

The Old Colonists' Association of Victoria (OCAV) is a leading not-for-profit retirement village provider offering a continuum of care from independent living, assisted living and aged care in Victoria.

Our four villages in Berwick, Euroa, North Fitzroy and St Helena are home to 500 older Victorians in need. The OCAV was established in 1869 by Victorian founding fathers including George Selth Coppin, a Member of Parliament and philanthropist. Coppin was particularly concerned that poorer colonists were provided with housing. Our mission continues his vision of providing housing and appropriate support (a variation on Housing First) to older Victorians in need.

### **Our interest in housing and homelessness**

While 73 per cent of all older Australians own their home (Productivity Commission 2015, p9), only 47 per cent of OCAV residents owned their home before moving into an OCAV village.

The remaining 53 per cent of OCAV residents were either homeless or vulnerably housed while living with family or friends, in private rentals, public housing or in temporary accommodation.

### **Our interest from a national perspective on housing trends and the elderly**

Meeting the housing and care needs of Australia's increasingly ageing population is a significant challenge, compounded by several other trends:

- Fewer older people will own their homes in retirement and have the security and independence afforded by home ownership in retirement (Productivity Commission 2015, p2).
- More older people will be renting, and be more vulnerable and economically disadvantaged because of that, increasing their risk of homelessness (Productivity Commission 2015, p2).
- Australia will also have increasing numbers of older people who are unlikely to have sufficient retirement savings to be able to meet their living costs (Bridge et al. 2011).

The OCAV is pleased to make a submission to this important discussion into homelessness in Victoria.

*We are particularly pleased to make this submission as nowhere in the Terms of Reference or even the submission paper are there specific references to older people or elder abuse. This is despite the growing number of older people who find themselves homeless. They are all too often invisible in the public policy domain.*

As a leading retirement village and aged care provider in Victoria, we work to provide affordable and safe housing for elderly Victorians in need, whether they live independently, or in supported or aged care living. Many of our residents have lived within OCAV villages for ten years and longer, maintaining relationships with friends and families.

OCAV tackles three significant challenges facing Australia today: homelessness of older people and especially older women, housing affordability and aged care. Last year 53% of our residents were either homeless or vulnerably housed before coming to one of our four villages and 79% were women on their own. The association has a list of over 1,000 Victorians who wait for up to seven years to enter one of the villages.

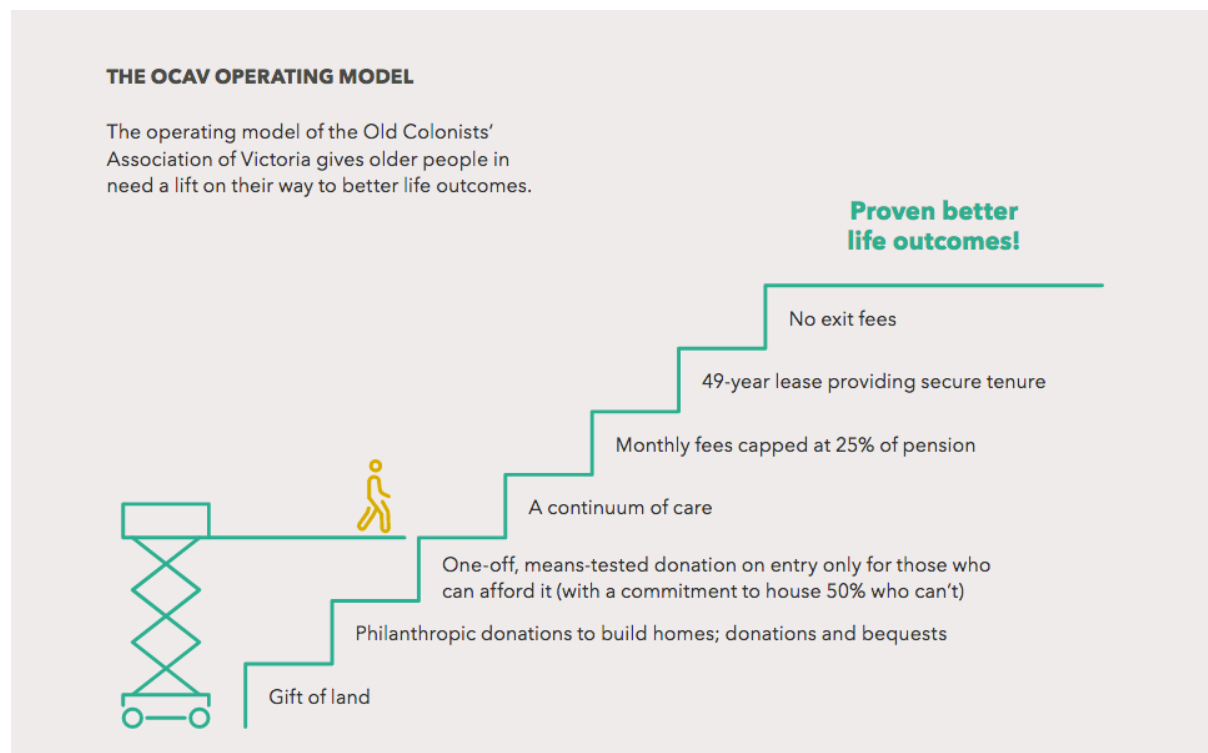
## Our model

OCAV has an operating model that was established by its original founders 150 years ago. We are committed to providing approximately 50 per cent of its housing to residents who cannot afford to contribute a one-off, means-tested donation on entry.

