ENDING HOMELESSNESS IN AUSTRALIA

An evidence and policy deep dive

Bulletin No 1
Ending homelessness in Australia: Understanding homelessness; taking action
Ending homelessness in Australia: An evidence and policy deep dive Bulletins

- Bulletin 1: Ending homelessness in Australia: Understanding homelessness; taking action
- Bulletin No 2: Findings from the Advance to Zero database: A decade of community-led data collection among those experiencing homelessness in Australia’s cities

The Ending Homelessness Report


Contact

Professor Paul Flatau,
Centre for Social Impact,
The University of Western Australia,
Crawley, Western Australia, 6009
Paul.Flatau@uwa.edu.au
KEY POINTS

1. Understanding homelessness is the first step to ending homelessness. To end homelessness in Australia, we must understand its structural drivers and the individual risk factors that impact on homelessness. Ending homelessness also requires a strong enabling environment built on adequate funding and resourcing of policies and programs; strong representation, voice, and advocacy; collaborative efficacy between services working with those experiencing homelessness; culturally appropriate service delivery; and effective monitoring, target-setting, and research.

2. Ongoing government commitment to a national end homelessness strategy by both commonwealth and state and territory governments is critical to the achievement of a goal to end homelessness. The Rudd Government’s 2008 white paper *The Road Home: A National Approach to Reducing Homelessness* represented the first national homelessness strategy built on ambitious targets on reducing homelessness. The mantle of an ambitious agenda on ending homelessness has since fallen on homelessness services working in collaborative programs as well as state and territory governments.

3. The number of people experiencing homelessness has increased every census period as has the number of people identified as sleeping rough. There are high rates of youth homelessness and Aboriginal and Torres Strait Islander peoples are significantly overrepresented in homelessness statistics and the service system.

4. Specialist Homelessness Services (SHS) data reveal high rates of support for Aboriginal and Torres Strait Islander people, women and children experiencing family and domestic violence, and people with mental health issues. Across both the Census and the SHS data, homelessness among older people (55 and over) has increased in recent years.

5. The majority of those experiencing homelessness at the beginning of a SHS support period remained homeless at the end of the support period reflecting limited permanent housing options and long wait lists for public housing.

6. The vast majority of clients *at risk* of homelessness that begin a period of support remain housed at the end of the support period; however, 1 in 10 clients at risk of homelessness end up being homeless at the end of the support period.

7. SHS services aren’t adequately resourced to address current demand for services for all those that request support and to find permanent housing for all those who need it; across Australia, there were around 95,300 unassisted requests in 2019–20 with three in five involving short-term or temporary accommodation.

8. Increasing housing stress levels across Australia exist across Australia and are exacerbated by recent sharp rises in rents in the private rental market in 2021. The availability of public housing and Aboriginal and Torres Strait Islander community housing has decreased with longer waiting lists for public housing.

9. Poverty rates remain high in Australia with adverse consequences for homelessness and high youth unemployment rate continues to place pressure on youth homelessness.
10. Domestic and family violence is the leading cause of homelessness for women and their children and also for children. Family and domestic violence is also a trigger for early onset homelessness among adolescents.

11. Findings from the national Advance to Zero database are contained in Bulletin 2. The majority of those sleeping rough are assessed as having very high needs requiring support to access permanent housing and to maintain that housing over time in a supportive housing model. On average, those surveyed had experienced homelessness for an average of 3.8 years.

12. Advance to Zero respondents reported a range of physical, medical and mental health conditions: nearly all of which were significantly higher than rates seen across the general population. A large proportion of respondents report they have been in prison or in juvenile detention, with three times as many rough sleepers reporting having been in youth detention than non-rough sleepers. Four in ten respondents report being the victim of attack since becoming homeless. The majority of respondents are in receipt of regular income, but most do not have enough money to meet their basic needs.

