

NT Shelter submission to the Joint Standing Committee on the NDIS.

Introduction

The purpose of this submission is to support the NT Mental Health Coalition submission to the Joint Standing Committee on the National Disability Insurance Scheme.

The NT Shelter submission highlights some key issues that impact on clients with a disability accessing accommodation in the NT. A client case study is included at Appendix A.

Northern Territory Public Housing

The Department of Housing and Community Development (DHCD) **manages** 12,039 dwellings throughout the NT with 83% being public housing. The remaining 17% relate to other housing programs such as:

- remote government employee housing;
- industry housing;
- emergency accommodation;
- community housing; and
- affordable rental housing.

At 30 June 2016, the breakdown of the 83% public housing component owned by DHCD is comprised of 4,979 urban public housing dwellings located throughout the NT's main towns while 5,047 are remote public housing dwellings (including town camp dwellings).

Key challenges

The key challenges to make the housing system work better for those on low incomes in the Northern Territory include:

- generating increased supply of affordable housing;
- reducing and preventing homelessness;
- revitalising public housing; and
- addressing Indigenous housing needs in both urban and remote locations in the NT.



Homelessness Indicators

- NT has 15 times the national average rate of homelessness.
- 7.3% of all people in the NT are experiencing homelessness.
- Nationally 0.05% of the population is homeless.
- 1 in 4 Aboriginal people in the NT are experiencing homelessness.
- 10% of all Territorians under the age of 18 are experiencing homelessness.
- 85% of people defined as homeless in the NT live in severely crowded dwellings.
- The NT has 13 times the national rate of people sleeping rough.
- 10% of all people sleeping rough in the NT are under the age of 18

Last year, the government highlighted that services for homelessness, supported accommodation and social housing were the areas of greatest need in the Territory.

The Department of Housing and Community Developments' *Housing Action NT* strategy for urban and regional centres across the Territory is the government's policy platform for providing affordable rental accommodation and home ownership options for the Territory.

The Government has committed an additional \$140 million over five years for homelessness support programs, 250 social housing head-leased dwellings and a major replacement and upgrade program and additional dwellings in urban locations.

Social housing is identified in the strategy as a path and enabler for clients to achieve independence while at the same time recognising that some people won't transition out of public housing. Delivering services to support tenants to achieve sustainable tenancies will be achieved through a client-centered Housing First approach outlined in the new government's *Changing the homelessness paradigm – an integrated approach for the Northern Territory.*



Public Housing in the NT

Housing Stock and Wait List 2015

There has been a steady decline in the numbers of urban public housing stock in the NT over the last decade. In total, there has been a 12% decrease in urban public housing stock between 2003/04 and 2014/15, while remote public housing has increased by around 15% over the past six years (remote figures not available for the period 2003/04-2009/2010).

There are now 669 fewer urban public housing properties than there were in 2003/04 Some of this decrease can be attributed to the number of public housing dwellings that have been handed over to non-Government organisations to manage, but the decline is also due to the number of public housing dwellings that have been sold off. The number of households on public housing waiting lists has been growing quite rapidly in many regional areas over recent years.

Since the year 2000, in the greater Darwin area there has been a 23% decrease in the number of public housing stock, but a 69% increase in the numbers of households on the waiting list over the same period.

Similarly, in Alice Springs there been a 38% decrease in the number of public housing stock since 2000, but an 82% increase in the numbers of households on the waiting list over the same period (Figures derived from.

There are currently over 3,400 households waiting for urban public housing in the NT, with most these households being in Darwin and Palmerston (greater Darwin), and Alice Springs. All waiting list figures refer to March 2015, the most recent figures available.

Public Housing Wait Times

Summarized public housing Wait times by regional centre and accommodation type.

This section examines changes in wait times over the past 12 months, the past three and ten years, where wait times have increased across all regions of the NT. At the same time as this growth in wait times has been occurring, the number of dwellings in some areas has decreased as outlined above.



