

## Homelessness







**Homelessness** is a lack of secure, stable and private accommodation

Every night, more than 122,000 people in Australia experience homelessness. This includes people sleeping rough on the streets, people 'couch surfing', seeking shelter in a car, relying on temporary accommodation and people living in severely overcrowded conditions.



### Gippsland insights

**Homelessness in Gippsland is increasing and becoming more visible.**

-  The supply of social and private rentals does not meet demand
-  The cost of living is rising
-  The cost of private rentals is rising; Morwell, Bairnsdale and Sale-Maffra have had among the highest increases in Victoria
-  Many people in Gippsland are on a low income and experience other forms of disadvantage (see [Social determinants of health](#))

**7,278 people accessed help from homelessness services in Gippsland in 2022-23, rates per 1,000 people:**

Baw Baw	Latrobe	East Gippsland	Wellington	Gippsland South West	Gippsland	Australia
13.1	35.4	28.3	28.8	13.6	23.6	10.3

-  **55%** were females
-  **40%** were homeless
-  **60%** were at risk of homelessness
-  **28%** were aged 0-17 years (2,016 children)
-  **13%** were aged 18-24 years (939 young people)

**The most common reasons for seeking homelessness support:**

-  housing crisis **27%**
-  family violence **23%**
-  financial difficulties **13%**
-  inadequate and inappropriate dwellings **10%**
-  transition from prison **8%**




*"A lot of women don't [leave abusive relationships] ... because there's a huge waiting list for public housing."*  
- Person experiencing homelessness in Gippsland

### Health and wellbeing of people experiencing homelessness

Some people become homeless because of health issues, and homelessness often makes health issues worse. This can be a cycle. (Bennett-Daly, G et al, Int. J. Environ. Res. Public Health, 2022)




Australian studies have suggested people who were homeless die an average of 22 to 33 years younger than those who are housed

Poor health outcomes among people experiencing homelessness or at risk of homelessness can be reversed with secure housing. Secure housing is linked to:

-  Decreased hospital admissions
-  Reduced transmission of infectious diseases
-  Improved mental health

Health services could play a role in preventing homelessness by identifying risk factors, and early intervention; particularly mental health and alcohol and other drug services

**Nationally, 27% of people seeking homelessness support did so due to health-related reasons. The most common reasons for seeking assistance were:**


-  **75%** mental health issues
-  **36%** medical issues
-  **26%** problematic drug or substance use

*"We need to better integrate homelessness and health"*  
- Professional

**Managing health conditions is extremely difficult while homeless. Issues include:**

- needing to focus energy on finding shelter
- no money to access services
- no access to transport
- experiencing stigma and discrimination
- delay seeking support for health issues until they become health emergencies
- limited access to primary care or preventive health services

### Housing pressures are affecting more people:

-  **22%** of people experiencing homelessness had a job (data captured census night, 2021)
-  In 2022 there were **2,268** Gippsland households on the Victorian Housing Register for Priority Access
-  A **60% decrease** in rentals that households on Centrelink income can afford
-  **159** young people were referred to youth homelessness refuges; **282** young people received outreach support in the community

# Homelessness



## Survey results



A 2024 Gippsland PHN survey highlighted:

### A sharp increase in homelessness in recent years

“... now have regular and visible rough sleeping. A stark contrast to just a few years ago, before COVID-19.”

- Professional

### Lack of local services and limited capacity

- Homelessness funding doesn't meet demand, leading to long wait times
- Wrap-around support needed with links to doctors, mental health, family violence and alcohol and drug services and supports
- Gippsland lacks an assertive outreach program
- Major service gaps for young people with very few refuge places and transitional housing options
- People are being turned away due to lack of available emergency beds
- Coordinators often have a limit of how long they can support a client
- Limited funding for urgent needs

### Current response can be unhelpful

- Forcibly moving people from their local area and taking punitive approaches add to the pressures people are experiencing
- Lack of understanding of the underlying reasons for homelessness can lead to judgement when people seek support
- It can be almost impossible for a homeless person to access NDIS

### Young people can be especially at risk with lifelong impacts, including:

- disrupted education and employment
- lack of connection to community
- trauma

## Reducing homelessness



- [Recommendations to address the Housing and Homelessness crisis in Gippsland](#)
- The [Australian Alliance to End Homelessness](#) has developed the Advance to Zero Framework to show that ending homelessness is possible in Australia.
- [Victorian State Government](#), Housing and homelessness
- [Australian Government](#), Housing support

“Rough sleepers .... deserve a respectful service and a response that provides an opportunity to change their circumstances”

- Professional

Everyone can help end homelessness



Access more Gippsland PHN publications here

## Improving access to primary care for people experiencing homelessness



“When people are homeless, they do not ... receive a healthcare card for example, which means when they access medical services, they may not be bulk billed”

- Professional

- **Housing as a health solution.** Having a home increases access to health services.
- **Continuity of care.** Having no fixed address makes it difficult to access referrals and effective follow up. Coordinated case management and discharge planning for community-based care can reduce presentations to hospital.
- **Hospital in reach.** Enabling GP services to connect with patients in hospital, supporting them to access community-based services.
- **Specialised homelessness general practice.** This can be GPs with strong links to the homelessness sector or GPs who understand homelessness.
- **Medical respite centres** where people can recover after surgeries
- **Outreach services.** Bringing primary care providers to places where people experiencing homelessness are; especially places where they feel safe.

“...you'll find a lot of people that don't want to reach out for whatever reason. Either they're just scared to reach out. They're ashamed to reach out. Or whatever the, whatever their story might be...”

- Person experiencing homelessness in Gippsland

## Homelessness services and supports



Experiencing or at risk of homelessness – call **1800 825 955** any time (After hours referral to Salvation Army Crisis Services).



[Gippsland Homelessness Network member agencies](#)



[Services available in Gippsland](#)

- [Wellways Doorway program](#) for people affected by mental ill health
- **Local government** provide emergency relief and support services
- **Community houses and other community organisations** provide free services in many Gippsland locations, including food relief, somewhere to wash clothes, and have a shower.

“...people who make a big difference are volunteers... They support people, listen to them, and don't judge them.”

- Professional

## Gippsland PHN services and supports



- [Priority Primary Care Centres](#) for conditions that require urgent care, but not an emergency response
- [Care Finder](#) services for vulnerable older people to access aged care
- [Supporting Recovery Program](#) for victim-survivors of family, domestic and sexual violence
- [Training and Events](#)
- [Gippsland Pathways](#) for primary care professionals
- [MyMedicare](#) - People facing hardship are exempt from all eligibility requirements.
- [Telehealth](#) can be accessed without recent in person appointment
- [E-scripts and PBS medication subsidies](#)
- [My Health record](#) for shared health summary