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Policy & practice newsletter for the community information and support sector
Summer, 2011

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Welcome to the inaugural edition of CIVic's new issues-based newsletter which aims to highlight current issues of concern in the information and support sector.

This edition focuses on a critical and alarmingly common issue, housing. We provide an overview of the housing stress and housing affordability issues and its relationship with individuals and families experiencing financial crisis. We welcome the great work done by various peaks, community agencies and research bodies into the housing crisis, but there is still much to be done in spotlighting and advocating for those who fall through the housing gaps – those on income support such as newstart, disability pensions, couples with no children, and those with mental illness and drug and alcohol dependency.

Contents

Housing Overview

By Minh Nguyen, Sector Development Officer, CIVic

A recent CIVic survey of agency responses to clients' experiences of housing stress revealed that many clients are spending a large proportion of their income towards paying rent. With little left over for non-discretionary items, vulnerable families and individuals are seeking emergency relief assistance to relieve the financial stress they are constantly under. The St. Vincent de Paul Relative Price Index Report released in October 2011 states that the significant rise and high degree of price volatility in non discretionary items such as food, utilities, property rates and charges, education and insurance services have 'impacted upon the ability of many households to manage their finances'.[1] Conversely, the price of other goods and services has remained low. This includes items such as clothing and footwear, household furnishings and appliances, computing, telecommunications and motor vehicles. The Report expresses concerns that the price inequality of goods and services will have a detrimental impact on the wellbeing of certain groups within the community vulnerable to slight differences in cost pressures. These include one parent families and lone persons reliant on private rental, or those in the lower income quintiles.

For those on pension, income support payments and low incomes, the multiple pressures of housing stress and high cost of basic goods and services are having an impact on individual and family well-being. CIVic agencies report that housing stress is a significant contributor to financial hardship amongst vulnerable individuals and families who see emergency relief. CIVic agencies have assisted with rent/housing costs in the last financial year anywhere between 3 to 600 times (per agency). The amount of times CIVic agencies receive requests from housing services for assistance with clients rents range from 3-12 times a week to every couple of months.

Mackenzie and Chamberlain's **definition of homelessness** was adopted by the Commonwealth Advisory Committee on Homelessness in 2001 and is widely used in the community sector. It consists of three categories:

Primary homelessness is experienced by people without conventional accommodation (e.g. sleeping rough or in improvised dwellings);

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[1] Dufty, G (October 2011) *The Relative Price Index: The CPI and the implications of changing cost pressures on various household groups*, St Vincent de Paul Society, Melbourne, p.6

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Secondary homelessness is experienced by people who frequently move from one temporary shelter to another (e.g. emergency accommodation, youth refuges, "couch-surfing");

Tertiary homelessness is experienced by people staying in accommodation that falls below minimum community standards (e.g. boarding housing and caravan parks).

The definition is based on the premise that concepts of homelessness and housing are culturally bound, and that in order to define homelessness it is necessary to identify shared community standards about minimum housing.[2]

Housing stress and affordability are complex issues, requiring a whole-of-system approach. Governments at all levels are responding to the issue through better funding and resourcing of housing and support programs, and more responsive community planning and development. There are still other structural barriers that must be addressed, such as the taxation regime around property development and investment. The Australians for Affordable Housing campaign, a coalition of housing, welfare and community sector organisations is working to ensure that governments at all levels adequately respond to the growing crisis.

Also in response to the housing crisis is for governments and communities to reconsider the nature of public and community housing. The old model of public housing no longer responds to the changing needs of our communities. As St. Vincent de Paul's submission to the Inquiry into Public Housing in Victoria so succinctly puts it, public and community housing 'should be delivered from a framework of social inclusion and that it should not be seen as merely a provision of shelter. The support needs of people we assist must always be taken into account when thinking about the provision of affordable housing.'[3]

Housing stress and affordability

Over the past two decades, growth in median prices across Australia exceeded growth in median

.org.au/site/definitions.php
[3] St. Vincent de Paul, *Submission to the Inquiry into the Adequacy and Future Directions of Public Housing in Victoria*, February 2010.

household income. House prices increased by 263 per cent, while after-tax income grew by only 95 per cent. This difference was due entirely to the last 10 years, where house prices grew by 147 per cent, whilst household income grew only by 57 per cent.[4]

All this have contributed to housing stress and housing affordability. Housing stress describes how much households pay as a proportion of income – that is, how much stress they are under to repay their mortgage or rental costs. Housing affordability is determined by measuring the price to income ratios in purchasing a dwelling – that is, how hard it is to purchase a home. It is measured in relation to the difficulty level with which home buyers can gain entry into a housing market. For example, although Sydney is consistently the least affordable city in Australia, In terms of affordability, inner ring Melbourne becomes the most expensive market, as the after-tax income of its resident is around $175 less than Sydney's, thereby pushing inner Melbourne into the least affordable slot.

Furthermore, Melbourne's strong recent record of land release in the outer suburbs has not translated into affordable housing. "The lack of affordability in Melbourne in spite of the strong record of land release reinforces the complex nature of housing affordability and the reality that many factors are at play"[5] Another factor at play is the lack of availability of low rent housing stock for low-income households. Thus, although there was a growth of 7.6 per cent in the number of private rental properties between 1996 and 2001, the supply of low to moderate rental dwellings declines within that time period. At the same time, people who could afford higher rents increasingly were occupying low rent dwellings.

In 2001, only 39 per cent of low rent dwelling were occupied by households with low incomes, compared to 42 per cent in 1996.[6]

The Australian Housing and Urban Research Institute (AHURI), a network of universities clustered into Research Centres across Australia have provided extensive research material and evidence about Australia's housing situation. In 2010, an AHURI-funded Investigative Panel set to explore the question 'What makes a nation's housing system sustainable in the longer term?' The Panel argued that the current housing system was poorly placed to deal with

[4] Phillips, B. (2011), *The Great Australian Dream – Just a Dream?* AMP.NATSEM Income and Wealth Report, Issue 29, July. Sydney, AMP.
[5] Ibid. p.16
[6] AHUR Bulletin, *Supply and demand in the low rent private market*, Issue 50, February 2005.

immediate and longer-term challenges. Affordability was declining, and housing supply was constrained, the traditional public housing model was 'broken' and private rented sector was failing to deliver on the low-rent end. There was a real gap in provision of secure public housing for those in the 5th to 25th percentile in the income distribution. New housing models were therefore needed, and the Commonwealth government needed to provide policy leadership. Although mortgage stress was seen as somewhat overstated, it was recognised that an excess of demand over supply has put many households under considerable pressure.

Planning reform was highlighted as an important issue, with states playing a stronger role. It was felt that sustainable and desirable housing system needs to encompass the following:

- Land, housing and finance markets must be efficient in allocative terms over time
- There should be horizontal and vertical equality in terms of housing opportunities
- Housing should be accessible to all and offer an acceptable level of security
- Housing is a long-lasting good and policies and subsidies need to be flexible
- Housing policy needs to be coherent, transparent and feasible, and environmentally sustainable

However, there were constraints with current market failures and policy fragmentation. Further impacts of the GFC is anticipated, and embedded inequalities in income and wealth will also impact severely upon housing outcomes.

Towards a socially sustainable housing system for Australia

Going forward, the AHURI-funded Investigative Panel identified three pressing issues.

