



moorditj koort

Aboriginal Corporation

ICN:7702

The Chairperson

Inquiry into the financial administration of homelessness services in Western Australia

11 March 2022

Dear Members

Inquiry into the financial administration of Homelessness service in Western Australia from Moorditj Koort Aboriginal Corporation

Attached is our submission into the above Inquiry. We welcome the opportunity to provide our insight and experiences of Aboriginal and Torres Strait Islander people who are homeless or find themselves at risk of homelessness.

We look forward to many positive improvements in the systems that currently fail so many; Aboriginal and non-Aboriginal people in Western Australia who find themselves living in crisis.

Homelessness has many devastating impacts on our community especially on innocent children who do not have shelter, security nor safety.

Yours sincerely

Chairperson
Moorditj Koort Aboriginal Corporation

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Submission from the Moorditj Koort Aboriginal Corporation (MKAC) to the Inquiry into the financial administration of homelessness services in Western Australia

About Moorditj Koort Aboriginal Corporation (MKAC)

MKAC is an Aboriginal community-controlled health organisation (ACCHO) with its head office located at 150 Gilmore Avenue, Medina, and sites at Cockburn, Midland and Northam. We are a not for profit organisation with DGR status registered under the Australian Charities and non-profit Commission (ACNC) and the Office of the Registrar Indigenous Corporations (ORIC).

MKAC was established in partnership with the Aboriginal Community and the Rockingham Kwinana Divisions of General Practice (RKDGP) in 2010 and became registered in its own right under ORIC in April 2012.

Our team has established a range of programs to support the health and wellness of Aboriginal and Torres Strait Islander peoples living in W.A., with a major focus on the Medina/Kwinana area and locations in Cockburn, Midland and Northam (a portion of the Wheatbelt region).

We support Aboriginal people through providing a variety of programs in areas such as chronic conditions management, access to specialist care, those travelling from remote communities for acute care, suicide prevention, sexual health education and supporting the health of Aboriginal children in local schools. We also offer in-reach services including ENT, Dietician and Podiatry clinics, Elders' Programs, Disability Services Program etc.

Our Vision

To contribute to healthy and flourishing Aboriginal communities across Western Australia by providing Aboriginal people with access to a holistic one-stop-shop for health and wellbeing support.

Our Values

- Supporting and empowering
- Keep good health
- Timely and accountable
- Respect, Trust, Honesty and Empathy

Note: Reference made to Aboriginal people in this submission, also includes Torres Strait Islander Peoples.

Submission to the Inquiry:

Aboriginal people who are homeless or at risk of homelessness are Western Australia's most vulnerable, socially and economically disadvantaged group.

For families without a home, most are forced into being extremely transient, children are unable to go to school, parents are unable to find employment, the family unit often disintegrates and the safety of all family members is put at serious risk. At MKAC we are aware of far too many families who are living out of their cars, camping in bushland near the shops at the Kwinana Hub, on the streets in the CBD, various parks, or hiding in the dunes at the beach where they hope not to receive 'move on notices' by the police.

The Education Department does not seem to follow-up on why hundreds, if not thousands of homeless Aboriginal children are not attending school in the Perth metropolitan area and beyond. The lack of education for these homeless children is going to create a generation of young people with no literacy or numeracy, limited/affected social skills and no opportunities for employment or stable lives in the future. Homeless children feel angry and aggrieved of their circumstances.

In the words of the Director General of the Department of Communities in his recent address to your inquiry he stated the 3 main reasons for homelessness are:

1. Family and Domestic Violence
2. Financial Difficulties/Disadvantage
3. Lack of Family/Community Support

Far too many Aboriginal people fall into these categories and we see the devastating effects homelessness has on both the physical and mental health of our clients and members of our local communities on a daily basis.

The most recent National Aboriginal and Torres Strait Islander Health Survey released on 11 December 2019 for the reference period 2018 – 19 financial year ([National Aboriginal and Torres Strait Islander Health Survey, 2018-19 financial year | Australian Bureau of Statistics \(abs.gov.au\)](#)), noted that 46% of Aboriginal people had at least one chronic health condition, up from 40% in 2012-13 and 17% (aged 2 and over) had anxiety and 13% depression.

This means that almost half the Aboriginal population in Australia have a chronic health condition, which is majorly exacerbated if they are homeless. Or is it that the rate of 46% is so high because so many of our people are homeless?

The main issues MKAC would like to raise to this inquiry are as follows:

- 1. Lack of housing stock:** We acknowledge that the Dept. of Communities has put a number of programs in place to address the WA Housing crisis in WA, but without a serious increase in housing stock, clients of these programs will still have nowhere to live. Immediate action needs to be taken to increase the social housing stock in W.A. We note that in the Premier's media release on 9 September 2021, he announced an additional \$884m boost for housing and homelessness, but as a very busy and overstretched ACCHO, we are yet to see any tangible results for our homeless clients.

