



**“Somewhere over the rainbow...”**

**- The opinions and experiences of people living with mental illness in getting housing**

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# Introduction

## The Public Interest Advocacy Centre

The Public Interest Advocacy Centre (PIAC) is an independent, non-profit law and policy organisation that works for a fair, just and democratic society, empowering citizens, consumers and communities by taking strategic action on public interest issues. PIAC identifies public interest issues and, where possible and appropriate, works co-operatively with other organisations to advocate for individuals and groups affected. PIAC seeks to:

- expose and redress unjust or unsafe practices, deficient laws or policies;
- promote accountable, transparent and responsive government;
- encourage, influence and inform public debate on issues affecting legal and democratic rights; and
- promote the development of law that reflects the public interest;
- develop and assist community organisations with a public interest focus to pursue the interests of the communities they represent;
- develop models to respond to unmet legal need; and
- maintain an effective and sustainable organisation.

Established in July 1982 as an initiative of the (then) Law Foundation of New South Wales, with support from the NSW Legal Aid Commission, PIAC was the first, and remains the only broadly based public interest legal centre in Australia. Financial support for PIAC comes primarily from the NSW Public Purpose Fund and the Commonwealth and State Community Legal Services Program.

## PIAC's work with homeless people living with mental illness

Through its project, the Homeless Persons' Legal Service (HPLS), PIAC has significant experience with people experiencing mental illness who are homeless or in housing crisis, and who are seeking to access social housing, or have had difficulties sustaining their social housing tenancy.

Since it commenced in 2004, HPLS has provided free legal advice and representation to over 8,000 people who are homeless or at risk of homelessness. From January 2012 to December 2013, HPLS helped 1,914 clients with a range of civil and criminal law matters. Of these, 16.4 per cent displayed some form of mental illness or self identified as having a mental illness. During this period, HPLS provided advice and assistance to 177 people who had tenancy and/or housing related disputes with Housing NSW. Of these, 36 people displayed some form of mental illness or self identified as having a mental illness.

From January 2010 to December 2013, the HPLS Solicitor Advocate provided court representation to 346 individual clients facing criminal charges. Of these 43 per cent disclosed that they had a mental illness.

## Background to the mental illness and homelessness project

In February 2013, PIAC decided to undertake a series of projects that focused on the relationship between mental illness, homelessness, accessing stable housing and contact with the criminal

justice system. In particular, PIAC wanted to look at the difficulties faced by people living with mental illness in exiting homelessness, accessing safe, stable and secure accommodation, and sustaining that accommodation, and also to look at the contact such people have with the criminal justice system. The difficulties faced by homeless people with mental illness was identified as an area of concern in the 2010 HPLS Consumer Forums.

PIAC recognised that the problems and difficulties faced by people with mental illness, who are homeless or at risk of homelessness, have been identified by the NSW Government as high priorities, and were specifically incorporated in the following goals in the State Plan, *NSW 2021*:

- Goal 11 – Keep healthy people out of hospital - Improve outcomes in mental health.
- Goal 13 – Better protect the most vulnerable members of our community and break the cycle of disadvantage – Reduce the number and rate of people who are homeless.

In addition, in 2012, the NSW Premier’s Advisory Council on Homelessness identified homelessness and mental illness as a priority action area. Previously, in 2011, the Housing NSW Forum on Homelessness Working Group, identified issues relating to mental illness, accessing and sustaining tenancies as a high priority requiring attention.

In early 2013, HPLS undertook two projects exploring the relationship between mental illness and contact with the criminal justice system, and the difficulties faced by people living with mental illness in accessing and maintaining social housing. Both of these issues were commonly recurring themes in the legal casework of the HPLS, both through the HPLS legal advice clinics operating in the Sydney CBD and Parramatta, and also through the casework of the HPLS Solicitor Advocate. These projects resulted in the release of two research papers based on the casework of HPLS:

- *Sentencing contradictions: Difficulties faced by people living with mental illness in contact with the criminal justice system* – this publication looks at the interrelationship between mental illness, homelessness and criminal offending, and considers alternative strategies in responding to the needs of homeless people with mental illness who disproportionately have contact with the criminal justice system.<sup>1</sup>
- *Skating on thin ice: Difficulties faced by people living with mental illness accessing and maintaining Social Housing* – this publication looks at the close relationship between homelessness and mental illness, and considers alternative strategies to respond to the needs of homeless people with mental illness who are reliant on social housing for their accommodation needs.<sup>2</sup>

In early 2013, the members of the HPLS Consumer Advisory Committee, StreetCare, indicated that they believed that this issue was a high priority, and one on which they would like to undertake further direct consultations with consumers with lived experience of mental illness and housing crisis or homelessness. PIAC decided that as part of the mental illness and

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<sup>1</sup> Public Interest Advocacy Centre (2013), *Sentencing Contradictions: Difficulties faced by people living with mental illness in contact with the criminal justice system*, available online at <<http://www.piac.asn.au/publication/2013/10/sentencing-contradictions>> (Last accessed 1 April 2014).

<sup>2</sup> Public Interest Advocacy Centre (2013), *Skating on thin ice: Difficulties faced by people living with mental illness accessing and maintaining Social Housing*, available online at <<http://www.piac.asn.au/publication/2013/10/skating-thin-ice>> (Last accessed 1 April 2014).

homelessness project, it was important to seek direct input and comment from people who live with mental illness and have experienced homelessness, housing crisis or significant barriers in accessing safe and stable accommodation.