13. Building on the history of homelessness policy and practice over the last 15 years and the evidence base built up from our analysis of the Australian Advance to Zero data, we identify five key actions to end homelessness in Australia:

1. Leadership and proactivity at the Australian Government level and a national end homelessness strategy applying across all states and territories.

2. An increase in the supply of social and affordable housing directed to an end homelessness goal.

3. Comprehensive application of Housing First programs linked to wrap-around support for those entering permanent housing with long histories of homelessness and high health and other needs.

4. Targeted prevention and early intervention programs to turn off the tap of entry into homelessness which address the underlying drivers of homelessness including housing access barriers, family and domestic violence, mental health and drug and alcohol needs, poverty and unemployment.

5. Supportive systems and programs which build the enablers of an end homelessness program include: advocacy, commitment, and resource flow to ending homelessness; effective service integration; culturally safe and appropriate service delivery including expansion of Aboriginal and Torres Strait Islander-led and controlled services to help address high rates of homelessness in their communities; and improving data quality, evaluation and research around ending homelessness in Australia.
TO END HOMELESSNESS, WE MUST UNDERSTAND IT

If we are to end homelessness in Australia, we first need to understand what drives homelessness; the circumstances, journeys and goals of those experiencing homelessness; and, what works in reducing homelessness. Effective action requires a mapping of the current policy and practice environment and a solid evidence base on the current state of homelessness. This will provide a platform from which policies can be developed to both address underlying drivers as well as meeting the challenge of providing permanent housing and support to those experiencing homelessness.

The *Ending homelessness in Australia: An evidence and policy deep dive* report develops an ending homelessness model which conceptualises the structural drivers and individual risk factors that impact on homelessness and those system enablers that can act to reduce homelessness. To effectively address homelessness requires adequate funding and resourcing of policies and programs; strong representation, voice, and advocacy; collaborative efficacy between services working with those experiencing homelessness; culturally appropriate service delivery; and effective monitoring, target-setting, and research.

Importantly, to effectively end homelessness means putting those experiencing homelessness, their journey and goals at the centre of thinking and policy and practice action.

The report uses the ending homelessness model in a number of ways: as a framework for the empirical assessment of the state of homelessness itself; as a means to understand the drivers into and out of homelessness; and a means to assess the efficacy of the homelessness service system response. The structural drivers and individual risk factors that impact on homelessness include housing affordability barriers and housing supply constraints (particularly in terms of social housing); poverty, racism, discrimination, and labour market barriers; mental health issues, long-term health conditions, and drug and alcohol risk and harm; family and domestic violence; the long-term impacts of neglect and abuse; the effects of juvenile detention and incarceration; and personal relationship break downs.

These structural and risk determinants influence not only the extent to which homelessness occurs in the first place, but whether it is situational and short-term in nature; episodic (homelessness experienced at different points when one or more drivers impact on a person or family’s journey) or chronic long-term homelessness (involving long periods of rough sleeping and supported accommodation). **Situational, episodic, and chronic rough sleeping homelessness are vastly different experiences that require different responses.** Chronic homelessness exhibits significant hysteresis effects where current homelessness is impacted on the past history of homelessness and is associated with high health needs requiring not only a permanent housing response but one involving long-term supportive housing. In setting out the drivers of homelessness, it is important to recognise the life-cycle nature of homelessness. High levels of intergenerational homelessness and childhood and adolescent homelessness exist among those experiencing homelessness. In this sense, homelessness can be ‘passed through’ generations.
**Figure 1 – Ending Homelessness in Australia Model**

**Structural Drivers of Homelessness**
- Supply of social and affordable housing inadequate to meet need
- Poverty
- Employment barriers
- Poorly resourced homelessness, housing and related support services (mental health services, AOD services, out-of-home care, justice and employment services)
- Inadequate support on leaving jail, juvenile justice, out-of-home care and juvenile justice
- Indigenous intergenerational trauma and loss of land, control and culture from colonisation
- Racism
- Gender, racial, age, sexual orientation and disability-based discrimination
- Patriarchy, sexism, male entitlement and societal or cultural norms supporting male violence

