June | 2015

StreetCount 2015 Qualitative Research

grandmothers
grandfathers
mothers
fathers
sons
daughters
Sleeping rough in
Melbourne

CITY OF MELBOURNE

Rough sleeping refers to people residing in public places such as the street, in cars, under bridges or in similar arrangements. Not all rough sleepers are chronically homeless (refers to the length of time people are homeless) although this presumption is generally true, some have only been homeless for a short period of time.

The Road Home: The Australian Government White Paper on homelessness recognised rough sleepers as having complex needs and a particular vulnerability to illness culminating in a mortality rate four times that of the general population.

A snapshot of the people sleeping rough – StreetCount 2015

StreetCount 2015 was successful in engaging a range of people sleeping rough including diversity of gender, age groups, period of sleeping rough and Indigenous background. Although people were not formally asked about their family situation, through their stories a number of people mentioned that they were grandmothers, grandfathers, mothers, fathers, sons and daughters.

> The term 'sleeping rough' is a misnomer – as most of the people we talked to were not able to 'sleep' very much at all.

Who is sleeping rough?

Of the 83 people sleeping rough who participated in at least one interview:

- 19% were females, 81% were males
- 62% were between 30-49 years old
- 19% identified as Aboriginal and/or Torres Strait Islander
- 29% had been sleeping rough for 10 plus years.

Where are people sleeping rough?

- People slept in a range of places. Couch surfing, parks, street, squats, under bridges, train stations and alleyways are the most commonly reported places. The majority of people moved every few days.

Looking after belongings

- One of the hardest things to manage when sleeping rough is looking after belongings. On a daily basis belongings are stashed, stolen, lost and/or carried around all day. Access to lockers and replacing ID and personal papers when lost were raised as issues.

Services used

- People used a range of services on a daily/most days basis. For most of the participants, public transport and food were used daily or most days. Other common services used were showers, laundry, food vans, day centres and libraries.
- On a four-point scale rating how helpful services had been, the majority of people rated services as 'helpful' or 'very helpful'.

Filling in the day

- Daily life for most people meant 'just dealing with getting food and shelter'. Boredom and having nothing to do all day were commonly reported. Most people socialised with other people sleeping rough. Very few people were in contact with or visited their family.

Relationships with others

- Many people related stories of random goodwill from people in the community, others related feeling humiliated and ignored. People sleeping rough often helped out other people in the same situation. Relationships could be complicated between people however with drugs, alcohol, violence, disruptive behaviour and distrust commonly being present.

A snapshot of the people sleeping rough – StreetCount 2015

Safety

- About half of the people did 'not feel safe'. 'Always needing to be alert', 'always watching your back', 'always on the lookout for people that might harm you' were frequent comments. Safety – or feeling unsafe – was the main reason why people moved where they sleep every few days.

Impact on health and wellbeing

- Trying to stay mentally stable, exposure to drugs and alcohol, a lack of sleep and dealing with the cold were commonly reported as having an impact on health and wellbeing. Trying to function on little sleep and/or interrupted sleep has a significant impact on mental and physical health.

Hopes and the future

- In six months time many people hoped to be in their own home. Along with this people wanted a job and to be in a good mental and physical state. Other people expressed no hope for their future and took things one day at a time.

The journey

- Of the 83 people who undertook a first interview, 34 of these people participated in between two and nine interviews over a ten-week engagement period. Relatively little change was identified in their daily lives over multiple interviews For most people the services used, places they slept and the need to move every few days remained relatively the same. Week after week, most people hoped to be in safe, secure and stable housing in the future. The destination of people who did not continue to participate in interviews is unknown, however during this period only three people gained some form of housing or accommodation.

What would make a difference?

Housing and accommodation were the main things that would make a difference to people. Other suggestions for improvements to services or initiatives that would make a difference to people included:

- More showers and laundry facilities
- Increased number of lockers and access to lockers 24/7
- Access to open spaces and facilities where people sleeping rough could play sport, get fit at a gym, and/or participate in team games
- Places where people can paint or be involved in creative, artistic expression
- More centres where homeless people can go to relax, sit comfortably, catch up with people
- A womens' place where women can go and relax and talk
- Shelters or places where people sleeping rough can be sheltered from the rain and cold
- More security around the hot spots where people are sleeping rough
- Better weekend services – especially food services
- Increase fresh food and vegetarian options available through the food services
- A job or engagement in study, with study options ranging from learning to read, adult education type courses, work skills through to tertiary studies
- 'Living skills course' to support people in the transition from homelessness to housing.