- 2. Urgent repairs needed to existing housing stock:** Members of the Aboriginal community who contact MKAC for assistance with homelessness are frustrated by the number of empty Dept. of Housing properties that have been vacant for many months, if not a year or more.

This issue appears to be a statewide problem and there is an urgent need to repair these homes now. This would go a long way to increasing the current housing stock. Excuses about the lack of contractors to complete these repairs should not be an issue if the department has signed contracts in place with contractors to complete this work.

- 3. Overcrowding:** Reciprocity is a fundamental principle in Aboriginal society. Over the more recent years when housing waiting lists have grown exponentially, Aboriginal people have had no other choice than to move in with family members who are fortunate enough to have a home.

Unfortunately, government agencies do not appear to understand the Aboriginal principle of reciprocity, which too often leads to legitimate tenant/s of properties being evicted due to overcrowding. During this current housing crisis in the middle of the COVID-19 pandemic, we encourage the Dept. of Housing management and staff to show more leniency, compassion and consideration in relation to overcrowded tenancies. Additional housing stock and repairs carried out to vacant properties, would reduce the incidence of overcrowding.

- 4. Family and domestic violence victims:** Our experience when attempting to assist victims of family and domestic violence, is that there is little help, if any, provided by the staff at the Department of Housing offices. The usual response is that "there are no houses available".

If the victims are lucky enough to be seen by a compassionate employee, they may be offered some advice or details of agencies working in this area.

Victims may be provided with information about applying for Priority Housing, but this process if successful, has no immediate solution for traumatised and at-risk applicants and children. Wait times on the Priority List can be longer than 2 years.

When trying to assist clients to access the refuge system, victims are retraumatised when told refuges are full. The process to refer Aboriginal women and children to refuges is to ring Crisis Care who provide information on current vacancies. When these refuges are contacted, more often than not, the information provided by Crisis Care is incorrect and there are no vacancies. So, then you ring back Crisis Care, who may or may not provide numbers of other refuges with supposed vacancies. This system needs to be improved immediately.

More funding needs to be provided to increase the number of refuges for family and domestic violence victims. The Director General, giving evidence to your Inquiry noted that many women and children are forced to return to live with their perpetrators simply because they have not other option. The cycle of violence continues which has devastating and lasting effects on the mother and children.

The Dept. of Housing needs to do better in facilitating transfers for domestic and family violence victims.

- 5. Aboriginal Elders:** The Institute for Urban Indigenous Health (IUIH) has identified that in June 2020, only 8.6% of Aboriginal Elders were receiving aged care services in the Greater Perth region. This compares with the national Indigenous average access rate of 17% and the national average access rate for non-Indigenous elderly of 27%. Our experience is that there is a severe lack of Aboriginal specific aged care accommodation or aged care facilities that currently have room for Aboriginal Elders.

This may be a Commonwealth responsibility, but the State needs to acknowledge that our Aboriginal Elders are severely disadvantaged in finding suitable accommodation.

6. Racism:

- a. Within the Dept of Communities:** It remains clear to MKAC that the issue of overt racism and disrespect of Aboriginal people continues within this department. Our recommendation is that all non-Aboriginal staff in all sections of this department be mandated to participate in ongoing (yearly), face to face Cultural Awareness Training. MKAC can offer this on a Fee for Service basis, as do other Aboriginal service providers.

Our organisation repeatedly receives reports of racism and disrespect from Dept. of Housing and Communities offices. In these cases, MKAC appoints a staff member to accompany program clients to advocate with them to encourage positive communication and mutual respect. For Aboriginal people who are not on our programs, unfortunately they are left to their own devices. Although we refer them to agencies funded to assist, more often than not they come back to us without having received the necessary support. In 2022, reports of racism are not acceptable.

- b. With private landlords and real estate agencies:** When homeless Aboriginal people and families are repeatedly told by Dept. of Housing staff that 'there are no houses', they may be told to seek housing in the mainstream property market. This is easier said than done.

The media has provided evidence that as many as 30+ potential renters are attending viewings of rental properties. The limited supply of rental properties on the private market is due to landlords either increasing rents significantly or making the decision to sell.

Up until the past year there were large numbers of Aboriginal people successfully renting in the private market. With so many landlords deciding to sell, large numbers of Aboriginal tenants have lost their tenancies, and although they have excellent references, they are simply unable to find alternative rental accommodation. This has resulted in a new group of homeless Aboriginal people; ones who had remained in the private market for many years, but now find themselves homeless.