1. New sources of finance were crucial, particularly with regard to institutional/private sector finance for social housing. There are many barriers to achieving this, chief among which is to convince private investors that future revenue flows to social/affordable housing providers.
2. Ensure a viable return for investment. This assurance needs to be underpinned by long-term government commitment to adequate housing-related benefits. It was agreed that there are ways that this could still be done, such as harnessing the strengths of the Australian superannuation industry. This would help address undersupply at the lower end of the market.
3. The home-ownership market should be underpinned by a safety net to ensure greater stability and security.

4. Housing taxation and transfers had to be reviewed as a way of securing a more efficient and effective housing system.[7]

The impact of housing stress on vulnerable people

The impact of housing stress and housing affordability can be found at both the practice level and that of researchers. CIVic agencies see the impact of Melbourne's housing woes on a daily basis. Cost of living pressures are acutely being felt by low income sections of the community. Coupled with the lack of public and private rental, those on low income spend upward from 50-70% of their income on rent. Some clients may not identify inability to pay rent as a reason for seeking ER, though it remains an underlying cause as they contribute so much of their income to rent that there is little else for other expenses.

The three most commonly identified issues for clients presenting with financial hardship caused by housing costs are: increased need for advocacy, negotiation and financial support for utility bills; increased personal debt; increased relationship stress and breakdown. This in turn impacted on agencies ER services with increased demand for ER. Another presenting issue relating to housing stress is an increase presentation relating to mental health. Agencies provide assistance because clients are at high risk of homelessness. Negotiation, advocacy and collaborative arrangements are the most common means with which vulnerable clients are assisted with overcoming their financial crisis. However, this is heavily reliant on the flexible ER (FaHCSIA) funding structure and a high level of service collaboration and integration between CIVic agencies, housing services and other ER providers. Sandy Joffe's article at page 11 provides insight into how CIVic agencies are utilising ER funds to assist clients in crisis. Additionally, contact CIVic for a copy of the CIVic housing snapshot.   It summarises member agencies' experience of - and response to - the impact of housing on vulnerable clients.

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[7] Berry M. & Williams P, Investigative Panel on a socially sustainable housing system for Australia, AHURI Final Report No. 169, June 2011

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Government policy and response

As at 1 January 2009, the National Affordable Housing Agreement (NAHA), which "aims to ensure that all Australians have access to affordable, safe and sustainable housing that contributes to social and economic participation" commenced. This marked a whole-of-government approach to tackling the housing affordability problem in Australia. It provided for $6.2 billion in housing assistance to low and middle income Australians in the first five years.

Social housing

Under the NPA, states and territories agree to increase the supply of housing, providing approximately 1600 to 2100 additional dwellings by 2009-10, and provide opportunities to grow the non-profit housing sector. In Victoria, 554 new dwellings have been built, totalling $99,152,000.00. In 2009, funding under the National Building – Economic Stimulus Plan provided for construction of 20.000 new social housing units (5,000 in Victoria) and additional funds for refurbishment of 45,000 existing public/community housing dwellings (5,600 in Victoria). The State government utilises, matches and sometimes adds to Federal funds to directly fund some social housing developments. Since 2005, the Victorian government moved away from direct construction and management of housing and increasingly relies on funding registered Affordable Housing Associations to construct and manage properties, in partnership with the Office of Housing. It also develops planning policy relating to housing provision and provides the statutory framework for delivering this policy through Victorian Planning Provisions. Local government administers planning schemes on behalf of the state government. Each council has a Municipal Strategic Statement which sets out strategic planning objectives, and provides the strategic local context for considering community housing projects.[8]

Homelessness Strategies

The NPA focuses on three key strategies to reduce homelessness:

- Prevention and early intervention to stop people becoming homeless;
- Breaking the cycle of homelessness; and

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[8] Community Engagement and Community Housing: Lessons and practical strategies for Local Government for responding to contested community housing proposals, Report prepared by Mandy Press for the City of Port Phillip, July 2009.

- Improving and expanding the service response to homelessness.

State and territory governments have agreed to provide $1.1 billion in funding to address the strategies. In Victoria, the focus is on prevention, early intervention and building a foundation to reform and diversify the response to homelessness. Some initiatives include:

A Place to Call Home - 118 long-term accommodation units with support services to be located in Melbourne, outer metropolitan and rural/regional Victoria. A collaborative approach whereby the state government provides land, capital contributions, and funding for support services.

Foyer Model - youth facility to accommodate and support up to 45 young people in regional Victoria, with outreach support in the surrounding area.

Housing Support and Sustain Tenancies - Social Housing Adovacy and Support Program (SHASP) supporting at risk social housing tenants to prevent housing breakdown, and two intensive support and response services to help individuals and families to access and sustain accommodation in outer metropolitan growth areas. The types of assistance that SHASP can provide include:

- Negotiating rent payment by instalments or access to financial counsellor
- Neighbourhood problems and disputes
- Advocacy on tenancy issues, including appeals to decisions by Department of Human Services
- Making a complaint to the Department of Human Services
- Application for public and social housing
- Support with tenancy issues, or when tenancy is at risk

A list of SHASP agencies is available at:

http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/programs/housing-and-community-building/social-housing-advocacy-and-support-program

Psychological Support Packages - 50 intensive psychological support packages for people with enduring mental illness and psychiatric disability to provide holistic responses to achieve stability and improve social inclusion for the chronically homeless.

Support for Women and Children to Remain Safely in the Family Home - by increasing support across Victoria to enable more women and children to stay safely in the family home. This is done via case management to women who have been referred by policy, courts and other services following family violence incidents.

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Support for Families at Risk of Homelessness (case management support, including financial counselling to families experiencing homelessness to maintain their accommodation. This is a state-wide initiative)

Housing support in Victoria

Housing Establishment Fund (HEF) - provides financial assistance to families and individuals who are homeless or in ho using crisis. Eligibility is either homelessness or at risk of becoming homeless and do not have financial means to address their immediate housing crisis. HEF providers consider all options available and seek most appropriate outcomes for clients.

Public housing - the Department of Human Services provides public rental housing to eligible Victorians in housing need. They prioritise people who are in urgent need because of homelessness or other critical circumstances. Clients in private rental who are eligible for public housing should be encouraged to apply for public housing. More information about wait list can be found at http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/public-housing/applying-for-housing/public-housing-waiting-times

Social housing – provided by housing agencies which are not-for-profit organisations that develop, own and manage rental housing for people on low incomes, social housing are a source of short and long-term housing options for those with limited capacity to enter the private rental markets. Some housing agencies specialise in housing specific groups, such as people with disability, singles or older people. These include:

1. Housing associations, which manage and expand new housing and manage rental housing portfolios. Almost 5,000 properties are currently owned or leased by registered housing associations throughout Victoria. They include stand-alone properties, rooming houses, accommodation with onsite support, medium density housing and flats. Examples include
   - Park Place in North Fitzroy
   - Woodstock in Balaclava
   - Elenera & Avoncourt in St Kilda

2. Housing providers, which primarily manage rental housing portfolios (short and long term). They may also provide other valuable services including:
   - Short-term housing-focused crisis support

- Housing information and referral services for those who are homeless or at risk of homelessness
- Support to and advocates on behalf of people living in public and social housing to help them successfully establish and sustain their tenancies.