**Individual-Level Risks of Homelessness**
- Barriers to accessing permanent housing
- Imminent eviction
- No employment or low wage employment
- Low education and training qualifications and skills
- Low levels of income and wealth
- Family and personal relationship instability and breakdown
- AOD dependence, misuse and harm
- Parental/carer homelessness, mental health and alcohol and AOD misuse
- Experience of family and domestic violence
- Mental health conditions
- Long-term chronic health conditions
- Limited personal support networks
- Loss of cultural identity and cultural supports
- Experiences of violence and trauma
- Leaving jail, health facilities, out-of-home care and juvenile detention without support

**Situational Homelessness**
- One-off events linked typically to single causal pathways and long histories of housing

**Episodic Homelessness**
- Churning in and out of permanent housing
- Periods of stability and instability triggered by events from one or more causal pathways

**Chronic Homelessness**
- Homelessness occurring over long periods (largely rough-sleeping in nature) with brief spells of housing
- Multiplicity of causal factors with path dependence/hysteresis drivers of further homelessness
- Health conditions and mental health impacts of homelessness
- Signalling effects of gaps in housing history
- Stigma effects
- Acculturation

**The Journey from Homelessness to Permanent Housing and Lifetime Wellbeing**
Building on the strengths, navigation capabilities and resilience of those experiencing homelessness and interdependent support

**Ending Homelessness in Australia**
- Increase the resource base and diversify funding sources
- Collaborative efficacy and culturally appropriate service delivery
- Representation and advocacy
- End homelessness targets and associated monitoring and evaluation
- Social and affordable housing options
- Mental health services, AOD services, out-of-home care, justice and employment services
- Supportive housing

AOD: Alcohol and Other Drugs
Homelessness in Australia has been a prominent focus of social policy and practice, particularly since the Rudd Government’s 2008 white paper *The Road Home: A National Approach to Reducing Homelessness*. The *Road Home* set ambitious targets to provide supported accommodation to all rough sleepers and halve all types of homelessness by 2020. It also provided a framework to achieve these targets. Programs using different approaches were trialled nationally within the homelessness space during the period between 2008 to 2013. Australian evidence began to build for new methodologies and means to address the growing issue of homelessness across the country.

The *Road Home* created a shift in rhetoric within the Australian homelessness practice and policy space. Stakeholders in the homelessness space were emboldened to believe that homelessness could be ended. The shift in rhetoric led to action, and collaboration across homelessness organisations and sectors to improve outcomes for people experiencing homelessness and more particularly, end homelessness.

Unfortunately, the *Road Home* program of work and goals of halving homelessness by 2020 were not continued by the Abbott Government. The Australian Government continued to provide core homelessness and housing funding in partnership with state and territory governments and separately fund an effective youth homelessness program (the Reconnect program) and homelessness-specific programs in aged care. **However, the aspiration to significantly reduce or end homelessness shifted to individual homelessness organisations, collaborations of homelessness organisations, peak bodies of organisations and state and territory homelessness housing and homelessness strategies and responses.** These actions have begun to fill the void left by the Australian Government in terms of an overarching homelessness response which espouses strong goals around reducing and ending homelessness.

Australian homelessness agencies and state governments drew strongly on a range of developments in the international homelessness space re-imagined and revised for the Australian environment in the period immediately prior to, and following the publication of the *Road Home*. Programs were implemented in Australia drawing on the Common Ground supportive housing congregate housing model for rough sleepers; the Street to Home initiatives; the 100,000 Homes Campaign led by Community Solutions in the United States; the emergence of Housing First initiatives, city-led plans to end homelessness, and the Foyer model initiatives in the youth homelessness space.