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1. Background

1.1 Homelessness context

The Universal Declaration of Human Rights declares that human rights are universal – to be enjoyed by all people, no matter who they are or where they live. Access to safe, secure, affordable and adequate housing is a fundamental human right to which all human beings are entitled.

The right to housing is more than simply a right to shelter. It is a right to have somewhere to live that is adequate.

'A person who is homeless may be facing violations of the right to an adequate standard of living, the right to education, the right to liberty and security of the person, the right to privacy, the right to social security, the right to freedom from discrimination, the right to vote and many more.'[1]

> Everyone has the right to a standard of living adequate for the health and wellbeing of himself and of his family, including food, clothing, housing and medical care and necessary social services….
>
> *Article 25 Universal Declaration of Human Rights*

Structural factors and interconnecting dimensions such as access to affordable housing, unemployment, disability, low income and relationship breakdown have direct links with a person's vulnerability to insecure housing and /or homelessness.

'Homelessness is about people rather than merely shelter and is often exacerbated by a number of other issues including poor physical and emotional health, disability, drug and alcohol issues and financial problems. It is widely accepted that safe, appropriate, affordable, and secure housing with well organised support contributes to improved health and wellbeing outcomes.'[2]

Key homelessness policies and sector directions

Governments at all levels have a range of policies, plans, strategies and initiatives aimed at facilitating affordable housing for all Australians and bringing an end to homelessness.

The Road Home – A national approach to reducing homelessness 2008 provides a vision for tackling homelessness and looking beyond housing with strategies that address the broader needs of the homeless population, including employment, education, health and social support. *The Road Home* includes two targets – halving homelessness by 2020 and providing accommodation to rough sleepers who need it. The paper commits the Australian government to end homelessness permanently and describes a future when homelessness will no longer be an acceptable part of Australian society.

The *Victorian Homeless Action Plan* 2011-2015 places a strong focus on supporting innovative approaches to homelessness, early intervention and prevention – getting to the root of the problem – and better targeting of resources to where they are most needed and where they will make the most difference.

'Action and setting the foundation for reform, with a focus on prevention and early intervention, innovation and partnerships, is required to break the cycle of homelessness.'[3]

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[1] Australian Human Rights Commission

[2] *Pathways: Homelessness Strategy* 2014-2017 City of Melbourne

[3] *Victorian Homelessness Action Plan* 2011-2015

Local government provides a range of services that contribute to the wellbeing of their communities. Working with Federal and State governments and partners in the homelessness sector, councils are involved in a number of strategies and interface actions that contribute to ending homelessness as well as supporting people who are homeless.

The City of Melbourne has made it a priority to address the issue of homelessness and through *Pathways: Homelessness Strategy* 2014-2017, remain committed to this aim.

Common elements of key policies, plans, strategies and initiatives include an acknowledgement that addressing homelessness requires:

- more than just providing shelter
- a partnership and coordinated approach across levels of government and services
- addressing the fundamental structural contributors to homelessness including affordable housing and family and domestic violence
- building people's lives, addressing individual needs, and building capabilities and resilience to break the cycle of homelessness
- a long-term commitment.

Housing first and outreach models which offer long-term accommodation and wrap-around services are now seen as a better service approach to support people out of homelessness.

'The system needs to respond to those in crisis as well as focusing on prevention and early intervention. The service system must also respond to the intensive support requirements of those with complex needs who have experienced long-term homelessness.'[4]

Defining homelessness

There is no one definition of homelessness. This presents significant challenges for counting the homeless population.

In 2012 the Australian Bureau of Statistics (ABS) released a definition of homelessness for application to the general Australian population. 'When a person does not have suitable accommodation alternatives they are considered homeless if their current living arrangement:

- is in a dwelling that is inadequate; or
- has no tenure, or if their initial tenure is short and not extendable; or
- does not allow them to have control of, and access to space for social relations.