Home owner support – assistance is provided to homeowners through a range of programs that include:

Mortgage relief - short term interest-free loans to those experiencing difficulties due to unavoidable change in circumstances:http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/home-owner-support/mortgage-relief

Home Renovation Service – assists people to remain living independently in their own home environment with support from family and community networks:

http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/home-owner-support/home-modification

Movable units – self-contained units that could be set up in backyards of friends or relatives' homes to enable eligible people a chance to live independently while remaining in close contact with their loved ones: http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/home-owner-support/movable-units

Group Self Build – an owner builder program that provides home ownership opportunities to people who are willing to commit time and energy to building their own homes and the homes of others in groups of 10 to 12 families: http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/home-owner-support/group-self-build

Private Renter Assistance – various schemes and programs exist to assist those currently renting privately or wish to enter the private rental market. These include: Rent Assistance (Commonwealth scheme), National Rental Affordability Scheme, Bond Loan Scheme: (http://www.dhs.vic.gov.au/for-individuals/housing-and-accommodation/private-renter-assistance/bond-loan-scheme)

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Useful Resources:

PRACTICE

Consumer Affairs Victoria
www.consumer.vic.gov.au
A resource for renters including rights and responsibility information sheets (eg/ rooming house, caravan parks guides) and reporting rooming house concerns -
http://www.consumer.vic.gov.au/CA256EB5000644CE/page/Renting?OpenDocument&1=910-Renting~&2=~&3=~

Community Housing Federation of Victoria
http://www.chfv.org.au/ particularly, their 'resources' and find 'housing pages'

Crisis Help Network: Melbourne Homeless Services
http://www.melbourne.homeless.org.au/
A site containing helpful information compiled by former homeless people, and updated and maintained by people who are, or have been, in crisis or homeless and whose experiences are invaluable to the worth of this resource.

Homelesslaw (online resource for lawyers and advocates) http://www.homelesslaw.org.au/ and their very useful service directory http://www.homelesslaw.org.au/service-directory

Homeless Persons' Legal Clinic
http://www.pilch.org.au/hplc/

Youth Central
http://www.youthcentral.vic.gov.au/Housing+%26+Accommodation/

Tenants Union
http://www.tuv.org.au/

Social Housing and Support Program (SHASP)
a list of SHASP services is available at:
http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/programs/housing-and-community-building/social-housing-advocacy-and-support-program

Housing for the Aged Action Group (HAAG)
http://www.oldertenants.org.au/
There are 4 main services offered:
- Housing Options
- Private Renters Assistance
- Outreach Care & Housing
- Retirement Housing Advice and Support

Peninsula Community Legal Centre
http://pclc.org.au/
an independent, not-for-profit organisation that provides free legal services to Melbourne's south-eastern communities.

POLICY

Australian Housing and Urban Research Institute
http://www.ahuri.edu.au/
A national not-for-profit organisation that funds, conducts and disseminates high quality research on:
- housing
- homelessness
- cities

to inform policies and practices of governments, industry and community sector and stimulate debate in the broader Australian community

Council to Homeless Persons
http://www.chp.org.au/
peak Victorian body respresenting individuals and organisations with a stake or interest in homelessness, and working towards ending homelessness through leadership in policy, advocacy and sector development

Department of Human Services
http://www.dhs.vic.gov.au/for-service-providers/housing-and-homelessness

FaHCSIA
http://www.facs.gov.au/sa/housing/progserv/Pages/default.aspx

Homelessness Australia
http://www.homelessnessaustralia.org.au/site/index.php
national peak body advocating for homeless peoples' rights and working to end homelessness in Australia by promoting national policy and action to reduce homelessness and its impact on the diverse range of people it affects.

National Shelter
http://www.shelter.org.au/index.htm
peak non-government organisation aiming to improve housing access, affordability, appropriateness, safety and security for people on low incomes, or who face disadvantage in the housing system.

VCOSS Publications page
http://www.vcoss.org.au/pubs/index.htm

Proposed New Standards for Rooming Houses – a toehold for improvement

By Paul Zanatta, General Manager Social Policy and Research, VincentCare Victoria

VincentCare Victoria

VincentCare Victoria was established by the St Vincent de Paul Society in Victoria in 2003. We provide quality services for the disadvantaged, particularly those who are homeless, aged, and disabled, and men and women struggling with complex needs including substance abuse and mental health needs. We work with homeless people through our crisis services including as Ozanam House and Ozanam

Community Centre, and Adult and Youth Support Services, at North Melbourne, and our Housing Service in Glenroy. This work focuses our attention on the rooming house scene in and around Melbourne.

VincentCare submission to proposed Standards

Last month VincentCare Victoria made a submission to the Victorian Department of Human Services in response to the *Proposed Residential Tenancies (Rooming House Standards) Regulations Regulatory Impact Statement*. The proposal to establish additional legislated minimum standards for rooming houses resulted from the thirty-two final recommendations made in 2009 by the Victorian Rooming House Standards Taskforce Chairperson's Report[1]. We made this submission because of our serious concerns surrounding the housing shortage crisis that exists in Victoria. This crisis is worsening the plight for homeless people, who are increasingly forced to live in housing which is sub-standard in a developed country such as Australia.

This crisis includes the deteriorating affordability of housing - especially for people subsisting on Newstart. We analysed private rental data from the Victorian Department of Human Services. From March 2007 to March 2011, the percentage of affordable single bedroom dwellings which were newly let in Melbourne for single people on Newstart, has dropped from 4% to 0.8%. The housing crisis is one likely reason for the rapid growth in Victoria's private rooming house sector.

According to data published by the Victorian Department of Human Services [2], registered rooming houses in Victoria grew from 230 properties at June 2009 to 839 properties, containing over 10,172 bedrooms by October 2010.

Regulatory Framework

Rooming Houses are, in the main, regulated through a combination of the Residential

Tenancies Act 1997, Public Health and Wellbeing Act 2008 (and its pursuant Regulations 2009) and the *Building Regulations 2006.* Under the Victorian Public Health and Wellbeing Regulations 2009, a rooming house is a form of *prescribed accommodation* defined as:

> *"a building in which there is one or more rooms available for occupancy on payment of rent in which the total number of people who may occupy that room or those rooms is not less than 4"*

Smaller rooming houses are often conventional domestic dwellings which have been adapted to maximise the number of occupants. They can also be larger buildings which are more purposely built forms of accommodation. Kitchen, bathroom, toilet and laundry facilities are generally shared. Sometimes the smaller rooming house will be a conventional three or four bedroom dwelling with the living room, family room or lounge converted into additional bedrooms. This does not necessarily require additional bathroom or toilet facilities beyond the requirements set out in the same regulations.

