms HODGENS:** Yes.

**Ms VAGHELA:** I have repeatedly heard the service period is for 13 weeks and I have also heard repeatedly as well that that is not the optimum duration. What do you think would be the optimum duration instead of 13 weeks?

**Ms FELL:** A minimum of six months.

**Ms HODGENS:** Yes, I do not know whether time frames should exist.

**Ms VAGHELA:** Because we have heard many times that 13 weeks is not enough—they go and then come back again.

**Ms HODGENS:** Yes.

**Ms VAGHELA:** So if they change to any extent, what would it be if you were asked to pick a reasonable time frame?

**Ms HODGENS:** I think it is hard putting time frames on things, because it is based on the person's readiness and their capability, so that could be a long journey. So when you are giving time frames, it is saying, 'Well, we've got 13 weeks, so we've got to do it quickly'. It actually is not a genuine action. They will do things really quickly, but is it sustainable? 'Okay, I'll go to do drug and alcohol counselling.' But are they ready for it? Probably not. So I think it is hard to put time frames on things, because that is indicating that we have got to finish. We are always working to closure because that is the goal, but I think time frames are challenging. Twelve months, two years—it is a guideline, but is it set in stone? It is hard. I think it is really hard putting time frames on anything.

**The CHAIR:** That greater flexibility seems to be a common theme.

**Ms HODGENS:** Yes.

**The CHAIR:** I noted in your submission you mentioned the impact of the bushfires, which obviously you spoke about and touched on now as well. You said:

In our region, public housing stock is "on hold" until the end of February ...

What does that practically mean?

**Ms HODGENS:** So with the bushfires, because they hit Corryong, we actually had to put all of our office of housing properties on hold so people that were displaced could move into the office of housing properties until they were able to rebuild.

**Ms LOVELL:** So they will not take anyone off the waiting list.

**The CHAIR:** No. So people who are already homeless stay homeless.

**Ms LOVELL:** They stay homeless because people who lost their homes in bushfires get priority.

**The CHAIR:** They get priority on this.

**Ms FELL:** That is what we have seen. I guess probably the impact is the reduction in resources for those currently experiencing homelessness. So we are looking at even Foodshare. They are a great support for our agency. So obviously that has an impact when food is going to other people. For your transitional housing and your office of housing it is probably more that reduction. I am sure there are going to be further presentations of homelessness down the track due to the impact of mental health, but in that crisis phase that was probably the biggest impact we saw for our current clients.

**Ms LOVELL:** Although if you saw the reserves of donated food and stuff like that, I think Foodshare has actually benefitted from it.

**Ms HODGENS:** Yes.

**Ms LOVELL:** Because it was more than we could possibly use.

**Ms VAGHELA:** You made one of the recommendations to the Committee in terms of early intervention services. Are you talking about just the Geelong Project or are there other things that will also help in early intervention? Because we heard about the Geelong Project through other presenters as well. I do not know much about that project, but I would like to know more. Is that the only project or are you talking about more other things? Right at school, very early on, we are able to identify that something is not right.

**Ms FELL:** I definitely think there is early intervention. You have got your universal services, like your maternal and child health nurses, your three-year-old kinders and that being brought out further. There are those sorts of interventions before you get into services like ours, the secondaries and tertiaries. There is a range of programs I guess we have been involved in. With Navigator there are questions: why isn't that earlier? If we are starting with a 12-year-old at less than 30 per cent engagement, what has happened for a 12-year-old to get to that point in the family services?

I definitely think as well that family services, there are more resources going in there to try and gain that early intervention, but it is also not a requirement. I think it comes to that topic again: families have to want to be engaged and, I guess, prioritise that support for them and the child to participate in that service. So I think there are a range of programs and systems that we can put in earlier. I guess this is a new evidence base that we have looked at, and this is quite a different way of operating it. It is looking at system reform, but even in this model is there potential in the future for it to start at a younger age group?

We talk about transition periods being hard—years 5 and 6 into 7. The transition in our area seems quite strong between kinder and prep, but what happens between prep and, say, year 3 or 4 and then 5 and 6? And then in Wodonga, not in Wangaratta, we have got an extra transition between 9 and 10. There are things happening in these spaces as well. So right now early intervention at year 7 is early intervention, but it certainly could go earlier.

**The CHAIR:** It may be too late, though.

**Ms FELL:** Yes. It is better than where we are, but—

**The CHAIR:** But if they are disengaged at 12, that is right.

**Ms FELL:** And I think we have funding under the national partnership between State and Federal for a lot of our children's programs, our children's specialist case managers, but we are also in a funding cycle where we find out only a month or two beforehand whether it is going to be funded again for another 12 months or two years. That is meant to be a focus on children that goes down to infants. They are in the homelessness space. We are trying to prioritise their needs to try and capture them early and make sure they are supported. You try and keep a consistent workforce to provide that specialist skill to support children, but we actually do not know if our staff are going to have a job. We have been in that space for 10 years for those children's programs.