Accordingly, PIAC embarked on these consultations with the principal aim of identifying the experiences and difficulties of people living with mental illness in applying for and sustaining accommodation from the very people most affected: the individuals themselves.

This research paper documents the comments and input from the consumers who participated in these consultations, and represents the final instalment of the PIAC Mental Illness and Homelessness project.

This research paper also documents the participants' views as to what initiatives would assist people with mental illness in accessing and sustaining accommodation. These include having more assertive outreach services, better trained caseworkers who can provide ongoing, long-term support that commences when a person is homeless and is ongoing once that person is housed, and greater access to advocacy support services and community support programs.

## Conduct of the consultation project

### Project design

The principal organisations involved in facilitating consultations with consumers who had experienced mental illness and homelessness or housing crisis were:

- **StreetCare, the HPLS Homeless Consumer Advisory Council** - StreetCare is made up of nine people who have recent experience of homelessness, several of whom have self-identified as living with mental illness;
- **Common Ground, Camperdown, Sydney** – this project was initiated as part of a co-ordinated government response to homelessness and a commitment to reduce the number of rough sleepers. The project offers 'wrap around' support to tenants providing a wide range of services including case management, psychiatric clinics, general practitioners, chiropractic clinics, psychological services, podiatry and mental health case management.
- **Parramatta Leisure Club, operated by UnitingCare Mental Health** – the Parramatta Leisure Club offers a regular weekly recreational and leisure program for people with mental illness living in the community. Members come from Parramatta and the Western Sydney area and participate in a variety of ways including attending programmed events, office work, preparation and planning of activities, as well as being a member of the Members Forum.

The project involved the following consultations:

- Consultation forum conducted with six members of StreetCare and Housing NSW in March 2013;
- Focus group consultation with 14 people at Parramatta Leisure Club on 23 August 2013;
- Introductory forum with five residents of Common Ground, Camperdown, on 6 August 2013;
- Follow-up consultation with four residents of Common Ground on 27 August 2013;
- Follow-up interview with one resident of Common Ground on 3 September 2013.

All focus group consultations and individual interviews were facilitated by members of StreetCare with assistance from staff of HPLS.

## **Involvement of homeless consumers in project design and implementation**

HPLS believes that the active involvement of those who are or have been homeless leads to the development of more effective public policy in response to issues facing homeless people, as well as assisting in the empowerment of participants. HPLS also recognises the fundamental right of people to ‘take part in the conduct of public affairs’, as enshrined in Article 25 of the International Covenant on Civil and Political Rights (ICCPR).<sup>3</sup>

HPLS seeks the views of homeless people through its homeless consumer advisory committee, StreetCare. StreetCare is made up of nine people who have recent experience of homelessness. The members reflect the diversity of homelessness in NSW, and include men, women, transgender people, young people, and representatives from inner Sydney, outer suburbs and rural and regional areas. StreetCare also provides a mechanism for HPLS to engage actively with other people who are homeless or at risk of homelessness, to facilitate their input into public policy and law reform initiatives.

One of the unique aspects of this project was the involvement of StreetCare in the design and implementation of this consultation project. Members of StreetCare assisted in developing the key themes for the consultation focus groups and interviews.

The involvement of StreetCare members in the conduct of the consultation focus groups and interviews was an essential ingredient in facilitating participants to be open and expansive in their comments. Given their own experiences of homelessness and mental illness and the difficulties they have encountered in securing housing, StreetCare members were able to provide an empathetic and sensitive mode of interviewing consultation participants, which encouraged them to open up and go into considerable detail about their experiences. The richness and intensity of the recounted testimonies of participants is a product of the confidence and comfort StreetCare members were able to engender from consultation participants when conducting the focus groups and interviews.

## **Homeless people, mental illness and social housing**

Previous research has consistently identified a strong relationship between homelessness and mental illness. In their study of 4,291 homeless people in Melbourne, released in 2011, Johnson and Chamberlain found that 31 per cent of their sample had a mental illness (not including any form of alcohol or drug disorder).<sup>4</sup> Current research exploring the pathways of people with mental and cognitive impairment into prison indicates that those people with disability, in particular

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<sup>3</sup> International Covenant on Civil and Political Rights, opened for signature 16 December 1966, 999 UNTS 171 (entered into force 23 March 1976) ratified by Australia on 13 August 1980 (entered into force for Australia on 13 November 1980, except article 41, which entered into force for Australia on 28 January 1993). The full text of the ICCPR is available at: <<http://www2.ohchr.org/english/law/ccpr.htm>>.

<sup>4</sup> Johnson, G. and Chamberlain, C. (2011), ‘Are the Homeless Mentally Ill?’, *Australian Journal of Social Issues*, Autumn 2011, at 35.

people with complex needs, are significantly more likely to have experienced homelessness than those without disability.<sup>5</sup>

In 2004, Teesson et al conducted interviews with 210 homeless people in Sydney, comprising 160 men and 50 women.<sup>6</sup> The study found that 73 per cent of men and 81 per cent of women met the criteria for at least one mental disorder in the year preceding the survey and that 40 per cent of men and 50 per cent of women surveyed had two or more disorders. Of particular interest was their comparison of the rate of mental illness in the homeless population to that of the general population, which found that the prevalence of mental disorders amongst homeless people in Sydney is approximately four times that of Australia in general.