Melbourne's rental affordability by indicative households on Centrelink incomes
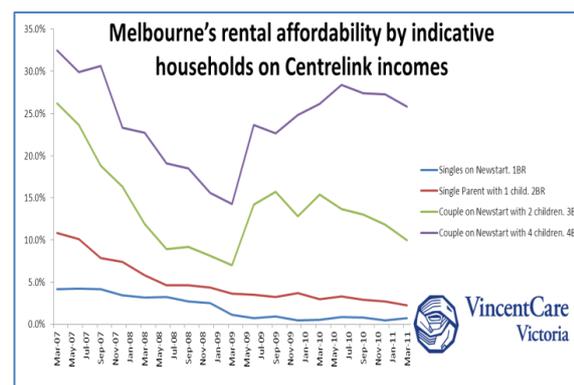
The sector sees a mix of private and community operated rooming houses. As with most things in life there are rooming houses that are good and those that are not. Many of our clients are paying between $190 and $210 per week

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[1] Victorian Rooming Houses Standards Taskforce Chairperson's Report. Authorised by the Victorian Government, Melbourne. sourced from: http://www.chp.org.au/public_news/items/2009/11/00269-upload-00002.pdf

[2] Housing and Community Building Division Victorian Government Department of Human Services. 2011. Proposed Residential Tenancies (Rooming House Standards) Regulations Regulatory Impact Statement. Victorian Government, 50 Lonsdale Street, Melbourne.

to reside in a rooming house. Our concern is that, under these conditions a captive sub-market has been created where people, bound by the limits of their income, are paying disproportionately large amounts for the room they occupy. Under the *Public Health and Wellbeing Regulations*, the minimum bedroom size for a single occupant bedroom is seven and a half square metres, with greater room area requirements for multiple occupants, and even greater multiple occupants for stays greater than thirty-one days. For these purposes, however, a child under the age of three years is not counted as a person, and two children under three years of age is counted as one person. Under the same regulations, a proprietor of prescribed accommodation must provide at least one toilet, one bath or shower and one wash basin for every 10 persons or fraction of that number of persons occupying the accommodation.

On the basis of established definitions, people who live in most rooming houses fall into the category of Tertiary Homelessness:

"*Tertiary homelessness: people who live in rooming houses, boarding houses on medium or long-term where they do not have their own bathroom and kitchen facilities and tenure is not secured by a lease.*"[3]

Reinforcing this homelessness situation is the observed and reported problem that many rooming houses are simply unsafe or unhealthy places to live. This relates to both the physical environment and people's behaviours which may be impacted by substance abuse, untreated mental health conditions, and a threat of personal violence or crime. It is difficult to monitor rooming houses as some are simply not registered. Rooming Houses are required by law to be registered with the relevant local council as a form of prescribed accommodation under the *Victorian Public Health and Wellbeing Act 2008*.

We therefore made our submission to the *Proposed Residential (Rooming House Standards) Regulations Regulatory Impact Statement* to address those issues which could help to create a better rooming house environment

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[3]
http://www.health.gov.au/internet/publications/publishinn nsf/Content/mental-homeless-toc~mental-homeless-1~mental-homeless-1-2

which is acceptable for people to consider as "home" whether this is on a short or long term basis. The Regulatory Impact Statement had proposed a preferred option of adopting eleven out of seventeen originally scoped standards selected on the scorecard of an overall cost-benefit analysis. These Standards would form part of the Residential Tenancies Regulations. Even though we consider the eleven standards being proposed as essential, they are a minimum standards approach and we believe that the overall benefits will deliver insufficient improvement to people's overall safety and wellbeing.

The proposed eleven standards address:

1. Fire-safe locks on bedroom doors.
2. Fire evacuation diagram, whose procedures are prominently displayed.
3. Switchboard type circuit breakers and residual current devices.
4. At least one functional double power outlet in each bedroom.
5. Gas and electrical safety checks conducted every 2 and 5 years, respectively.
6. Keyless privacy latches on all toilet and bathroom doors.
7. Security features (lockable main entrance, securable windows, screen doors).
8. Certain rooms to have natural light and natural or mechanical ventilation. All rooms must have sufficient natural or artificial light.
9. Fit for purpose window coverings fitted in each bedroom.
10. Provision of certain kitchen and dining facilities which are fit for purpose and allow residents to prepare and eat food.
11. Provision of plumbed laundry wash trough or basin (not kitchen sink) and a clothes line or drying facility.

The six *amenity* standards which were not adopted on the basis of the cost benefit analysis are as follows:

- *Fixed heating source must be provided to at least one common area.*

- *Ceiling insulation must be installed.*

- *One toilet and shower**, in different rooms**, for every ten residents.*

- *Walls, floors, ceilings, doors, fixtures, fittings and facilities in a reasonable condition.*

- *Adequate living/common areas must be provided.*

- *Each openable window (or window which is fixed open) is fitted with a fly screen*

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VincentCare Recommendations to the Standards

We recommended in our submission that all seventeen standards be adopted. We also discussed a number of other issues and made recommendations which in summary, included:

- a more complete economic appraisal to understand the extent to which standards could be maximised before there are significant market impacts in terms of cost and supply,
- mandatory advertising of rooming house rental fees to permit residents to exercise more informed choice and enable competition on price. The market should also be monitored for evidence of price collusion and anti-competitive practice,
- government involvement in creating an industry managed accreditation scheme to enable competition on quality,
- further attention and long term reform in relation to:
  o the appropriateness of using the Building Code of Australia Class 1 residential dwelling stock for rooming houses,
  o each occupancy unit essentially to include the amenity of bathroom and toilet, and basic food preparation and small meals areas,
- increasing the 7.5 metres square minimum regulation to 10 metres square for a single person,
- on and off-site concierge service arrangements according to size of rooming house and time of day,
- a rent capping scheme as a means to ensure a more continuous relationship between price and value across the residential rental market,
- greater attention to the enforcement and application of the penalty regime for unregistered rooming houses,
- a separate special category of rooming house registration for community organisations with subsequent eligibility to attract government funding for people who have complex needs, but who do not necessarily require all of the personal support or in-house meals provision of a Supported Residential Service,
- greater attention to enforcing the requirement that rooming house operators provide all prospective residents with a copy of the Consumer Affairs Victoria (CAV) publication, *Rooming houses: A guide for residents*, in appropriate community languages,
- a requirement to also display information about local housing access points and homelessness services so that people do not become trapped through lack of support to pursue alternative means of accommodation,
- a central contact line to enable rooming house residents to report non-compliances with a view to establishing a permanent rooming house complaints line.

How CIVic agencies can help

CIVIC members can assist rooming house residents by providing them with access to the Consumer Affairs Victoria publication, Rooming Houses – a guide for residents. This guide can be downloaded (or ordered) from the Consumer Affairs website at:

http://www.consumer.vic.gov.au/CA256902000FE154/Lookup/CAV_Publications_Renting/$file/rooming_houses_a_guide_for_residents.pdf

NB The guide must also be provided by rooming house operators to residents at the time they move in to the rooming house.

Community Housing in Victoria

By Dr. Mandy Leveratt, Manager, Quality and Service, St. Kilda Housing Group

The community housing sector in Victoria covers an array of different housing agencies each with their own particular focus. For example, organisations such as HomeGround and Hanover Welfare Services receive funding for crisis and transitional housing. Agencies that are registered with the Housing Registrar Victoria fall into two categories, Housing Associations and Housing Providers.

Housing Associations are expected to raise 25% of their capital through the open market, generally using properties divested to them by the Office of Housing as equity. Because Housing Associations are expected to grow and develop additional properties, they also accommodate a wider range of tenants than housing providers, for example, low-to-middle-wage earners in addition to people on benefits and pensions. By contrast, housing providers provide accommodation to tenants who must fulfil the same eligibility criteria as public housing tenants in terms of both income and assets.

St Kilda Community Housing (SCH) has been operating rooming houses in St Kilda since 1984. We now have 20 rooming houses with over 300 tenants. Our organisation grew out of the general concern that was being expressed at the loss of rooming house accommodation in the inner city suburbs in the late 1970s and early 1980s. In 1980, in response to this agitation the State Government initiated the Rooming House Program. In St Kilda some 20 properties were put forward as suitable but only two were accepted. Those two properties – Elenara and Avoncourt – were the first two properties to be managed by what was then the St Kilda Rooming House Issues Group (later to become St Kilda Community Housing).

