

I wanted to pass on my thanks for the opportunity to speak to the Inquiry's Chairman and Commissioners. I had some thoughts in relation to one of the questions that discussed differences in low cost/affordable housing from 1991 onwards-i.e. why so much more marked now than at other times when the economy has done well. On reflection a number of further aspects occurred to me:

* Our National Ageing Policy reflecting most people's wishes has meant that there have been many more people ageing in place in public and community housing units, including Independent Living Units who 10-15 years ago would have had little choice but to move into hostel(low care) or nursing home(high care) facilities. The huge growth in Home and Community Care and Community Aged Care expenditure and medical advances in hospital in the home programs as well as medication and surgical developments has meant people with cardiac, renal, neuromuscular, psychiatric and respiratory conditions have all flowed on to influencing how long people can remain in the community so this includes less turnover of public/community housing as well as homeowners.

* Secondly, the impact of deinstitutionalisation from around the early -mid 1980's has also affected demand and supply issues. Assoc. Professor David Green from Latrobe Univ Social Work Dept. wrote about the connection between the end of institutions and homelessness...."analysing the data from three successive censuses, the Australian Institute of Health and Welfare (AIHW) was able to show a reduction of over 80,000 in the numbers of people who would have been in health and welfare institutions in 1996 if the patterns of residential care use in 1981 had remained stable over time. All of these people are now living in some form of supported or unsupported accommodation in the community and some will be homeless".

* It was Prof. Green's view that these figures actually underestimated the significances of the closures in terms of nos. as they were national figures and did not include early discharge policies from hospitals. His article posed the argument that whilst funds have been transferred into community programs to supply the support that institutions previously provided, funds have not proportionately been transferred to supply the housing stock or accommodation capital. Thus public and community housing and low cost rental such as rooming houses have often responded to this need.

* I have included this reference to add to an understanding of the context. Centrelink figures over the past 10 years would support this growth of disability pension recipients, many of whom would struggle to compete in the low skill, casualised or part time employment sphere. If they could access part time work, many then struggle to access affordable housing nearby so rely on accessing housing in the form of public or community housing. Nationally since about 1996, most State housing authorities around Australia have prioritised housing allocation to these high need groups.

Thus creative and innovative home ownership programs need to be considered for many of those who are no longer able to access such subsidised rental housing, particularly low

income working families. I hope this may be able to be added to the discussion points that were raised at my attendance yesterday and wish the Commission well in its deliberations. Green, D 'The End of Institutions: Housing and Homelessness' in Parity April 2003 Volume 16, Issue3 p5 Australian Institute of Health and Welfare (2001), Australia's Welfare 2001, pp322-363

Kate Incerti (member of AASW, Convenor AASW Special Interest Group Housing and Homelessness) Housing Information & Support worker

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