The model is made possible through a mixture of philanthropic support, means-tested donations on entry from residents who can afford it, and the affordable monthly fees.

Through the model, all residents are able to access all levels of care as part of OCAV's continuum of care. These arrangements provide a great deal of peace of mind for residents and their family members, particularly given the complexity of ownership structures and fees of other retirement villages and some instances of unfair practices.

Even though the Federal Government residential care subsidy is received for each resident at Liscombe House, its Leith Park aged care facility, OCAV receives no government funding for residents in independent and assisted living.



## Continuum of care

Through close relationship with residents, we support residents to prepare for and transition into higher levels of care. Palliative care is provided on-site for residents, providing a familiar and comfortable environment for the resident and their family members.

The cornerstone of OCAV's approach is a continuum of care for its residents from independent living through to assisted living, and onto aged care. This mix of accommodation allows residents to 'age-in-place' under the umbrella of OCAV.

Age-appropriate housing and access to services when they need them, such as meals, cleaning and wellbeing support, allow residents to live independently for as long as possible. Residents in independent and assisted living are checked on daily through a non-intrusive 'I am well' turn card at their front doors. They also have a personal alarm for 24-hour assistance.

## **The changing scale and nature of homelessness across Victoria**

From our experience of listening to and working with older people, we know that:

- Renting in older age is associated with potential risks, including poverty, homelessness and adverse impacts upon mental health and wellbeing.
- Older people are likely to be disproportionately affected by the insecurity of tenure associated with private rental, with uncertainty and the requirement to relocate taking both a physical and emotional toll.
- For most older Australians who rent, it is a necessity rather than a desirable choice (Productivity Commission 2015, p9).
- Social housing could provide a lower cost and secure tenure option for older renters, however the supply of social housing has been static while demand and waiting lists have increased (Productivity Commission 2015, p10)

From our experience of housing and supporting older Victorians, we see first hand:

- The increasing number of single older women becoming homeless: many of our female residents experienced family violence or have been subjected to elder abuse which has left them financially vulnerable.
- The sexually/ gendered transmitted nature of family and work life encountered because of being forced out of the workforce early, having having insufficient savings/superannuation to fund the costs of living, the death of an income earning partner, poor health or separation/divorce has further impacted many of our female residents.
- Many of the women we support have been couch surfing, living in a car or living under the threat of violence in their home.

**Case study:**

Rose knows what it is like to be homeless. She had too many years of couch surfing, living in precarious private rental accommodation, and being forced to move from one residence to another as a result of domestic violence and elder abuse.

She has finally found her own sanctuary with Old Colonists' Association of Victoria, an organisation she describes as the champion of the underdog, and a home to many older Victorians in need.

Being diagnosed with Post Traumatic Stress Disorder, Rose has been living in an OCAV village for the past two years. She knows she will always have PTSD – a mental health condition that develops following traumatic events – but she is beginning to recover and gain a sense of peace, security and hope.

She has plenty of advice for those heading up the inquiry:

- We have to change the stereotype of homelessness. Not everyone who is homeless is sleeping on the street, has no work, has never been employed, or has substance abuse issues.
- Regardless of why someone is homeless, we all need to be treated with dignity and respect.
- Specifically for government she says that subsidies should be established so that it is easy to access funding for a bond, rent for at least three months, and furniture.
- GPs and other frontline workers need to be trained to understand the full spectrum of homelessness, and the link with family violence and elder abuse.
- For those who are homeless, she advises never to be too proud to ask for help and to find a GP you can trust.

*"If you have no rental history, or readily available money, then you have few options"*

*"We can all put up a front of dressing well and covering bruises when we see a professional, but professionals need to have training and trust their intuition more if they suspect violence, or that someone is homeless."*

A small number of single men, but increasing every year, coming to OCAV after years of living in insecure rooming houses, in caravan parks, or – in some instances – rough sleeping. For many, their housing situation changed as a result of redundancy, mental ill-health, and /or divorce.

**Case study:**

Life is good for Ian. In fact, it's better than it has been for a very long time. He has secure housing at OCAV's Rushall Park village, access to services and city life, which he loves, and daily meals that he only ever 'dreamt about'.

Ian moved into a serviced apartment at Rushall Park in 2017 after two years of insecure and difficult housing. Before moving to Rushall Park he was living for 18 months in supported accommodation in Eltham with other people, some of whom were taking drugs and drinking and making life for other residents very difficult. Before that he lived for several months in a rooming house in McLeod, which was even worse.