A 2003 study involving 403 homeless young people in Melbourne aged 12-20 found that 26 per cent of those surveyed reported a level of psychological distress indicative of a psychiatric disorder.<sup>7</sup> In its 2003 study into the legal needs of homeless people in NSW, the Law and Justice Foundation of NSW reported that mental health, alcohol and drug issues, dual diagnosis and other complex needs are prevalent among the homeless population, particularly those who are entrenched in homelessness.<sup>8</sup>

In 2008, Browne and Hemsley undertook a two-part exploration of the views of consumers and carers on the housing needs of people living with a mental illness. The study found that the best form of housing for people with mental illness was stable, safe housing, which allowed individuals to live as independently as possible, making their own decisions about where they live and with whom.<sup>9</sup> The study found that the biggest barriers to accessing this stable, safe accommodation was lack of money for people with mental illness, and stigma and discrimination from private landlords and real estate agents.<sup>10</sup> This suggests that people living with mental illness rely heavily on social housing as a form of stable accommodation.

According to a Law and Justice Foundation of NSW 2005 study into the legal needs of people with a mental illness, housing stress and the threat of homelessness are a major problem facing people living with mental illness. The Foundation noted that such people are often on low incomes or reliant on social security payments, making them dependent on private rental, and public and community housing. According to the Foundation, the most common legal problems faced by people living with mental illness in social housing are:

- Applications for social housing, eligibility and the difficulty in passing an 'independent skills report' assessment;
- Housing related debt, arising from rent arrears and property damage, and consequent risk of tenancy termination;

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<sup>5</sup> Baldry, Eileen, Dowse, Leanne and Clarence, Melissa (2012), *People with mental and cognitive disabilities: pathways into prison*, Background Paper for Outlaws to Inclusion Conference, February 2012, available online at <<http://www.mhdcd.unsw.edu.au/publications.html>> (15 March 2013).

<sup>6</sup> Teesson, M., Hodder, T. and Buhrich, N. (2004), "Psychiatric Disorders in Homeless Men and Women in Inner Sydney" (2004) 38(162) *Aust NZ J Psychiatry*.

<sup>7</sup> Rossiter, B., Mallett, S., Myers, P. and Rosenthal, D. (2003) *Living Well? Homeless Young People in Melbourne*, Melbourne, Australian Research Centre in Sex, Health and Society, at 17.

<sup>8</sup> Forell, Suzie, McCarron, Emily and Schetzer, Louis (2005), *No Home, No Justice? The Legal Needs of Homeless People in NSW*, Law and Justice Foundation of NSW, Sydney, at 124.

<sup>9</sup> Browne, Graeme and Hemsley, Martin (2010), 'Consumer Participation in Housing: Reflecting On Consumer Preferences', *Australian Psychiatry*, December 2010, 582.

<sup>10</sup> Browne & Hemsley 25-26.



- Neighbour disputes; and
- Refusal to sign or failing to comply with an Acceptable Behaviour Agreement with Housing NSW.<sup>11</sup>

## People with mental illness accessing and maintaining social housing tenancies

*I was on the street at nine years old. I was sleeping outside the Kings Cross Post Office and in parks. I had that much abuse. I was prostituting, I got urinated on, I was abused, threatened, I had cans thrown at me... I've experienced a lot of health problems. I'm a schizophrenic and the medication had side effects.*

As indicated above, from January 2012 to December 2013, HPLS provided advice and assistance to 177 people who had tenancy and/or housing-related disputes with Housing NSW, 36 of whom displayed some form of mental illness or self identified as having a mental illness. In 31 of these cases, the individual was either in receipt of a Centrelink payment, or did not receive any income at all. This would suggest that none of the 31 individuals could afford accommodation in the private rental market, with public and community housing likely to be the only option for safe, secure accommodation.

The main problems identified by the HPLS casework in relation to these matters were:

- Inappropriate housing offers from Housing NSW for individuals with mental illness applying for social housing;
- Delayed responses and poor client service from Housing NSW;
- Delayed or refused transfer of accommodation;
- Inflexible application of Housing NSW policy in relation to accessing priority status;
- Housing debt and rent arrears;
- Neighbour disputes and difficult behaviours;
- Classification as 'unsatisfactory former tenants' by Housing NSW.

Several of these themes were also identified during the consultations undertaken as part of this project. For the purposes of analysis, the themes identified during the consultations have been categorised in the following manner:

- Difficulties encountered in exiting homelessness and obtaining accommodation;
- Difficulties in sustaining accommodation and avoiding a return to homelessness.

### Difficulties obtaining accommodation

Participants in this project identified a range of difficulties that they experienced in trying to obtain accommodation in order to exit homelessness. The most commonly identified difficulties were:

<sup>11</sup> Karras, Maria, McCarron, Emily, Gray, Abigail and Ardasinki, Sam (2006), *On the Edge of Justice: The Legal Needs of People with a Mental Illness in NSW*, Access to Justice and Legal Needs Volume 4, Law and Justice Foundation of NSW, May 2006, 60-68.

- Difficulties in negotiating the processes of obtaining accommodation, including dealing with excessive waiting periods for low cost housing;
- Lack of choice of where to live;
- Lack of support for people with mental illness or multiple health problems;
- Experiences of discrimination on the basis of mental illness.

### **Difficulties negotiating processes for housing**

For several people living with mental illness seeking to enter stable accommodation, the processes involved in applying for housing, negotiating a lease, paying a bond, paying rent in advance, and signing a lease agreement is a daunting and confusing ordeal. For some participants, a failure to understand what they are signing can immediately place their accommodation at risk.