The following table shows how important community housing has been for the preservation of rooming houses in the City of Port Phillip alone.

Private Rooming Houses				
Year	1997	2000	2003	2007
Houses	49	39	25	22
Beds	910	819	577	403
Community Rooming Houses				
Year	1997	2000	2003	2007
Houses	29	35	37	41
Beds	459	519	643	792
Total Rooming Houses				
Year	1997	2000	2003	2007
Houses	78	74	62	63
Beds	1369	1336	1220	1195

All the growth has been in the community sector whilst the private sector continues to decline.

The last two years have been a period of growth for SCH because of the Federal Government's National Building economic stimulus package. This program has resulted in four of our properties being completely redeveloped and converted from shared facilities to self-contained bed-sits. When all of our properties are complete, self-contained bed-sits will amount to almost 80% of our stock.

This is a dramatic change in our stock profile and one that we believe will flow through to the tenants, leading to lower levels of turnover generally. We also believe that self-contained accommodation will provide tenants with a safer and more secure form of accommodation – particularly for women, who currently only represent some 15% of all of our tenants.

More than 90% of our residents are either on a pension or a benefit. They are a vulnerable group – often with a history of homelessness, mental illness and/or drug and alcohol problems. As a consequence, SCH works extremely closely with the many support agencies operating in the local area, such as the Port Phillip Community Group, Inner South Community Health Services and Sacred Heart Mission. Some of these agencies also have nomination rights into our properties. This is a model which has developed over many years and the close collaboration has resulted in a very stable rooming house population. There is little doubt that without these strong local relationships, SCH would

experience far higher levels of turnover than we currently do.

There is some level of debate as to whether rooming houses represent an appropriate standard of accommodation in the twenty-first century. There is little doubt that most people would not choose to live in a rooming house. However, it would adversely affect some people in the community if they were to disappear altogether; not only because they represent the only affordable inner city housing for disadvantaged people but also because for some people a single room is about as much as they can manage. In the future, we need to be careful that, in the light of raised community standards, we do not forget those who need a rooming house.

Australians for Affordable Housing Campaign

By Sarah Toohey, Campaign Manager, Australians for Affordable Housing

The cost of housing is the single biggest cost of living issue in Australia today. Compared to other expenditure items, housing costs comprise the biggest share of household budgets, and leave over 850,000 households in housing stress across the country. For too long governments at all levels have not seriously addressed the housing crisis that many households face.

Because of this, over 60 community and welfare organisations have come together to form Australians for Affordable Housing. This coalition was established by organisations who see the impact of housing costs everyday, to campaign for Government action to fix the housing crisis.
There is no single cause of Australia's housing affordability crisis. Rather, it is the result of a range of problems in the home ownership, private rental and public housing markets, all of which need to be tackled in a comprehensive and coordinated way.

Decisions in one section of the housing system, flow down onto others. For instance, tax breaks to invest in housing such as negative gearing and capital gains tax exemptions encourage investors to make speculative investments in the housing market and subsidise investors to compete with first home buyers. While many people have invested in housing as a retirement strategy, these tax breaks work to push up house prices.

Over the last 20 years we've seen a decline in young people aged 25-44 buying homes. Increased house prices means that potential first home buyers are staying in the rental market for longer, competing for properties and pushing up rental prices. Since 2005 rents in Australian cities have risen at twice the rate of inflation. Rents are racing ahead of government benefits and rent assistance, leaving low income households in severe housing stress.

Annual rent hikes also see many households having to move year after year in order to find a rental property they can afford.

While the Federal Government recently invested in 19,300 more social housing properties through the Nation Building Stimulus package, Australia still had fewer public housing units in 2010 than in 2001. Overall there is less low cost rental housing to go around.

Everyone should be able to get housing that they can afford that meets their needs. Unfortunately we don't have a housing system that delivers that. Governments at all levels can and do influence the housing market through tax incentives, first home owners grants, affordable housing programs, planning controls and rent assistance. Yet there is no overarching national plan for housing and the result is that these interventions are not coordinated, often contradictory and ultimately ineffective.

In order to make our housing system work for everyone, whatever your age or income, Australia needs a clear national plan that includes:
- investment in more low cost rental housing,
- more opportunities for low income households to get into home ownership,
- better financial assistance for low income renters,
- initiatives to make home ownership more achievable for first home buyers,
- changing the housing investment tax arrangements that drive up house prices, and
- a single cabinet level housing minister who is responsible for delivering these changes.

Australians for Affordable Housing will be campaigning for governments across Australia to deliver a housing system that works.
To learn more and join the Australians for Affordable Housing visit www.housingstressed.org.au

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Homelessness and emergency relief

By Sandy Joffee, Executive Officer, Port Phillip Community Group

PORT PHILLIP COMMUNITY GROUP

Port Phillip Community Group (PPCG) has long argued for increased Emergency Relief funding to the inner city on the basis of high presentation of transient and homeless clients at our agencies. Three decades of gentrification and inadequate Government investment in social housing has left these areas in the most acute housing crisis Melbourne has ever experienced. With the offer of *'vulnerable groups' funding*, we looked more closely at how ER could make a difference to people who were homeless, or at risk of homelessness.

It became immediately obvious that rent is the overwhelming priority for our homeless clients, and yet we believe that *housing* should be funded by *housing money*. At the same time, assistance which did not address this fundamental need felt ineffective. In response, PPCG developed a case management approach to ER, using some of the funds to employ part-time staff to support eligible clients to access appropriate housing programs as well as making personalised brokerage available.

Through this model, clients engaged with workers regularly as they gradually took back control over their lives. Most homeless clients presenting to PPCG have complex needs, a combination of two or more of the following factors; drug and/or alcohol dependency, mental illness, chronic physical illness, acquired brain injury, family violence, gambling addiction, social isolation. The combination of support, information and brokerage has proven a valuable mix for intervention.

For the most part, the ER assistance is a critical point for initiating contact with homeless people, and in supporting them to find a strategy for dealing with their situation. PPCG's experience is that ER for homeless people needs to be:

- *Flexible enough to address very different issues. Mobile phones and Met tickets are commonly needed, but there have been cases where funds have been used for such diverse items as clothing, and interstate travel*
- *Supported by a case worker who can follow-through with housing advocacy and make other referrals as appropriate*
- *Provided in a safe and trusting environment.*

Emergency Relief is one of many tools that together can address the complex issues facing homeless people in Inner Urban areas.

Case Study:

Mr X is a young Asian immigrant who worked in retail and maintained a private rental. Having lost his job and his home, possibly as a result of gambling, isolation and depression, and without family to fall back on, Mr X spent two months sleeping in a park before finding a temporary place at Hanover. Without employment, the only accommodation option open to him was a private rooming house, which was not likely to have been a conducive environment for recovery. PPCG's case worker therefore supported him to prepare a CV and look for employment. ER funds were used to purchase a phone, so that employers can contact him and Met tickets for safer travel. He will be provided with other funds necessary for purchasing clothes etc. for interviews. At this stage, Mr X has not followed-up on gambling counselling.