State and territory governments have increasingly taken a stronger role in advancing an aspirational homelessness reduction program. Each state and territory government is required under The National Housing and Homelessness Agreement (NHHA) to develop and implement a homelessness strategy. The strategies developed by state and territory governments have provided new funding to homelessness services, particularly around Housing First initiatives, including funding for Aboriginal and Torres Strait Islander-led programs as well as the Advance to Zero projects developed by homelessness services. In addition, state and territory governments have recently committed to increasing the supply of social housing after a long period of stagnation in funding in the public housing sphere. And many, but not all state and territory governments, took a leading role in providing temporary accommodation, and subsequently permanent accommodation, for rough sleepers during the COVID-19 lockdown period.
There are three major homelessness data sources each with its own methodology and scope. The Census of Population and Housing provides an estimate of people who, on census night, fall into one of the designated categories of homelessness—those sleeping rough; those in supported accommodation for people experiencing homelessness; those estimated to be staying temporarily with other households; those in boarding houses; in other temporary lodgings; and those in severely overcrowded dwellings. The Australian Institute of Health and Welfare Specialist Homelessness Services (SHS) data who were experiencing homelessness or were at risk of homelessness and sought help from government funded SHS. In contrast to the Census, the SHS data is a support-based dataset which covers all support periods through the year; and excludes those in severely overcrowded dwellings. The third major data source is the Advance to Zero database. Results from the Advance to Zero database are covered in Bulletin 2 and also summarised below.

These three datasets show that national picture on homelessness is dynamic and changing over time.

The existing evidence base reveals high levels of homelessness:

- The number of people experiencing homelessness is growing nationally with an estimated national homelessness rate of 50 persons for every 10,000 people from the Census.
- The number of people identified as sleeping rough has increased by 20% since the 2011 Census.
- On the basis of the Census data, 44% of the homelessness population live in severely overcrowded dwellings; most of the growth in homelessness reflects an increase in the number of people living in severely overcrowded dwellings.
- Nearly 60% of homeless people in the 2016 Census estimate were aged under 35 years, with youth aged 12-24 making up 24% of people experiencing homelessness, and the largest increase in homelessness being reflected by the 25-34 years age group (up 32% from 2011).
- Aboriginal and Torres Strait Islander peoples made up 3% of the Australian population in 2016, but accounted for 20% of all persons who were homeless on Census night in 2016; the Northern Territory’s Aboriginal homelessness rate of 2082.6 per 10,000 Aboriginal people exceeds all other states and territories’ high Aboriginal and Torres Strait Islander homelessness rates by a significant margin.
- SHS client data reveal Aboriginal and Torres Strait Islander people, people with experiences of family and domestic violence, and people with mental health issues accessed support at higher rates than others.
- Across both the Census and the SHS data, homelessness among people 55 and over has increased in recent years.

Homelessness support:

- There are over 1,580 SHS funded services currently providing support and accommodation services to people who are experiencing homelessness or ‘at risk’ of homelessness in Australia with an estimated rate of 115 Australian persons for every 10,000 people accessing services in 2019/20, with the service user population predominantly female.
- The median length of SHS support in 2019/20 was 43 days.
- The majority of those who were experiencing homelessness at the beginning of the support period remained homeless at the end of the support period (63%) reflecting limited permanent housing options and long wait lists for public housing.
The vast majority of clients at risk of homelessness that began a period of support remained housed at the end of the support period; however, 1 in 10 clients at risk of homelessness end up being homeless at the end of the support period.

SHS services are unable to address the needs of all those that request support and to find permanent housing for all those who need it; across Australia, there were around 95,300 unassisted requests in 2019–20 with three in five involving short-term or temporary accommodation.