*Well I was homeless in January after a family blow up, so I got myself admitted to the Katoomba psych ward and told the social worker I was homeless. And so she got me a one bedroom Housing Commission flat ... I signed all the papers on pension day but they didn't take the rent out. Then they started sending me dirty letters, I was going to get evicted because I was two weeks behind in my rent.*

*But I was just so grateful to have a place, because I was in Cumberland Hospital I had nowhere to live, and my case manager got the place for me and I just had to get a place. I signed it, got them the money. I just had to have somewhere to live, a roof over my head. Very often people sign off on things because they're desperate, and get left in a situation then of obviously creating a debt for you before you start out.*

Some participants did not understand that they needed to pay rent in advance, and also a bond, before they could move into accommodation, placing them in immediate financial difficulty.

*They don't let you move in until you've got two weeks rent in advance. Housing NSW says you need a \$400 bond. It's difficult to afford...*

For some, the biggest frustrations involved lengthy waiting periods to obtain stable, low-cost accommodation.

*I was on the waiting list for Housing NSW but I was stuck on the street. I got thrown out of a Housing NSW office. I was so frustrated at having to wait for such a long time for a place. I told them that I needed a place so I could get my children back.*

*I had to wait seven years to get my place... it was a long wait. It was because I specified Parramatta, yes. So I waited seven years... I think that's the best thing you can do, is when something's not happening right you need to speak up. It's the only way to ever get any help or any advice.*

Some participants reported being belittled and abused because of their mental illness.

*I also find that people with mental illness sometimes how they're being treated by Housing. We get treated like we are second class citizens. Like we shouldn't have a place in this world. And that's how I've been treated in the past... Yes, they always give the impression they sort of look down on you. Like we come out of the gutter or something, you know.*

### **Lack of choice of where to live**

Several participants said that coming off the streets was difficult due to the fact that they had very limited choices available to them, in terms of the type of accommodation available, or the location of the accommodation. Some people were made to feel that they should be grateful no matter what accommodation they were offered, even if it was in an unsafe location, or was not in satisfactory condition, or was not in close proximity to public transport or necessary medical services.

*I didn't really want to go to Common Ground, but wasn't against it either. I didn't have much choice.*

*I didn't have a lot of choice. I was not eligible for NEAMI [North Eastern Alliance for the Mentally Ill]. For people with mental illness, most accommodation options are only short-term.*

*Well I didn't want to live on the cold streets in winter. I tried to sort of go back to the Inner West... but the only places that I could get to was around the Ermington, Dundas area.*

*I spoke to my client officer not long ago and he said, 'There is a big chance that you may end up in Telopea.' I said, 'Oh no, no, no, no. No way, no way Jose.' I've heard stories about Telopea that would make your hair stand up. It's because they can't find anywhere better. It's more like a dumping ground. It's the last sort of place you want to end up in, because it's not very popular. I thought they've just dumped me in a rubbish dump. You feel like you're worthless.*

### **Lack of support for people with mental illness and other health problems**

For some participants, the ongoing daily experience of living with mental illness was often overwhelming, itself presenting a massive hurdle to overcome in order to move out of homelessness and seek stable accommodation.

*Depression is the biggest thing on the street.*

*Being told you have mental health issues can feel like a jail sentence for people experiencing homelessness.*

*Mental illness such as schizophrenia affects a smaller proportion of people, but the impacts on the individuals and the people around them can be profound. They often need better support to manage their illness and for people sleeping rough it is often police who end up dealing with them in a crisis event.*

*If you have depression or anxiety you are not ill enough, if it is addiction, it is not a 'real' mental health issue, services can make you feel like you have to have a substantial mental illness to warrant help... If you have mental health issues and substance abuse issues, mental health services don't want to know you.*

### **Discrimination and stigma relating to mental illness**

Many of the participants in the consultations indicated that they had experienced significant discrimination from private landlords when trying to obtain accommodation. For some, this also reinforced the stigma they felt about living with mental illness.

*But you've still got the stigma. People go, 'Oh, you're on a disability pension, you've got a mental illness. Oh you must be a bludger.'*

*If you've got a mental illness, that's the biggest thing. They just say 'no way, get lost.'*

*People harshly judge you if you're schizophrenic. As soon as you say you've been on the street, they think you're gonna wreck the place or have drug dealers around.*

*There's so much discrimination for us, if you're a person with mental illness.*

*People become reluctant to seek out help for their mental wellbeing. There is a perception that you will be labelled crazy.*

## **Difficulties sustaining accommodation**

After having finally secured stable accommodation in spite of some of these difficulties, participants in this project also identified a range of difficulties that they experienced in trying to sustain their accommodation, and not return to a life of sleeping rough, relying on crisis accommodation or boarding houses, or couch surfing. The most common difficulties experienced in sustaining their accommodation included:

- Social incohesion and dysfunction in the area in which they lived;
- Isolation and a sense of life being better 'on the streets';
- Difficulty in meeting rent payments;
- Problems with the condition of the residence;
- Difficulties with Housing NSW;
- Lack of ongoing support to help them sustain their accommodation.

## **Social incohesion and dysfunction in their local area**

For many participants, the most significant difficulty they have in sustaining their accommodation is the stress, anxiety and fear they experience in living in areas where there is considerable social incohesion, high crime, poor amenities, or problem neighbours.

*Sometimes it feels like a prison... the whole area is just generally scary, you know. Half the time I come here or most of the other time I'm out by myself. I don't come home until maybe like 7.00 or 8.00 at night. But, you know, it depresses me a bit because it's my home... That's part of the reason why I want a transfer, but the Housos don't give a hoot.*

*We've got a very bad anti-social thing, there's a lot of alcoholics, drug addicts, hard core bludgers... They just don't want to even bother getting a job, you know, they just want to sit around and just do nothing and just play loud music all day.*

*Where I live I just strictly keep to myself. Whatever happens outside, you know, I wouldn't care if people stab or shoot each other, or kill each other, I don't care. As long as I'm inside I keep straight out of it, I'm inside, I lock my door, lock my windows, I'm safe, you know. They can go and kill each other as far as I care. We've had a couple of sieges in the area... obviously drugs.*

For some participants, the problems in the area combined with difficult or abusive neighbours made staying in their accommodation very challenging.