Housing Case Stories from CIVic agencies

Angela

Gender & Age: female, late 60's
Family composition: single person with one adult grandchild living on the other side of the city and one teenage grandson with intellectual disabilities approximately 30 minutes' drive away.
Complex issues include: Ill health, homeless, depression, grief, isolation
Reason for seeing a caseworker: Homelessness, grief

Client history
Angela is a single woman, one child had died 20 years earlier in a car accident. Angela's 2nd son had recently passed away after a long battle with cancer. During this time, Angela was home nursing her terminally ill son. After her son's death Angela could no longer afford the unit that they had shared – she was able to pack her belongings and place them in storage. As Angela had paid for funeral costs she had no savings to pay for bond and believed that her only option was to live in her car. Angela was in a casual relationship that was violent yet she stated this was her only friend. Angela's initial comment regarded the concern that her toe nails needed cutting – the following discussion revealed the depth of her grief over losing both children and finding herself alone and with no money. Angela had limited interest in life and was constantly questioning why she bothered to continue living.

Assistance provided (or providing)
Initial focus was at a practical level – Angela was able to move into an acquaintance's garage, housing applications were completed, social connections were considered, counselling was organised to commence immediately, doctors contacted, banks contacted, organisations that her son had been involved in were informed of his death, financial counselling referral, fees were paid for her bowling club membership.

Community housing was found after approximately 2 months. Angela is now continuing counselling, is attending bowling club most days of the week resulting in increased social connections, increased self-confidence and self-care. Angela continues to attend regarding outstanding debt, Centrelink interaction and as point of contact. Angela's health has improved significantly; she stated 'now that I have a house everything is just falling into place'.

Angela now has stable housing, increased understanding of budgeting, grief counselling, increased social connections and an attitude to life of positiveness.

Agencies/services referred to:
Finanancial and general counselling,
Medical professionals
Centrelink

Resources used:
contacts, referrals, internal counsellors, external counsellors, local contacts e.g. Manager at local bank

Successful advocacy and support strategies include:
the main supportive feature is the secure housing as this allowed Angela to have a secure base from which to build on other strengths and assets

John

Gender & Age: male, 53 years old
Family composition: Single
Complex issues include: John has been on the public housing waiting list since 1999 and on the early housing wait list since 2008. During this time he alternated from sleeping at friends places to sleeping in his car.

Client history
Since 2008 John has had no suitable accommodation and his only housing option was to sleep in his car. Private rental is not an option as he does not have the ability to secure rental with limited income and no rental history.

John has a number of health concerns which have been compounded by his living conditions. He has asthma, stomach problems, severe back pain and in addition to this, he has kidney, liver and eye problems which have resulted due to his diabetes not being properly managed. John needs to keep insulin for his diabetes in a refrigerator, however as he is living in his car, he does not have access to a fridge and for the short time it is being stored at the chemist. This is only a short term option as the pharmacist informed him that this could not be a permanent option.

Being without stable and secure housing since 1999 has exposed John to many risks and has resulted in negative effects on his mental and physical wellbeing. His personal safety is put at risk on a daily basis and being forced to live in his car without housing exposes him to crime and violence. He has had to deal with a life on the streets with no formal or informal supports which has left him isolated and vulnerable. John needs to secure housing and be linked in

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with a housing support worker to assist him in addressing his physical, mental health and his drug issues and in order to feel safe and reduce his isolation. If John does not secure safe and suitable housing, he will be left to face a life of long term homelessness and continuing to experience the detrimental impacts of this.

He does not have friends or family that he is able to go to for support or for social interaction which leaves John alone and isolated to face his drug, health and living conditions.

John presented for our emergency relief service seeking assistance to purchase methadone as he had just began on the methadone program. He was referred to see a caseworker as he had been homeless for many years and was not linked into any service and had no housing support worker or a housing service that can assist him in accessing housing. Apart from putting in his housing application, he has had no other forms of support in securing housing.

Ongoing support include:

- He will continue to access our case management service until he is linked into the appropriate services and we will continue to advocate for his needs

- He also will continue to meet the counsellor from a drug and alcohol service for support with housing and managing his drug issues

Agencies/services referred to:
Drug and alcohol service
Local housing service
Local politician in the area

Successful advocacy and support strategies include:

- considering John's health issues and the length of time he has been on the early housing wait list, speaking to the local politician in the area was a definite option. From this, they have written to the Minister as they agree his situation is dire.

- having casework support has given John someone to discuss his concerns with as well as provide support during stressful and challenging times. From our work together it has also given him his own advocacy tools to begin to regain his confidence and ability to navigate the service system.

- a case conference and regular contact with the drug and alcohol counsellor is undertaken on a regular basis.

General comments (such as emerging trends, barriers and issues):
John is a very gentle and polite man. Despite the challenges he has faced in his lifetime, he is easy to engage with and very open to discussing his short term and long term goals and will work together in developing ways to achieve these.
Concerns are that John's health is deteriorating due to being without stable accommodation and this is being impacted by his drug issues as well. While his insulin is being kept at the chemist for a short time, once this is no longer an option, John will be left with nowhere to store his medication. This will mean that he will no longer be managing his diabetes and his other health conditions will worsen due to this. John's doctor has informed him that his eye-sight is worsening because of his unmanaged diabetes and if he loses his driver's license due to this he will be left with no car, no privacy and nowhere to live.

It is the caseworker's view that if John was able to access safe and secure housing, his health and drug issues will be minimized and he will have the opportunity to regain control of his life.

Lisa

Gender & Age: Female, 19 years old
Family composition: Single
Complex issues include: Lisa has been homeless since she was 15, and had spent short periods of time at her Mum's or Grandmother's place. In the last 6 months, she had been smoking marijuana in large quantities daily which had severely impacted her mental health. Lisa explained that she at times felt suicidal and felt as though people could read her thoughts.
Lisa had recently begun seeing a counsellor, but was not taking her medication regularly.

Client history
Lisa was internally referred to the ER service from a program within our agency. Lisa was linked in to our L to P program in order to get assistance with getting her licence, however as she spent time with the worker, she revealed that she was homeless and was suffering from depression and anxiety. Lisa was linked in to the ER service for assistance with emergency accommodation and was then linked in to the case management service, as she was presenting with severe depression and did not seem to have many supports in place.

Assistance provided (or providing)
After making several referrals to various mental health services and housing agencies, Lisa was advised by her

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counsellor to attend the hospital and ask to be placed in the psychiatric unit as she became severely depressed, was suicidal and at risk to herself. During her stay in the Psychiatric unit, I worked closely with the psychiatric nurses and social worker to ensure the appropriate supports would be in place for Lisa upon her discharge, including housing options.

The hospital was able to provide temporary accommodation for Lisa by paying for her to stay in a hotel, which was not ideal given her mental health status, however this was only for a short period as we were able to link her in to supported housing through a mental health service.

During this time, Lisa was linked into a program to support young people with mental health issues through Hanover, who also worked with her on long term housing solutions. We worked with Lisa to ensure she took her medication regularly and how to plan her trips to the doctor to ensure she was never out of medication. Shortly after she moved in to supported accommodation, Lisa left as she felt it was not suitable for her. Because of her mental health, Lisa felt that the shared accommodation she was in was not appropriate.

Ongoing support include:
Since being admitted to the hospital, Lisa had not smoked marijuana however her return to homelessness placed her at risk of returning to heavy drug use.