Darwin, Palmerston

- Public housing wait times have increased by between nearly 200% and 580% over the past ten years in Darwin and Casuarina.
- Public housing wait times have increased by between 15% and 38% over the past three years in Darwin and Casuarina.
- Public housing wait times have increased by between **100% and 544%** over the past **ten years** in **Palmerston**.
- Public housing wait times for **three bedroom houses have decreased by 10%**; but all other dwelling sizes have increased by between 27% and 61% over the past **three years** in **Palmerston**. The 10% decrease for three bedroom houses is the only instance of waiting time decreases for the last three years.

Katherine

- Public housing wait times have increased by between a staggering 1016% and 2800% over the past ten years in Katherine the highest rate of increase for any regional centre over the last ten years.
- Public housing wait times have increased by between **75% and 85%** over the past **three years** in **Katherine** the highest average increases over the last three years for any regional centre in the NT.

Nhulunbuy

- Public housing wait times have increased by between **327% and 464%** over the past **ten years** in **Nhulunbuy**.
- Public housing wait times have increased by between **30% and 34%** over the past **three years** in **Nhulunbuy**.

Tennant Creek

• Public housing wait times have increased by between 250% and 387% over the past **ten years** in **Tennant Creek**.



• Public housing wait times have increased by between 53% and 92% over the past **three years** in **Tennant Creek**.

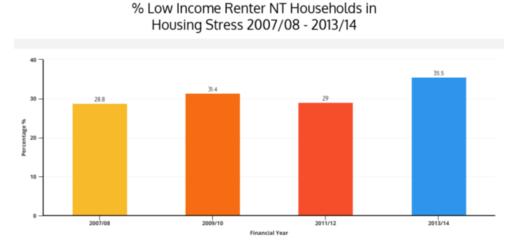
Alice Springs

- Public housing wait times have increased by between 105% and 238% over the past **ten years** in **Alice Springs**.
- Public housing wait times have increased by between 105% and 238% over the past **three years** in **Alice Springs**.

Centrelink Payments, Minimum Wage, Private Rent Costs

For anyone in the Northern Territory who is reliant on income support payments from Centrelink, entering the private rental market will be very financially challenging, given the relatively high rate of median rent prices across the NT.

A very large component of income support payments would be required to afford median rent prices. In some instances, it would simply be implausible for an income support recipient to rent a property at the median rental price, as they would have insufficient funds remaining to be able to manage other living expenses each week.



ABS 2015a, Tables 1-4



APPENDIX A

CASE STUDY KR - CURRENT AT 03/02/2017

June 2015 | KR was referred to the Sunrise Centre, via Partners in Recovery in Katherine, for short term accommodation. He was transported by PIR from Katherine to the Sunrise Centre in Berrimah, Darwin. KR attended an assessment for short term accommodation for three months. The Sunrise Centre provides case management and after hour supervision and opportunity for activity involvement. The aim of The Sunrise Centre is to work with clients with a holistic approach, based on a Support Plan called the Outcome Star, to access longer term sustainable housing.

KR had previously lived out on a Community, at a motel in Katherine and Ormonde House, St Vincent de Paul but he decided to leave Katherine and make a new life in Darwin. KR was originally from the community of Beswick, but it was not clear as to why KR did not want return to the Community, citing 'bad memories.' KR is an engaging fellow who displays good humour, enthusiasm and a keen interest in music. KR has a diagnosis of Schizophrenia as well as an acquired brain injury. It is not clear as to how he acquired an ABI, but may have been through a motor vehicle accident. He is on a Disability Support Pension and has cognitive deficits that affect memory, concentration and emotional regulation. KR asks for financial assistance as well as other goods in a consistent manner. He has difficulty with budgeting.

KR does not have the ability to keep a mobile phone. If KR required any material possession, his usual pattern would be to hock these at a high interest loan facility. He is also known to gamble and to take out high interest loans. He has also incurred fines.

KR drove a vehicle some time ago, but lost his licence through 'driving under the influence.' He talks about getting his licence back at some stage.

KR would often visit Knuckeys Lagoon Community, in Darwin but was prone to be exploited financially.

KR was under case management with **Top End Mental Health Services**, but this was ceased and was referred to Danila Dilba Aboriginal Medical Service in Darwin for clinical support to provide monthly injections of Paliperidone. Hence



his supports at this stage included **Personal Helpers and Mentors Program**, **Partners in Recovery and Danila Dilba**.