*I've had it from other neighbours, you know, swearing and carrying on and I'm thinking oh here we go, another long night of idiocy again... you're thinking yeah for how long... you know, it gets to you.*

*There's people who shouldn't be here. They're crazy. They need to police it more. They're troublemakers. One person in particular causes friction. Some people play loud music and make lots of noise. You can't pick your neighbours.*

*If the neighbour knows who it was who put the complaint in, they all gang up on you and make your life hell.*

Some participants stated that when these problems combined with a lack of services or public transport, the result is a sense of isolation and loneliness.

*I got used to the place but then after a while, trouble arose with the neighbours – there's a very bad drug problem and social problems there, and just generally, it's the isolation. It can be very isolating, particularly on Sundays... So there's no transport, you really need to have your own car...*

*The area is just too far away from the shops... it's very difficult with the buses. On a Sunday they don't run at all. The shops are actually about a kilometre and a half away from the shopping centre... and also it makes it very hard to come in here sometimes.*

Some of the participants reported how these experiences with problematic neighbours and community violence exacerbated their mental illness, causing high levels of stress, anxiety and depression.

*If you've got to put up with the environment you're living in you know, the bad neighbours and the drug addicts and alcoholics... I've written it down on the forms you know, it's impacting the state of my mental health, you know... it aggravates your illness.*

*It's also the environment you live in. If you've got people with drugs or alcohol problems, they worry you or cause problems for you. It can have a lot of impact on your mental health. It can stress you out and when I get very stressed I get sick and it causes people to land back in hospital because the stress of what's going on in the environment. It gets out of hand these drugs and alcohol problems, and they spray graffiti over the buildings... It just has a big impact on your mental state.*

*Well, this is what the place was doing to me, you know, I was actually turning into an alcoholic. Getting casks of wine and I'd go over to my mate's and drink with him. And sometimes I'd invite him over and we'd drink together. And sometimes I'd drink on my own. Drinking on your own is actually the pits, you know, that's the rock bottom. They reckon a good drink will drown your sorrows but it actually doesn't. It makes you feel worse.*

For some participants, the difficulties they experienced with the dysfunction in their local environment led to them seeking to transfer out of the area. This often led to problems and frustrations with Housing NSW, with some reporting a lack of sensitivity and professionalism in the responses they received.

*A lot of people say you should appreciate where you live you know, you've got a roof over your head... It's better than nothing, better than being in the gutter, I've been told that myself... not to fight the Housing Department.*

*I've been living where I am for nearly eight years, well over eight years, nearly nine years and I'm currently waiting for a housing transfer. Been waiting on that for the past six years. They think because you got a roof over your head you should be grateful... you're not going to get moved elsewhere, that's the way they look at it.*

## Isolation and a sense of life being better ‘on the streets’

A common sentiment that was expressed in all of the consultations was the difficulty experienced by many in coming off the streets after spending a significant period being homeless, with a feeling that they were losing the community and camaraderie of living on the streets, when they moved into stable accommodation. For some people, this provided a strong temptation to return to the streets after being housed, especially if the person was also feeling a sense of isolation and alienation from the environment and neighbourhood in which they were housed.

These participants often used phrases like ‘the home of the street’ and ‘the community on the street’, juxtaposing this with the sense of isolation and claustrophobia they felt in their housed environment. For some, being housed took them away from their daily routines on the street which were necessary to survive. Having that time to think and be alone in their newly housed environment meant that they had to wrestle with some of their internal demons, resulting in depression, anxiety and a sense of isolation.

*You can take the person off the street, but you can't take the street out of the person... It's in your blood. It pulls you back there.*

*On the street there is a Street Code. You look out for each other, get up to shenanigans but all in good fun, stand by each other. Other streeties will back you up in a fight.*

*A lot of people put you in a place and expect you to live there.*

*The street is always in you. It's always there for you to go back to.*

*It [the street] feels like where I'm supposed to be. I miss it. It's where my mates are. It gets claustrophobic. I'm not used to it. Sometimes it seems like it's easier to go back on the streets.*

## Difficulty in meeting rent payments and other tenancy obligations

Several participants recounted how they found it difficult to meet the various obligations as a tenant, often due to a failure to understand their lease documents. Not surprisingly, meeting high rental costs when reliant on a disability support pension or other social security payment proved to be particularly difficult. Some participants reported problems when there was a breakdown in automatic rental deduction arrangements between Housing NSW and Centrelink, resulting in considerable stress, and anxiety that they would lose their accommodation.



*I was just so grateful to have a place, but I didn't understand the process. I just signed the lease. The forms are too difficult.*

*I had problems when they changed the rent, when it goes up... They've got to get Centrelink to take out more money.*

*They send a letter, takes them about a week. If Centrelink don't fix it up you've got to go back to Housing because they're the ones who've got to fix it up.*

*As long as the money's deducted properly from Centrelink, as long as the Housos are happy, they've got your money, you've got no problems.*

### **Problems with the condition of the residence**

A number of participants indicated that the condition of their public housing residence presented a number of difficulties, and added to the temptation of moving out. This included a failure by Housing NSW to respond to requests for necessary repairs, and frustration that the unit was not sufficiently spacious to accommodate their belongings.