Lisa had mentioned a desire to break the cycle that she was in and wanted to take on further study or enter employment.

Hanover continued to work with Lisa on her housing issues and eventually, we were able to place her in transitional housing. She is currently completing a course to get her gaming and responsible service of alcohol licence so she can work in the hospitality industry.

Agencies/services referred to:
Mental health services
Housing agencies and services
Counselling

Jo

Gender & Age: female, 41 years old
Family Composition: Single mother (with a 24 year old drug dependant son) also has an on/off long term partner/carer wherein they co-use drugs on a weekly basis.
Complex Issues include: severe mental health acquired brain injury compounded by many years of drug (heroin) and alcohol abuse. Jo was involved in an accident while in her early twenties and is on medication severe back pains as a result of injury potential reason for addiction problems

Client history:
Jo was internally referred by the agency Duty Worker to the caseworker.

Jo had lived at a local community housing (CH1P1) for approximately 8 years wherein she was residing in a women's only rooming house. When this house was closed for refurbishment she moved into a mixed gender house. She was offered a room with another community housing provider (CHP2) which she relocated to in early 2011.

While living at CHP2 Jo was hospitalized on 2 occasions in the Psychiatric unit of the hospital. Upon her release, she voluntarily gave up her property with CHP and subsequently made herself homeless and has been couch surfing since. CHP2 owed Jo some rent as she had paid the full amount while in hospital. This amount of money was re-paid to her by CHP2.

Upon her release from the Psychiatric unit, she was not provided with a mental health care plan as she suggests she was just asked to leave.

The current situation for Jo is pretty precarious as she is staying with her long-term friend/partner in a rooming house, which is very unsafe accommodation wherein she can be exploited by tenants. Jo's friend/partner has a long history of abusing her and long term heroin habit with a strong connection in drug distribution and he is a person of considerable power in affecting how the house is organised in terms of exploiting/supplying tenants. Staff at CHP2 are more than aware of the nature and culture of the household, and over a number of years it has been left to fester and been ignored as too difficult.

Caseworker discussed Jo 's situation with CHP1 and CHP2 in relation to her being homeless and both agencies have put her back on waiting lists for housing. PPCG Back on Track worker to monitor client via regular contact and one on one interview.

Issues identified:

• Mental Health and drug and alcohol history, compounded by acquired brain injury

• Client unable to make appropriate decisions, life decisions

• Nature of clients relationship to partner Is of a collaborative nature that is one of potential harm/risk to her well-being

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- Inappropriate discharge from psych unit no planning in place

- Community housing agencies not providing adequate support for client though have awareness of her mental health issues

- CHP2 not taking responsibility appear not to take on the prominent drug culture of the house

- Jo is at high risk while surf couching

Assistance provided:

- Develop a strong working relationship with community housing groups to ensure clients of high risk have direct link to caseworker and mental health case workers/housing workers.

- Seek to engage client into supported housing SRS link to mental health services for one to one case management

- Link client to drug & alcohol counselling services one-on-one case management

Jo was linked to an agency specialising in assisting people with acquired brain injury, alcohol and other substance related brain injury. The assessment involves a range of tasks designed to test specific cognitive functions such as memory, attention/concentration, new learning, planning and problem solving, spatial abilities and the ability to make decisions and carry through with them.

Mary

Gender & Age: female, 32 years old
Reason for seeing a caseworker:
Mary was referred by the local housing support service as she was at risk of losing her mortaged property. She had also experienced family violence and had recently given birth to her third child. Mary was born overseas and had no family in Australia and no support or assistance with raising her children.

Assistance provided (or providing)
Mary was referred to a financial counsellor who was able to liaise with the bank, which allowed her to suspend mortgage repayments for 3 months, giving her some breathing space. We also helped her find some 'lost' superannuation.

As Mary had a 4-bedroom house we linked her with the "Home Stay" program at the local university, which facilitated renting of rooms to overseas students. As it was in the middle of term, it was difficult to find students who were not already housed, but her details remain with the program for the future.

Mary was keen to return to work so we assisted her to enrol at the local Learning Centre, first in English classes and later she began a Certificate 3 in Children's Services. By providing information on the 'Parents Returning to Earnings' payment, Mary was successful in gaining the $1000 benefit. We also assisted her in looking for child-care and obtaining the childcare benefit for this.

After she was able to secure her baby in childcare, we assisted her to re-gain her Certificates in RSG (Responsible Service of Gaming) and RSA (Responsible Serving of Alcohol). Mary passed the tests, was able to pay for the certificates and, shortly afterwards, gained part time employment with these qualifications. Since starting her job, she has not presented at our agency again.

Agencies/services referred to:
Financial counsellor

PILCH Homeless Person's Legal Clinic

The Homeless Persons' Legal Clinic (HPLC) is a project of the Public Interest Law Clearing House Vic Inc. (PILCH). The HPLC is a specialist legal service that provides free legal assistance and advocacy for people who are homeless or at risk of homelessness. A list of clinic times and locations can be accessed at the HPLC website or at http://www.pilch.org.au/HPLC_Clinic_times_and_locations/.

In June 2011, the HPLC made submission to the Inquiry into the Charter of Human Rights. The HPLC had been relying the Charter to get better outcomes for clients. The following case study demonstrates the use of the Charter of Human Rights and Responsibilities Act 2006 (Vic) (Charter) to argue that there is an obligation on public authorities (under section 38 of the Charter) to act compatibly with human rights and to give "proper consideration" to relevant human rights in decision-making.

The following case studies are taken from the HPLC website: http://www.pilch.org.au/Assets/Files/HPLC%20-%20sample%20case%20studies%20_3_.pdf

Ben

Background: Ben had lived in public housing with his mother for 18 years. After she passed away in 2005, when he was 29, things went off track and he was evicted for rental arrears. As a result of undiagnosed depression resulting from the grief of losing his mother and his home, Ben's business as a tradesman fell behind. He entered a period of ongoing homelessness, during which he stayed for a time in a caravan park and did various stints in private rental that he could not afford and which pushed him further into debt.

The issues: Ben lived with his partner on and off from 2005 until her sudden death in mid-2010. He had lived with her permanently since mid-2009 but was not listed as a resident. The Office of Housing told him he would have to move out or they would apply for possession. Ben applied for the tenancy to be transferred into his name.

This application was rejected, because Ben could not show that he had been listed as a resident for 12 months as specified in the OOH's Tenancy Management Manual.

Assistance provided: The HPLC assisted Ben to appeal to the Housing Appeals Office. The Charter was used to highlight Ben's hardship and the need to properly consider his circumstances before evicting him. The appeal questioned whether the OOH had properly considered Ben's right not to have his home or privacy arbitrarily or unlawfully interfered with (under section 13(a) of the Charter) before making the decision to reject his application for transfer.

While the appeal was on foot, as a result of the stress and grief, Ben had a psychotic episode and he was hospitalised involuntarily in the psychiatric ward of his local hospital. Fortunately, he recovered from this and was discharged under a voluntary Mental Health Care Plan.

Outcome: this matter was resolved without going to the Victorian Civil and Administrative Tribunal (VCAT). The relevant Housing Office indicated that they did not want to evict Ben into homelessness, but could not leave him in the three bedroom property he was in because he was just a single guy. Ben accepted this, saying "I'm not greedy; I just don't want to be on the streets," and willingly relocated to a one bedroom unit.