Figure 2 – Housing tenure outcome for clients of Specialist Homelessness Services (SHS) with closed support periods who were experiencing homelessness at the start of support in Australia, 2019–20

DRIVERS OF HOMELESSNESS IN AUSTRALIA

The causes of homelessness are complex, encompassing a broad range of structural and individual risk determinants, including housing availability and affordability, economic and employment opportunities (or lack thereof), physical and mental health outcomes, domestic and family violence, relationship breakdown and social isolation. Trends show:

- Increasing housing stress levels across Australia with 47% of low-income households remaining in housing stress from one year to the next together with recent sharp rises in rents in the private rental market in 2021.

- The availability of public and Aboriginal and Torres Strait Islander community housing has decreased, with 48% of people waiting more than two years to secure social housing.

- Poverty rates remain high in Australia and high youth unemployment rate continues to place pressure on youth homelessness; COVID-related lockdowns and international travel restrictions have placed significant risk of homelessness pressures on affected segments of the labour market.

- Increasing population rates of high psychological distress and illicit drug use increase susceptibility to homelessness.

- Family and Domestic violence is the leading cause of homelessness for women and their children and also for children and young people separately who may be thrown out of the family home or run away from home to escape violence; increasing awareness and social acceptance of reporting domestic and family violence have meant that housing and wrap-around support is increasing for women and children experiencing family and domestic violence, but the position of children and adolescents remains little understood in policy circles and the wider community.
Campaign partners at the official launch of the 500 Lives 500 Homes Campaign.

Photography: Katie Bennett

Adelaide Zero Project.

Photography: David Pearson
INSIGHTS INTO HOMELESSNESS FROM THE NATIONAL ADVANCE TO ZERO DATABASE

Through the Advance to Zero movement, a community owned and led, near to real-time database system has been developed to improve understanding of homelessness, and the way in which people may come to experience homelessness. Bulletin 2 presents findings from across Australia in detail.

1. This bulletin presents findings from a decade of data collection (2010–2020) by homelessness services on the needs and journeys of those experiencing homelessness which focuses on those sleeping rough with high needs and often long periods of homelessness. This is the first comprehensive analysis of this rich community-led data comprising responses from 20,953 people.

2. Since 2010, homelessness services have used registry/connection weeks to understand the needs and vulnerabilities of those experiencing homelessness with particular focus on those sleeping rough over an extended period. Homelessness services have collected actionable information through using standardised instruments eliciting information on the circumstances, vulnerability, risk and service needs of those experiencing homelessness. The Advance to Zero dataset comprises the VI-SPDAT together with the By-Name List and is used by homelessness services to understand the circumstances of those experiencing homelessness and the inflows, the number of people actively homeless within a community, and the outflows into permanent housing. Using this information, homelessness services prioritise the most vulnerable, following people through the journey from homelessness to housing to understand if we are making a difference to homelessness one community at a time.

3. **Homelessness:** Over one-third of respondents reported that they most frequently slept rough, with the majority of those sleeping on the streets. The majority of the remaining Advance to Zero respondents reported that they most frequently slept in crisis and emergency accommodation services, temporarily in peoples homes or in short-term boarding houses. The majority of respondents were considered to have high acuity needs requiring permanent housing with long term support, with those sleeping rough, younger respondents, respondents with a serious brain injury or head trauma, learning or developmental difficulties, or a physical disability, having the highest acuity scores. On average, people had experienced homelessness for 3.8 years with around 40% reporting many years of homelessness.

4. **Health:** Respondents reported a range of long-term serious medical conditions and diagnosed mental health conditions nearly all of which were significantly higher than rates seen across the general population. Very high rates of foot and skin infections and dental problems were evident among respondents. One-third of Advance to Zero respondents reported being taken to hospital against their will because of mental health issues and a similar number reported going to accident or emergency due to mental health reasons. Problematic alcohol and other drug use was reported by the majority of respondents. Self-reported use of hospitals among Advance to Zero respondents is, on average, much higher than the general population but there are large differences among respondents with a small number of people accounting for a large proportion of health service use; the majority of respondents accessed healthcare services five or less times in the six months prior to being surveyed. Of those who utilised health services, the estimated annual costs of those sleeping rough is 1.4 times higher than non-rough sleepers.
5. **Justice:** A large proportion of respondents report they have been in juvenile detention or prison in their lifetime, with 3 times as many rough sleepers reporting having been in youth detention than non-rough sleepers. Four in ten respondents report being the victim of attack since becoming homeless.