*I've had trouble with Housing about maintenance. The maintenance isn't that good.*

*Oh, yes, because my place is built like cardboard, all together, closely together, and they're only very small units and you got your stove in the front room, it's like part kitchen, part lounge room. That's how small it is.*

*The place is very small, I've got a lot of belongings. I even had a drum set in there which I've now got in storage because it was very difficult walking around the drum set in a very small unit.*

### **Difficulties when dealing with Housing NSW**

Several participants indicated that they had considerable difficulties when approaching Housing NSW for information about available alternative accommodation or inquiries about transferring.

*Well, Houso just doesn't care. They have a list of people's names, they have a list of houses, when two come to the top, they say: 'Here's your place, go and have a look. You're allowed to knock back three places and then you'll go to the bottom of the list.'*

*Housing NSW have hardly done anything at all. They can't tell you how long you've got to wait. They haven't done much at all.*

*Well I've been waiting six years so they've done hardly anything at all. I've been asking them, 'Oh how far am I up the ladder?' but they can't tell you. They can't even give you a clue... It's only because they don't want to tell you.*

For some participants, there was a frustration about poor customer service provided by customer service officers with Housing NSW – a lack of willingness to provide assistance in respect of complaints about neighbours or resolving a mistake about rental arrears. A lack of staff to assist tenants with problems was also identified.

*I complained to the Department of Housing in Parramatta about it [problem neighbours], they just didn't want to know. So they're turning a deaf ear, a blind eye to it you know. They just don't want to know.*

*They don't do much. They just tell you you've got to go over there and do it on the computer. You talk to them, they write it down, and you've got to wait for feedback from their area manager. Because when I had the \$2,000 problem they just passed on the question and that was going nowhere.*

*The problem with the Housing Commission and Centrelink is they're losing staff and they're not replacing staff so you go there, you ring them up or you go there and it's not just one or two people waiting to see the client officers at Centrelink... there's no staff, they're not replacing them. They're understaffed.*

### **Lack of ongoing support to sustain accommodation**

Several participants stated that one of their most pressing difficulties in sustaining their accommodation was the difficulty they faced in accessing appropriate levels of support to help them with their ongoing mental illness issues, as well as practical support necessary to maintain a tenancy, whether it be financial counselling, life-skills support, or advocacy support with Housing NSW or Community Housing.

*People expect you to be able to just live once you have housing, not that simple. You can take the person off the street, but you can't take the street out of the person.*

*There's nothing available for people who fall through the cracks... who can't get help from support services.*

*Many services and private rental people don't understand the gist of homelessness, like you're talking a totally different language.*

*It's scary. You know, I could be back on the streets anytime. I don't have a mum and dad that were fortunate enough to have the house.*

Some of the barriers that were identified in accessing support for mental health needs and also general housing and living skills needs included: a lack of mental health outreach services for social housing tenants; a lack of trained mental health workers in non-government services, and lack of services for people who have both mental illness and drug/alcohol addictions.

The importance of being able to access skilled, competent support workers and caseworkers will be canvassed in the next section. However, for those consumers who could not access a caseworker, or their caseworker did not competently advocate on their behalf, significant difficulties were encountered.

*It was hard for me to get a case-worker. I wanted one, but I couldn't get one.*

*I was in a desolate situation, just really depressed. I ended up getting really depressed staying there [at the Talbot] for a year. I got granted a transitional home but the actual case worker that was working with me didn't fill out my housing commission form. So I was on the transitional housing and... it was basically a road to nowhere... and during the process he's retired or got the sack... So I was going on a transitional house but after two years it was like well you've got nothing after that.*

## **Programs and strategies that helped people obtain or sustain their accommodation**

While participants in the consultations expressed their frustrations and difficulties in either seeking to obtain stable accommodation, or sustaining their accommodation, many were positive and forthright about services and programs that they had been able to access, and had found extremely helpful in moving away from a life of homelessness and housing crisis. This gave them a basis for making suggestions about how to improve assistance and support for people with mental illness who are homeless, or have come off the streets but remain at risk of returning to homelessness. These included:

- The need for more accommodation options and greater access to support services;
- The importance of competent support workers;
- Having access to support groups and support programs;
- Having automatic rent deductions;
- Good customer service practice at Housing NSW.

### **Accommodation and support services**

Several participants were extremely positive about the accommodation and support services they were able to access. Not surprisingly, they strongly endorsed an increase in crisis and supported accommodation for people with mental illness coming off the streets, and more access to support workers that can assist them in coming off the street, advocating on their behalf to obtain supported accommodation in a safe and secure area, and assist them in maintaining their accommodation and avoiding tenancy termination.

*If they had more housing available, it would be good. More buildings like this [Common Ground].*

*They've got to have more services available. More services that are available and accessible for people.*

*It would help to have another service like this [Common Ground]. We need more places like this.*

### **The importance of competent support workers**

Many participants involved in this consultation were quite effusive in their praise and appreciation of the efforts of community support workers who assisted them through the process of coming off the streets, applying for supported accommodation or social housing, and providing ongoing support. This support included brokerage services, ongoing counselling, and assistance with dealing with formal processes with Housing NSW.