The Abrahams

Background: the Abrahams had lived in a public housing property with their children for 10 years. The Director of Housing (DOH) applied for a Possession Order on the basis of alleged breaches of a Compliance Order that the Abraham family were subject to.

If the DOH's application had been granted, it would have led to the eviction of the Abraham family and then exposed them to a serious risk of homelessness.

Assistance provided: the HPLC contacted the Office of Housing (OOH) to request the evidence that formed the basis of the DOH's application for possession, but the OOH indicated that they would provide this evidence at the hearing itself, not before the hearing.

At the hearing, the HPLC submitted that the DOH's failure to provide the evidence it was relying on breached the Abrahams' right to a fair hrearing under the Charter (section 24) because they were not made aware of the case they had to answer. The HPLC also submitted that such an approach by the DOH was not consistent with the Victorian Government's *Model Litigant Guidelines*.

Outcome: VCAT ordered the DOH to provide evidence being relied on and adjourned the hearing until such evidence was provided to the HPLC. The DOH then withdrew the application for possession and agreed to meet with the Abrahams to reach an alternative resolution.

CIVic FULL MEMBERS

Banyule Support & Information Centre Inc	HEIDELBERG	9459-5959	www.bansic.org.au
Bayside Community Information & Support Service	BRIGHTON	9596-7283	
Bayside Community Information & Support Service	HAMPTON EAST	9555-6560	www.bayciss.org.au
Bayside Community Information & Support Service	SANDRINGHAM	9598-0422	
Box Hill Citizens' Advice Bureau	BOX HILL	9285-4801	
Camcare Inc - Ashburton	ASHBURTON	9809-9100	www.camcare.org.au
Camcare Inc - Camberwell	CAMBERWELL	9831-1900	www.camcare.org.au
Casey North Community Information & Support Service Inc	FOUNTAIN GATE	9705-6699	www.caseynorthciss.com.au
Chelsea Community Support Services Inc	CHELSEA	9772-8939	
Cobram Citizens Advice Bureau Inc	COBRAM	5871-0924	
Coburg Community Information Centre Inc	COBURG	9350-3737	
Community Information Centre Hobsons Bay Inc.	ALTONA	9398-5377	
Community Information Glen Eira Inc	GLEN HUNTLY	9571-7644	www.cige.org.au
Cranbourne Information & Support Service Inc	CRANBOURNE	5996-3333	www.cranbourneiss.org.au
Dandenong Community Advisory Bureau Inc	DANDENONG	9791-8344	www.dcab.org.au
Darebin Information, Volunteer & Resource Service Inc	PRESTON	9480-8200	
Diamond Valley Community Support Inc.	GREENSBOROUGH	9435- 8282	www.dvsupport.org.au
Doncare Community Services	EAST DONCASTER	9841-4215	www.doncare.org.au
Essendon Citizens Advice Bureau Inc	MOONEE PONDS	9370-4533	
Frankston Community Suppport & Information Centre Inc	FRANKSTON	9768-1600	www.frankston.net
Glenroy Community Information Centre Inc	GLENROY	9306-0555	
Goulburn Valley Community Care & Emergency Relief Inc	SHEPPARTON	5831-7755	
Information Warrandyte Inc	WARRANDYTE	9844-3082	www.informationwarrandyte.org.au
Knox Infolink Inc	BORONIA	9761-1325	www.knoxinfolink.org.au
Lilydale & District Community Information Centre Inc	LILYDALE	9735-1311	
Living Learnin Pakenham	PAKENHAM	5941-2389	www.llinc.com.au
Maroondah Citizens Advice Bureau Inc - Croydon	CROYDON	9725-7920	www.mcab.org.au
Maroondah Citizens Advice Bureau Inc - Ringwood	RINGWOOD	9870-3233	www.mcab.org.au
Maryborough Community Information Centre Inc	MARYBOROUGH	5461-2643	
Mentone Community Assistance & Information Bureau Inc	MENTONE	9583-8233	
Monash Oakleigh Community Support & Information Service Inc	OAKLEIGH	9568-4533	
Monash Waverley Community Information & Support Centre Inc	MOUNT WAVERLEY	9807-9844	
Mornington Community Information & Support Centre Inc	MORNINGTON	5975-1644	www.morninfo.org.au
Mt Alexander Community Information Centre Inc	CASTLEMAINE	5472-2688	
Port Phillip Community Group Inc - Port Melbourne	PORT MELBOURNE	9209-6350	www.ppcg.org.au
Port Phillip Community Group Inc - South Melbourne	SOUTH MELBOURNE	9209-6830	www.ppcg.org.au
Port Phillip Community Group Inc - St Kilda	ST KILDA	9534-0777	www.ppcg.org.au
Prahran Citizens Advice Bureau Inc	PRAHRAN	9804-7220	

South Gippsland Citizens Advice Bureau Inc	LEONGATHA	5662-2111	www.sgcab.org.au
Southern Peninsula Community Support & Information Centre Inc	ROSEBUD	5986-1285	
Springvale Community Aid & Advice Bureau Inc	SPRINGVALE	9546-5255	www.scaab.org.au
Sunraysia Information & Referral Service Inc	MILDURA	5023-4025	www.vicnet.net.au/~sirs
UnitingCare East Burwood Centre	EAST BURWOOD	9803-3400	
Western Port Community Support	HASTINGS	5979-2762	
Whittlesea Community Connections Inc	EPPING	9401-6666	www.whittleseacommunityconnections.org.au

CIVic ASSOCIATE MEMBERS

Ardoch Youth Foundation	ST KILDA	9537-2414	www.ardoch.asn.au
Australia Help Limited	NARRE WARREN SOUTH	0428366220	www.australiahelp.org
Bendigo Family and Financial Services Inc	BENDIGO	5441-5277	
Diamond Valley Foodshare Inc	GREENSBOROUGH	9432-8274	
Dingley Village Community Advice Bureau Inc	DINGLEY VILLAGE	9551-1799	dvcab.org.au
Eastern Emergency Relief Network Inc	MITCHAM	9874-8433	www.easternemergency.org.au
Endeavour Ministries Inc	ENDEAVOUR HILLS	9700-4944	www.andrewscentre.org.au
Healesville Interchurch Community Care Incorporated	HEALESVILLE	5965-3529	
Jesuit Social Services Limited	RICHMOND	9427-7388	www.jss.org.au
LINC Church Services Network Yarra Valley Inc	YARRA JUNCTION	5967-2119	
North East Region Volunteer Resource Centres Inc	HEIDELBERG	9458-3777	www.volunteersofbanyule.org.au
Somali Australian Council of Victoria	HEIDELBERG WEST	9459-6333	
Swags for Homeless Ltd	KNOXFIELD	9764-9422	www.swags.org.au
The Gianna Centre Inc	BENDIGO	5442-4644	www.gianna.org.au
The Migrant Hub	WERRIBEE	9731-7877	
Transworld Aid Inc	NARRE WARREN SOUTH	0411 714 885	www.transworldaid.org
United Way Ballarat Community Fund	BALLARAT	5331-5555	www.unitedwayballarat.com.au
Victorian Youth Mentoring Alliance	MELBOURNE	0423929601	www.youthmentoringvic.org.au
Volunteering Geelong Inc	GEELONG	5221-1377	www.volunteeringgeelong.org.au
Wimmera Information Network Inc	HORSHAM	5382-5301	wimmerainfo.org.au