There is overt racism experienced by Aboriginal people attempting to secure a rental property in the private market, both by Real Estate Agents and private landlords.

Aboriginal families with secure employment and excellent tenant references are joining the homeless numbers and it is obvious to them that their Aboriginality is preventing them from being considered as potential renters.

Some Real Estate agencies and landlords will blatantly not enter into conversations with Aboriginal people about rental properties, (no matter how good their references are). This is simply due to racism, stereotyping and being secure in the knowledge that they can literally pick and choose from a long list of rental applicants, desperate for housing. The repeated rejection of rental applications by Aboriginal people for private rental properties is causing frustration, anxiety, depression and a complete sense of hopelessness.

The recent opening of the W.A. borders has simply added to the already limited supply of available private rental properties.

7.

- 8. Department of Communities amalgamation:** Prior to the amalgamation of WA government agencies in 2017, the Dept for Child Protection and Family Support were in a position to lobby and advocate on behalf of homeless families and children. This no longer happens with reports from clients that DCP advise clients that "they don't do housing". We encourage more interagency cooperation for the benefit of clients, especially the children.
- 9. Child removal due to homelessness:** Aboriginal families who are homeless have a greater risk of having their children removed and put into state care. We acknowledge that all children need shelter and safety, but with such a severe lack of social housing, far too many Aboriginal children are being removed from their families. This is labelled by many Aboriginal people as the 'Second Stolen Generation'.
- 10. Housing stock to suit larger Aboriginal families:** The waitlists for four bedroom homes is extremely long. Many Aboriginal families have large numbers of children and often care for elderly family members, so when considering purchasing or building new housing stock, these factors must be taken into consideration by the department.
- 11. Unwell Aboriginal people:** Poor physical and mental health of homeless Aboriginal people leads to increased hospitalisation and far too many deaths.

We acknowledge that the State hospital system is severely stretched at the current time, but patients should not be discharged into homelessness. This is happening in metropolitan and regional hospitals at an alarming rate. How are unwell Aboriginal people expected to heal their wounds after serious surgeries and medical treatment, when they are discharged into homelessness?

Aboriginal liaison officers in the hospitals are faced with the difficult and impossible task of securing accommodation for the cohort of sick and recovering Aboriginal people being discharged from hospital. Action needs to be taken immediately to stop this practice, especially with the risk of COVID-19 being so prevalent.

The Royal Perth Hospital Aboriginal Acute Care Coordination (AACC) program needs to be extended to all major hospitals in W.A. This program provides follow-up care, assists with outpatient appointments, patient referrals to community-based health services, GPs and other agency support service services. We urge the Inquiry to recommend that this program be expanded into all major hospitals in WA.

Closing Comment:

MKAC is hampered in the services we can provide at our 3 metropolitan and 1 regional sites as an ACCHO, as we are not yet funded to provide GP services from any of our locations. A submission has recently been made to the West Australian Primary Health Alliance (WAPHA) to secure funding through *The Primary Health Sector – Organisational Strengthening and Development Grants Program 2022*.

We are seeking funds to develop our organisation's readiness to support delivery of enhanced culturally competent and safe primary health care. As an Aboriginal community-controlled organisation our project is inherently driven by culture and cultural competency principles in our strategic planning, policy development, program design and service delivery process.

We have systems in place to promote and develop both internally and externally cultural and technical competency through ongoing staff feedback, staff development and training, employee policies and delivery of cultural awareness training to our partners.

A fundamental plank of our project is building through formal partnerships with community organisations both new and existing, with a focus on working in collaboration with our Aboriginal community-controlled health service partners, delivering in this lower southwest region, incl. Derbarl Yerrigan and South West Aboriginal Medical Services.

We are a learning organisation and seek evaluation of progress through assessing our organisation's current level of competence and measuring outcomes for performance against benchmarks like WA PHNs Needs Assessments, the Close the Gap initiative and the WA Aboriginal Health and Wellbeing Framework 2015-2030.

Our Proposal clearly details how Moorditj Koort Aboriginal Corporation intends to build the organisation's capability, capacity and competency to achieve positive results that are culturally appropriate in relation to the needs of the communities being served.

Our proposed activity will improve the delivery of culturally safe and effective services for Aboriginal and Torres Strait Islander communities in Western Australia. And the activities proposed align with the domains of the Cultural Respect Framework 2016-2026.

We look forward to the Inquiry taking note of our submission. As an ACCHO, we hold grave fears for the large number of homeless Aboriginal people living with no hope of ever being housed.

Yours faithfully

A handwritten signature in cursive script that reads "Doreen Nelson".

Mrs. Doreen Nelson

Chairperson

Moorditj Koort Aboriginal Corporation

11 March 2022