*The worker [from the Catholic Care personal mentor programme] stayed with me while I was in hospital. He got me into here. He helped me get the papers together.*

*M who works over at Mission Australia at Harris Park, is an angel. She rings up the Housing Commission until they get sick of her and then they give her a place to shut her up. But about three to four months is all you've got to wait in that housing hostel for men. And they gave me a lounge, a bed and a fridge. All sorts of things for the kitchen and everything, so I was pretty lucky.*

*I was living in a refuge for homeless persons at the time, and there was a woman who specialised in putting applications through Housing, and I went to see her, and I qualified to go on priority... and I qualified for priority housing, and she pushed the application through Housing.*

*Right, well I found it quicker and easier to get a Housing Commission house with a homeless case manager...*

Some participants were particularly impressed with the level of proficiency and competence of their support worker, their determination, their openness and their supportive attitude. Several stated that there was a need for more such support workers to assist people with a mental illness applying for supported accommodation.

*It was all through L [support worker] and ICHOSS [Inner City Homelessness Outreach Support Service] that made them move. L was the actual move maker... she actually shook a few heads to get to get the ball rolling... and yes, I was very fortunate. L was always positive and had good energy. And she opened up her heart. You know, she was one of those guys that you know that opened their heart, and tried to do their best for you.*

*Having support workers you can talk to and tell them how you're feeling, but not pre-judging you.*

*You need more support workers to help you deal with Housing NSW.*

### **Access to support groups and support programs**

Other participants were very positive about various support programs with which they were engaged and organisations and support groups that were providing them with resources and assistance in addition to their accommodation. Some of these programs/groups/organisations also provided group activities, training and educational programs, life-skills training, access to medical support, counselling and general welfare support. For other participants, just providing a warm, friendly, welcoming environment and helping to foster a sense of community was considered an important and valued service. It was not surprising that several participants strongly recommended that there should be more access to these sorts of support groups and support programs.

*That they have [a community house meeting] every month is awesome. Like there's a little bit of structure going there where people take minutes and... Just learning sort of group skills. And they've always got activities. Doctors, psychiatrists... It's a ground breaking sort of thing, to have all these people in the one building, you know. I don't have to travel really to do sort of anything.*

*That was really, it was good. People really friendly and... and a lot of energy. I mean that's really important. There is a lot of love. Even amongst the tenants, you know, there's a lot of love and I think it's awesome!*

*After being out in the streets, it gets lonely. You feel like there's no one... you know sometimes you feel like you're clutching on to straws there. And there's just a really good, hands on approach. And yes those activities are available. You look forward to the weekends.*

*Now I actually live in a house where the Salvation Army are the owners, so I'm like very, very happy. And I'm just like living my life and everything... if it wasn't for them I wouldn't be where I am today. They supply everything, like they pay bills... It makes the house a home.*

*I need help to stay in my house. There needs to be more places to train people how to live in a house, how to live in four walls. It gets claustrophobic. I'm not used to it. Sometimes it seems like it's easier to go back on the streets. If you get that support you'll get more confidence, and then you'll stay longer.*

## **Automatic rent deductions**

Given the difficulties several participants faced when dealing with government authorities, and negotiating complex processes and forms when they applied for housing, some participants reported that they appreciated the automatic rental deduction scheme where their social housing rental payments were automatically deducted from their Centrelink pensions or benefits. For these participants, having their rental payments automatically deducted was one less thing for them to worry about, and helped to remove the risk of anxiety or stress surrounding threats to tenancy arising from rental arrears. Where the automatic rental deductions system worked, it was endorsed by participants, who encouraged greater awareness and take up of the facility.

*So then they brought in a system where the rent deduction, comes out of Centrelink and both work together... So if there's any stuff up it's between Housing and Centrelink, it's got nothing to do with us. It takes the pressure off you, yes.*

## **Good customer service practice at Housing NSW**

In spite of some of the negative comments made about poor customer service from Housing NSW, several participants also reported some very positive and encouraging experiences, where Housing NSW staff were helpful, supportive and diligent in supporting them in dealing with maintenance, neighbour problems or transfers of accommodation. Some participants were quite positive about Housing NSW staff in rural and regional areas, contrasting their more personal approach to customers with the approach of staff in Sydney offices.

*Because the flat I got is beautiful, nothing wrong with it. But when the maintenance people came for their inspection, the letter said they would be there for an hour, well she was only there ten minutes, because the carpet didn't even have marks on it from where old furniture was. And so once they got the rent sorted out well everything's been going smoothly.*

*You get more personal care [from Housing] when you're in the regional areas generally. I waited 10 months when I was 37 to get a two bedroom house to live with my mum because I had to look after her for 20 years... But at Orange you had to have two weeks rent to move in, the day you moved in, so there was no hassle with Centrelink... But it seems so much different in Sydney than what it does in regional areas.*

*We had a noise problem, loud music, and it was an apartment on the back of us. My client manager said everybody in the three units would have a say under the Act. She sent out a letter to every tenant in the block telling them about the Act...*

## **The importance of home**

For nearly all of the participants, the most important thing for them after a life of homelessness, housing instability, anxiety and depression, was the knowledge that they had a place that they could call "home". For many participants, "home" meant safety, security, privacy, being close to amenities, being part of a community, and being able to look after themselves without being judged or hassled.