**The CHAIR:** And that is joint funding?

**Ms FELL:** Yes, from State and Federal. So often the State comes up and says, 'Yes', and then the Federal—

**The CHAIR:** But we have got to wait for the feds.

**Ms FELL:** Yes, and there have been conversations around that our homelessness rates are not decreasing and why are we putting money in the homelessness space. Well, maybe the problem is bigger than we expected and we need to put different supports in or additional supports.

**The CHAIR:** Or spend it differently?

**Ms FELL:** Yes, potentially. Or look at different projects, different programs, you know?

**Ms MAXWELL:** Family-based programs that identify the gap of those young years in primary school is something that is not focused on enough, and a lot of homelessness is young people having to leave for whatever reason. And if people can get in early enough and support those families to keep that together through a strength-based approach rather than a punitive approach, that is another way to contribute to reducing homelessness or people becoming at risk of homelessness.

**Ms FELL:** And I think it can be challenging too because I think we are all identifying that early intervention is a great avenue; however, we have still got crisis presentations, so we need to continue to fund the crisis presentation support services while adding resources in the early intervention space before the early intervention starts to impact the decreased presentation at crisis presentation. So it is nearly like a double investment for the longer-term investment of reducing your crisis presentations.

**Ms HODGENS:** But also I think there needs to be some more support around adolescents that use violence in the home. The family violence space is great at the moment. There is so much coming out of that. But I think we are moving away from using the terminology ‘perpetrator’ because they are not perpetrators, they are victims in their own right because of what they have seen. I think once young people are using violence in the home—and we have seen it this week in our Navigator program—they get kicked out and then there are no options for them. A 15-year-old person and he has got nowhere to go because he has been abused his whole life and now he has retaliated and mum’s like, ‘No, you can’t come home’. So he’s like, ‘Oh, I don’t have any living skills. I’ve got nowhere to go’.

**The CHAIR:** And nowhere to live.

**Ms HODGENS:** And obviously child protection takes a bit to get on board too because of the long waits.

**Ms MAXWELL:** And that age is not their priority.

**The CHAIR:** No, that is right.

**Ms HODGENS:** No, he is on the cusp. Is he going to go into residential care at 15? That is pretty unlikely, unfortunately.

I just want to highlight also—sorry—I forgot to mention people exiting prison. I know there is a lot of—

**The CHAIR:** Yes, you touched on it, but—

**Ms HODGENS:** Yes, there is a lot around that they should not be exiting from prison into homelessness—

**The CHAIR:** But they are.

**Ms HODGENS:** Unfortunately it is definitely the case locally in Wodonga. We are seeing a lot of men especially that come to us and they are like, ‘I’ve got no housing application, I’ve got no home and I’ve got no connection to this place, but I hear Wodonga’s great because you have houses’. So we are seeing it, and it is on the way to Sydney, so it is kind of like the gap in the middle where people go, ‘Oh, we’ll just stay here for a bit’. So then we get a bit overloaded with people. And we have got the prison in Beechworth, so people come straight from there.

**The CHAIR:** That is right.

**Ms MAXWELL:** But then that also makes this all-inclusive. There is another avenue that we have to consider—the whole justice system. What are they doing to prepare that person to come out of prison?

**The CHAIR:** Absolutely. And also because we have changed to parole conditions and made it a lot harder to get parole, you actually are getting people who are going out straight into homelessness because there is nothing to keep them within the system.

**Ms HODGENS:** No, and they go back into prison because they have got nowhere to go.

**Ms VAGHELA:** It is just a vicious cycle.

**Ms HODGENS:** We hear it all the time.

**The CHAIR:** It is a very expensive way to house people.

**Ms HODGENS:** Yes, and they are like, 'I've got nothing else. At least I get food, I get routine, I get education, I get money. So why would I not?'

**The CHAIR:** Yes, and it costs the community around \$150 000 a year. You could get a pretty sweet place for that.

Guys, thank you so much. Thank you so much for the work that you are doing and the passion that is obviously behind it. You have been very inspiring. You will receive a transcript of this. Thanks again.

**Ms FELL:** Thank you very much.

**Ms HODGENS:** Thank you for having us.

**The CHAIR:** No, thank you. We hope the project gets underway. We are going down to Geelong, so we will be hearing all about it soon.

**Witnesses withdrew.**