October 2015 | KR was then referred to **Galawu Hostel**, Darwin City, but was asked to leave because stated antisocial behaviour impacted with alcohol and cannabis use.

KR has incurred several charges around disorderly behaviour in public often associated with visible alcohol and cannabis use.

January 2016 | KR re - entered Sunrise Centre

29/02/2016 | In the meantime, KR was referred to **Office of Adult Guardianship** in which his finances are now being managed.

February 2016 | KR was then referred to the **Homelessness Response Group** to identify systemic issues that prevented KR from accessing longer term accommodation.

KR lost his supports such as PIR because of lack of engagement which was namely to do with hazardous alcohol use.

May 2016 | KR was offered the option of **Yilli Rreung**, a housing cooperative in Berrimah, Darwin and so took up accommodation there. He stated he felt lonely, unsupported and perceptions from the Yilli Community that he was "humbugging other residents at night and "people felt scared." However, KR left Yilli Rreung of his own choice and presented back to the Sunrise Centre for accommodation.

August 2016 | KR was admitted to Sunrise and was *now under case* management with Top End Mental Health Services. KR was then referred to **TEAMhealth, Recovery Assistance Program (RAP)**, for further support and possible entry in to TEAMhealth Health Community Housing.

Because of KR's co morbidity of Schizophrenia and Acquired Brain Injury, it was reported to be difficult for KR to engage with TEAMhealth Health (RAP), so was not able to enter Community Housing.

August 2016 | TEMHS referred KR to TEAMhealth Papaya supported accommodation for 3 months' step down Program, but was reported that he was not able to sustain the program, because of inability to engage with service criteria.



In addition, it is reported that KR did not fit suitable criteria to access TEAMhealth *Manse accommodation*, a longer-term housing option for people with mental illness.

Guardianship referred KR to *Golden Glow Nursing*, but this is only a temporary solution. KR is currently residing there, but reported that there was a lack of staff capacity to manage behaviour. His tenure will be up on the 10th of February 2016 where again he will be at risk of homelessness. It is believed that Golden Glow will not consider him for long term tenure.

Longer term housing options include, Territory Housing and he is currently on a Priority Housing list. He may need daily support around maintaining tenancy.

SYSTEMIC ISSUES

Because KR is having difficulty accessing the *Office of Disability*, he cannot be referred to specific Disability Specific Services such as *Darwin Accommodation Services* or *Carpentaria Services* where he may be able to access more suitable support to his needs and wants. It is reported that there are long waits for these services. In addition, because he is under Top End Mental Health Services (TEMHS), this may prove to be difficult for him to access Office of Disability. Office of Guardianship will follow this up.

KR's co morbidity also included hazardous alcohol use at times and this often precluded him from accessing accommodation services available to him. Because the Sunrise Centre has specific strategies to deal with hazardous alcohol use, KR was able to manage his residency here. If KR registered an alcohol reading of over 0.1, then **Sobering Up Shelter** was offered or staff adopted other strategies around drinking water, keeping safe, waiting outside until his readings came down. We were also aware that we needed to take into account limitations of KR's capacity to comply with service criteria and to manage this accordingly. In addition, there is a Security Officer who works from 2400hrs to 0800hrs; Support Workers who work till 2400hrs and Activities Officers who provide recreational support. KR does not want nor may not have the capacity to understand the concepts of rehabilitation and sustain a rehabilitation program such as **Council Aboriginal Alcohol Program Services (CAAPS)**.

Office of Guardianship will think about referring KR back to the Sunrise Centre, to the Office of Disability and also to the **Red Shield Hostel** in Darwin City. The



National Disability Insurance Scheme is yet to be rolled out in Darwin and its hoped that the NDIS may assist KR with more flexible options.

KR currently remains a client with the Homeless Response Group (HRG).

Current Status

- Currently at Golden Glow until 10/02/17
- Remains with HRG
- Referred back to Sunrise Centre by Guardianship | to discuss whether will accept
- May need a Disability Advocate
- Currently under Guardianship
- Needs referral to Office of Disability
- Not sure if he would be eligible for an NDIS package?



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