*I only want to know I got a safe, secure home to live in. I don't want to lose the place where I live. I'm very happy there. It's in a good location for me, it's close to shops, transport, family, my friends here, the leisure club, lawn bowls, I play lawn bowls for the RSL. It's convenient for me in the heart of Parramatta. I don't want to lose my unit where I'm living.*

*I can play me drums, I can sit out on the balcony, do me washing. You know, I can check out some DVDs. I can bring someone home, have a drink... you know, sky's the limit. It feels like home. I mean it's home for now. It's a great place to sew a seed.*

*I do dream about having a house, but it's home for now. And it sure beats the hell out of sitting on a cold floor during wintertime, you know.*

Comments from participants suggested that having the safety and security of their own home meant that many of their mental illness symptoms such as anxiety, stress, paranoia and depression, were alleviated or easier to manage. While the temptation to return to the street and abandon their current accommodation was expressed by several participants, overriding this was an overwhelming sense of relief, gratitude and contentedness with having secured stable, safe accommodation. This serves to illustrate the importance of being able to access appropriate and adequate support services and programs that will assist in sustaining their tenancies and ensuring that they have necessary facilities that will enable them to maintain their accommodation.

*At the moment I feel less stressed. I've got my own place. I can have a cat. I have my own bathroom, my own kitchen. I can do my own thing. I can come home, cook my own dinner, have a shower, and feel safe. I feel that I'm not being judged here.*

*It was really strange moving here after being on the street. It took me a long time to realise that I'm staying here. I kept thinking that they were going to throw me out after three months. Now I'm getting there. I'm starting to feel settled.*



*There's love in the air. You know what I mean, people in building. I get to wash my clothes every day... And you know, I don't have people screaming and yelling and fighting and cursing, carry on. I'm not stopping fights. I have positive people around. When you got positive around you, anything is possible.*

## Conclusion

The NSW Government has recognised the difficulties and problems faced by people with mental illness who are homeless or at risk of homelessness as an area of high priority requiring urgent policy attention. This provides a timely opportunity to consider alternative strategies to respond to the needs of homeless people with mental illness who are reliant on social housing for their accommodation needs.

The interrelationship between lived experience of mental illness, experiences of homelessness, difficulties in obtaining social housing and challenges in sustaining that housing calls for specific, tailored responses that cater the particular needs and disadvantages of this highly vulnerable group in the community. This report provides a graphic and moving portrayal of how some of the people who make up this group view their challenges and difficulties, and also what strategies they believe are most effective in seeking to exit homelessness, and remain in safe and stable accommodation.

During these consultations, nearly all participants recounted in vivid language some of the horrendous experiences of homelessness, abuse, violence and discrimination they had been subject to. Many felt that the lack of support and lack of sensitivity they received from government housing officers and private real estate agents robbed them of their dignity and eroded their self-worth. These feelings were often compounded when they were assigned social housing accommodation in areas that lacked social cohesion and were dysfunctional, unsafe and remote from necessary amenities and support services. Many participants recounted how they felt like “garbage dumped on a tip”, forced to live in situations which exacerbated their feelings of isolation, anxiety, depression or stress. For many participants, there was a common feeling of it being too difficult to remain in their accommodation, and a temptation to return to life on the streets.

However, in spite of the difficult experiences that were recounted, the authors and those who assisted with facilitating the consultations were impressed by the strength, resilience, positive attitude and good humour of those with whom we spoke. Where things worked well for participants, they did not hesitate in expressing their gratitude and praise. For example, it was particularly moving to hear participants express appreciation and positiveness for the committed, determined and competent caseworkers and outreach support workers, who assisted them in obtaining safe, secure and stable accommodation, and provided them with ongoing counselling, brokerage support and other services to assist them in maintaining their accommodation. In addition, the participants spoke of the value of various support and educational programs that they had been able to access, and the importance of these programs in helping them sustain their tenancies, including counselling, financial counselling, medical support, life-skills training, or social group activities.

During the consultations, participants identified a number of initiatives that they considered would make a significant difference in making it easier for people with mental illness finding accommodation, and then remaining in their accommodation. These include:

- Having more assertive outreach services for people on the street, with highly skilled, trained and competent workers who could go out, meet with people, identify their needs, and immediately follow through with possible short-term or supported accommodation options;
- Ensuring that those workers who initiate contact are able to maintain long-term follow up with their clients with mental illness;
- Ongoing, long-term support from case-workers after a person has been housed, to identify their further support needs, and to facilitate ongoing support for the person to help them maintain their tenancy;
- Greater access to advocacy support services that can assist when negotiating with Housing NSW or community housing, dealing with processes involved in applying for social housing tenancies, or communicating with social housing providers in relation to repairs and maintenance, problem neighbours, or other difficulties arising in a high density social housing environment;
- Greater access to community support programs such as brokerage services, financial counselling, mental health services, other counselling services, medical services and social activity programs, that will provide the support for a person with mental illness to maintain their tenancy, and overcome feelings of isolation, anxiety and stress.

During the finalisation of this report, the NSW Government announced that it was reviewing the training of frontline staff in public housing, community housing and specialist homelessness services in working with people with mental health issues, with a view to identifying improvements to the current approach to training of these personnel. PIAC welcomes this announcement, and looks forward to working with the Department of Family and Community Services Learning and Development Team to ensure that the training addresses some of the key areas identified by StreetCare and the consumers who participated in this consultation.

One of the most significant issues to come out of this consultation is the recognition that exiting homelessness for people with mental illness is not a process that concludes once that person has been able to access stable accommodation, as important as that step is.

For many people the struggle to stay housed, to readjust and cope with a new set of pressures and demands of living off the streets, to resist the temptation to return to the streets and the perceived social opportunities that come with living on the street, and to develop the necessary coping mechanisms that come with living in high density social housing, mean that the difficulties encountered in sustaining their accommodation in the medium to long term can be as difficult as accessing the accommodation in the first place.

Access to ongoing, long-term casework support, community programs and counselling services become essential initiatives in sustaining accommodation for an extremely vulnerable group of people in the community, who will always remain at risk of returning to homelessness.