6. **Financial and social outcomes:** While the majority of respondents are in receipt of regular income, most do not have enough money to meet their basic needs. Four in ten respondents report that they have friends of family that take their money, borrow cigarettes, use their drugs, drink their alcohol or get them to do things they don’t want to do, or have people in their life whose company they do not enjoy but are around out of convenience or necessity.

7. Respondents indicated housing, food and warmth are the most important needs. Large numbers of respondents reported that permanent housing was fundamental for a sense of safety and wellbeing, access to medical support, medication, support services, financial security, employment and independence. Family, friends, and social support are important for love and belongingness.

8. A snapshot of the By-Name List for November 2020, showed the majority of newly identified respondents had a history of homelessness and were temporarily accommodated. Housing placement is dependent on age and Aboriginal and Torres Strait Islander status, with a greater proportion of younger and Aboriginal and Torres Strait Islander respondents placed in public and community housing, and non-Aboriginal and Torres Strait Islander respondents placed in private rentals.

9. There remains a need for a stronger longitudinal representation of the data through both linking the Advance to Zero and By-Name List datasets with other national datasets to begin to speak to pathways into and out of homelessness and potential prevention points, and to improve understanding of the ‘inactive’ component of the By-Name-List.

10. **People experiencing homelessness are a diverse group of people with varied needs and histories of homelessness.** There needs to be a range of homelessness, housing, and complementary supports in place to effectively work towards ending homelessness. The Advance to Zero approach is seeking to change the system by focusing on a person-centred, Housing First approach in specific communities putting community-owned, near to real-time data about individuals’ needs at the centre of decision making and the system itself.
POLICIES TO END HOMELESSNESS

Building on the history of homelessness policy and practice and the evidence base built up from our analysis of the Australian Advance to Zero data over the last decade, we identify five key actions to end homelessness in Australia:

1. Leadership and proactivity at the Australian Government level and a national end homelessness strategy applying across the states and territories.

2. An increase in the supply of social and affordable housing directed to an end homelessness goal.

3. Comprehensive application of Housing First programs linked to wrap-around support for those entering permanent housing with long histories of homelessness and high health and other needs.

4. Targeted prevention and early intervention programs to turn off the tap of entry into homelessness which address the underlying drivers of homelessness.

5. Supportive systems and programs which build the enablers of an end homelessness program: advocacy, commitment, and resource flow to ending homelessness; effective service integration; culturally safe and appropriate service delivery including expansion of Aboriginal and Torres Strait Islander-led and controlled services to help address high rates of homelessness in their communities; and improving data quality, evaluation and research around ending homelessness in Australia.

Leadership and proactivity at the Australian Government level and a national end homelessness strategy applying across the states and territories

A national end homelessness strategy backed by a proactive Australian Government will support increased funding for social and affordable housing projects from the Australian Government, increased funding to homelessness services working to end homelessness, greater coordination between Australian Government and state and territory government funded programs at the prevention, early intervention and crisis point; and an enhanced national target setting and monitoring environment.

An increase in the supply of social and affordable housing directed to an end homelessness goal

Public housing stocks have fallen over the last two decades and growth in community housing has not met increasing need. The total level of new social housing dwellings specified in recent announcements by state and territory governments, is of an historic magnitude and is a fundamental part of an end homelessness agenda. However, aggregate state and territory government investment, while very significant, drops short of the total number of dwellings required to meet underlying demand.