*"They were very disturbing places to live. Lots of noise and yelling day and night and no privacy at all. "It wasn't the sort of place where you would want to live."*

Ian has already discovered that at Rushall Park his privacy is respected and he can take part in whatever activities he chooses.

He likes being close to public transport enabling him easily to access health checks required after his laryngectomy surgery for throat cancer three years ago.

## **Identify policies and practices from all levels of government that have a bearing on delivering services to the homeless.**

According to informal discussions with our residents, there are many ways which could improve the quality of life for older people who are homeless or at risk of homelessness. These include:

- Closing the gaps between services systems including better coordination and collaboration.
- More public/ social housing which is safe and affordable, and which includes a range of housing options.

*The OCAV model of providing one or two bedroom homes, serviced accommodation, communal living and dining arrangements and creative funding mechanisms is a living example of a mission being put into practice successfully.*

- Better training for frontline service providers including health practitioners, Centrelink staff, and others.
- Increased government funding for housing, rental support, and streamlined processes and pathways for older people to navigate more easily.
- A public education campaign about homelessness in general, based on respect and better understanding of what homelessness is and why it happens.
- Funding to educate older people about their rights, particularly where it affects the possibility of slipping into homelessness unwittingly.

Specifically, the following policies and practices have a bearing on delivering services:

### **The importance of closing the gaps**

*Our experience highlights that many of our residents who find themselves homeless late in life are shocked by their predicament, they don't know how to navigate the system, and they are unaware of the assistance they may be able to receive.*

- There is a need for early intervention and prevention programs focussed on older people who are homeless.
- The current system of supporting people who experience homelessness is fragmented, poorly resourced and does not provide long-term solutions.
- Retirement village providers with expertise in housing previously vulnerably housed or at risk of homelessness people are often overlooked in discussions or opportunities to identify long-term and cost-effective solutions. There is opportunity for the aged care sector and government to work better with each other.
- Centrelink lets older people down: staff need training to support older people and help them map pathways out of homelessness or vulnerable housing.

### **Funding**

Funding is not easily available for organisations such as OCAV which is not a community housing provider – nor can easily become one due to its Constitution; and yet it has a track record of developing specialised housing for older people which is both age and dementia friendly, and delivering housing and wraparound services.

Money should be made available from the Victorian Stamp Duty revenue to house one million Victorians by 2029 through a massive expansion of public housing and social housing, and with money allocated to specialist retirement villages and homelessness organisations such as Old Colonists Association of Victoria to develop new housing.

In particular

- There is an urgent need for the Federal Government to commit to funding housing for older Australians. A national long-term, constant and consistent strategy is urgently required, and it should be properly funded.
- The Federal and state governments should be encouraged to establish a capital pool to allow aged care and retirement village providers **with experience and expertise in supporting homeless older people** to build specialist facilities.
- Consideration should be given to reviewing, increasing and indexing the Homelessness Supplement for aged-care providers

### **Public and social housing**

- The adequacy of a proposed 10 per cent increase in public housing (or 1,100 public units) on the sites given the size of the waiting list for public housing. Victoria's social and public housing stock per capita is amongst the lowest in the country with 32,000 Victorians currently waiting for public housing and people waiting years to get into public housing.
- Further, there are 120,000 Victorian households experiencing housing stress that are in receipt of Commonwealth Rent Assistance, of which 50,000 are in the very lowest income bracket. Clearly a 10 per cent increase in public housing is inadequate.
- In Plan Melbourne, OCAV argued that 30,000 new affordable properties for low-income earners was inadequate, and we urged an increase to 60,000. However, Plan Melbourne did not recommend a level of public or social housing as a proportion of existing and new housing stock.
- According to the Community Housing Industry Association, to provide for all households now eligible for social housing, Victoria would require 76,000 more social housing units. By 2051, that figure is projected to increase to 140,000. OCAV concurs with CHIA.
- People of all ages need choices about housing and freedom of movement. Public housing stock must be diverse and be accessible to diverse communities and their resources and infrastructure.
- New housing stock must be planned with design needs of the future which might incorporate disability and ageing needs. For example, simple steps such as placing plywood under plaster sheeting in bathrooms, makes it easier to add grab rails later. Unit style design rather than mews style –in other words, design which provides privacy are often better suited to people with support needs.

### **Physical and mental health of older Australians**

- Victorians, as has been advised by the recent Royal Commission in Mental Health, need better mental health services

- Forty per cent of men and 47 per cent of women aged 65 years have some form of disability, and this number grows for those aged 80 years and over. People aged 65 years and over represented 43 per cent of the 12.5 million specialist attendances claimed through Medicare in 2014–2015.
- People aged over 65 are unable to access the NDIS – we believe that older people should be exempted from applying to the NDIS.
- The relatively poor health status of older people increases their vulnerability when affected by homelessness, as evidenced in our case study of Rose.
- Poor physical and mental health places an emphasis on the need to have both high quality housing and accommodation that is close to health services, as evidenced in our case study of Ian.