Housing options continue to be limited for people experiencing homelessness. Currently, supply is falling short of what is required. Direct Australian Government funding of social housing options to complement recent state and territory investments in social housing would significantly boost the stock of social housing. The Australian Government and state and territory governments can also provide an enabling environment for impact investment into affordable housing options for those experiencing homelessness.

The private rental market is one point of exit from homelessness and must play a greater role than it has previously given social housing supply-side constraints.

There are examples of innovative programs in the Australian private rental market including the Platform 70 initiative in Sydney delivered by Bridge Housing as part of the Way2Home program and the HomeGround Real Estate initiative. Launch Housing’s HomeGround Real Estate social enterprise not-for-profit residential real estate agency commenced operations in 2014 in Melbourne and supports those experiencing homelessness enter the private rental market.
Comprehensive application of Housing First programs linked to wrap-around support for those entering permanent housing with long histories of homelessness and high health and other needs

Housing First approaches are identified as a sound program foundation to address chronic homelessness and have yielded positive outcomes worldwide and in Australia to-date.

Housing First is a recovery-oriented approach to ending homelessness that centres on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed; it is an alternative to treatment first models. The aim of a Housing First approach is to provide rapid access to permanent housing with wrap-around support for chronically homeless people without any preconditions to accessing housing. Housing First programs have been implemented in Australia over the last two decades including Common Ground Adelaide in 2006, the Michael's Intensive Supported Housing Accord (MISHA) program, the Way2Home and Platform 70 Project in Sydney, Common Ground Sydney and Common Ground Brisbane (Micah Projects in Brisbane), Street to Home in Melbourne and the 50 Lives 50 Homes campaigns in various states including Queensland and Western Australia.

In the last few years, the Housing First approach has become a foundation stone of the Advance to Zero homelessness projects (Zero projects) implemented across Australia including the Adelaide Zero Project, the NSW End Street Sleeping Collaboration, the Brisbane Zero Campaign, Melbourne Zero, Port Philip Zero Project and the Perth Zero project (formerly 50 Lives 50 Homes) with new sites starting in Geraldton, Mandurah, Bunbury and Rockingham.

Housing First approaches have been embraced in new state and territory homelessness strategies which have also addressed the need for Aboriginal and Torres Strait Islander-led delivery of programs that seek to address Aboriginal and Torres Strait Islander chronic homelessness. Under the WA State Government’s Housing First Homelessness Initiative, Moorditj Mia will be WA’s first Aboriginal Housing First Support Service.

The Advance to Zero database illustrates the high health and social needs of those sleeping rough for long periods. This is the evidence base for linking Housing First to supportive housing models. The Supported Transition and Engagement Program (STEP) is a Housing First supportive housing program funded by the New South Wales Department of Communities and Justice. STEP to Home is funded to provide 90 long term housing places with wrap-around support for people sleeping rough or experiencing secondary homelessness in Inner Sydney.

Targeted prevention and early intervention programs to turn off the tap of entry into homelessness which address the underlying drivers of homelessness.

Prevention and early intervention approaches seek to target homelessness drivers, to prevent entry or re-entry to homelessness, or facilitate rapid exit.

Well over one third of people accessing SHS seek assistance as a result of physical or emotional abuse inflicted by a family member, or require family and domestic violence (FDV) assistance during a support period. Accordingly, FDV is a key target area for strategies focused on prevention of and early intervention in homelessness.

Prevention programs focus on reducing male violence in the community, men’s behaviour change programs, respectful relationship education (usually targeted at adolescents), media campaigns that promote respect for women, and programs that build women’s capacity and confidence for independence from their abusers.

Other programs include programs to support women and children in the home, reform of state-based Residential Tenancy Acts to reduce or remove penalties associated with breaking leases for people experiencing FDV and/or to allow victims/survivors to take over leases that were held by perpetrators, increasing the number of crisis accommodation beds available for people escaping FDV, and increasing accommodation options for perpetrators so that victim/survivors can stay in the home.
FDV is a major determinant of early onset homelessness in later childhood, adolescence and teenage years. However, the link between FDV and early onset homelessness by children and adolescents remains an area requiring significant attention and a strong collaborative response between schools, child and youth services, FDV services, and other community responses.

Large numbers of adults experiencing homelessness report experiences of out of home care (e.g., residential and foster care) and youth justice interactions making these two sites ones for significant prevention and early intervention.

There are close links between homelessness, mental health and drug and alcohol issues. Preventative programs are those aimed at the general population, such as media campaigns to reduce stigma around experiencing and seeking help for mental health issues, or government funding of services. In terms of homelessness support, the use of wrap-around informed holistic service delivery is critical together with strong referral pathways.

The economic underpinnings of homelessness are poverty and unemployment. Programs that reduce poverty and unemployment will produce positive flow on effects for homelessness. Transition to employment among those in homelessness programs, including among those transitioning to permanent housing, remains low. As a result, both those experiencing homelessness and those formerly homeless remain in poverty given reliance on income support payments. This increases the risk of long-term homelessness or returns to homelessness emphasising the need to implement direct employment options for those in homelessness programs.

**Supportive systems and programs which build the enablers of an end homelessness program**

Advocacy for an end homelessness agenda from a broad range of sources including peak homelessness bodies, various movements connected to the Australian Alliance to End Homelessness (AAEH), the Everybody’s Home campaign and other initiatives such as the Constellation Project improve the community’s understanding of homelessness and the need for action and thereby the willingness of governments to push ahead with an end homelessness program.

Homelessness continues to grow in Australia, and it is clear from the Ending Homelessness in Australia report that we require an increase in overall funding for social and affordable housing, homelessness and housing services and related services. There has been a significant recent increase in investment by states and territories in social housing and in homelessness strategies and their related programs. To end homelessness an increase in funding by the Australian Government is required, but beyond that, additional and innovative sources of funding are needed including from philanthropy and impact investment.

Homelessness is a complex problem and covers a very diverse group of people. As a result, rich service integration models are required. Culturally safe and appropriate service delivery including expansion of Aboriginal and Torres Strait Islander-led and controlled services to help address high rates of homelessness in their communities.

Models of service delivery may not always be appropriate to the cultural norms of people from culturally and linguistically diverse backgrounds. Culturally appropriate support may include: translation services; bi-lingual staff reflecting the client cohort; cultural training; strong links to cultural and community groups; and culturally specific services.

Improving data quality, evaluation and research around homelessness in Australia provides important direction for end homelessness program development and an evidence base for action. The existing monitoring and evaluation system in homelessness does not have explicit homelessness targets. Setting explicit end homelessness targets in Australia will provide discipline and accountability for an end homelessness agenda.
Common Ground Port Augusta is a Housing First initiative providing long term supported tenancies to people experiencing homelessness.
CONCLUSION

People experiencing homelessness are a diverse group of people with varied histories of homelessness. There needs to be a range of homelessness, housing, and complementary supports in place to effectively work towards ending homelessness. Preventative programs, early intervention programs, crisis support, and housing access and support models are all parts of the puzzle required to meet the needs of those experiencing homelessness at different points of the life course and exhibiting different combinations of needs. Programs should be delivered in a culturally safe and secure way, accounting for those experiencing chronic homelessness with very high needs.

Excellent progress is being made in various pockets of policy and practice, and effort should be directed to continuing and expanding this progress. A coordinated national end homelessness response and commitment is needed, as well as continued exploration of alternative methods of funding homelessness support such as joint investment, impact investment, payment by results and social impact bond models.

The Advance to Zero approach is seeking to change the system by focusing on a person-centred, Housing First approach in specific communities putting community-owned, near to real time data about individuals’ needs at the centre of decision making and the system itself. With data underpinning decision making, and services designed to meet the presenting needs of the populations, we can work towards ending homelessness in Australia.

CITATION