Under this definition homelessness is a lack of one or more elements that represent 'home'lessness, not rooflessness.'[5]

Prior to the ABS definition, three categories of homelessness (primary, secondary and tertiary) developed by Chamberlain and McKenzie in 1992 were widely used to assist counting the number of people experiencing homelessness in Australia. Whilst the new ABS definition is acknowledged and utilised in the City of Melbourne's Homelessness Strategy, it is also recognised that utilising the three categories developed by Chamberlain and

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[4] *Victorian Homelessness Action Plan* 2011-2015

[5] A statistical definition of homelessness, ABS Information Paper 2012

McKenzie is valuable in articulating the types of homelessness in order to better respond and create pathways out of homelessness.[6]

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[6] *Pathways: Homelessness Strategy* 2014-2017 City of Melbourne

Primary homelessness	People without conventional accommodation such as people living on the streets, sleeping in derelict buildings, or using cars for temporary shelter.
Secondary homelessness	People who move frequently from one form of temporary shelter to another. This category covers people accommodated in homelessness services, people residing temporarily with family and friends and those using rooming/boarding houses on an occasional basis.
Tertiary homelessness	People who live in boarding houses on a medium to long-term basis. This type of accommodation typically does not have self-contained rooms and residents share bathroom and kitchen facilities. Rooming house residents do not have the security of tenure provided by a lease.

Defining rough sleepers

'Sleeping rough' is used in a general sense to describe people sleeping rough on the streets or in improvised accommodation. Rough sleepers generally live on the fringe of society – and by definition their routines are usually chaotic and troubled, making the task of (defining) and counting them a difficult one.[7]

Service approaches targeting rough sleepers

The homelessness sector has a complex array of services, programs, providers and funders involving the three tiers of government and not-for-profit agencies and organisations. Homelessness support can spread across and between a spectrum of service areas including housing, welfare, health, substance abuse, employment and family violence,

Some of the services and programs targeting rough sleepers in Melbourne include:

- Outreach/outreach teams
- Centre based/front line support services
- Crisis facilities and accommodation
- Nursing, allied health, health promotion
- Doctors, drug and alcohol and therapeutic services
- Crisis accommodation
- Food/meals
- Showers
- Laundry
- Material aid
- Recreation
- Information, referral, advice, advocacy services.

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[7] *Who, What, Why: How do you count rough sleepers?* BBC News magazine 16 August 2010

1.2 City of Melbourne and homelessness

The City of Melbourne provides a range of community services and programs that enhance the lives of people who live and work in the city. The City of Melbourne is in a position to:

- support the development of housing and support services for disadvantaged and homeless people
- advocate on behalf of disadvantaged and homeless people to relevant government departments and other relevant organisations
- undertake research to investigate the feasibility of new services, and
- create opportunities for including disadvantaged and homeless people in the life of the city.

The City of Melbourne services and systems' interface with people sleeping rough includes:

- partnerships with and funding of agencies delivering services to people sleeping rough
- parks and gardens management
- management and maintenance of public spaces and streets
- public facilities such as libraries, swimming pools
- municipal public health management, including food handling
- regulation of boarding houses/rooming houses
- squat closures
- emergency management
- homelessness service coordination project.

City of Melbourne Homelessness Strategy

The City of Melbourne adopted *Pathways City of Melbourne Homelessness Strategy* 2014-2017 in August 2014. The *Homelessness Strategy* provides Council with direction for future work and actions in responding to homelessness. 'The Strategy outlines five key themes:

1. Know our City – it is essential we continually research, consult, refresh and share our knowledge of homelessness in Melbourne

2. Be Inclusive – respect, hear, welcome and include those who are homeless in our services, activities and events to ensure these are easily accessible for homeless and vulnerable people

3. Develop Skills – we can provide opportunities to enhance personal resilience, develop skills and strengthen social inclusion in order to avoid long-term hardship

4. Create pathways – we will work with our partners to courageously advocate for change and create sustainable pathways out of homelessness

5. Health and wellbeing – foster partnerships with health and wellbeing services to ensure improved outcomes for people experiencing homelessness.'[8]

The Homelessness Strategy has a link to key council strategies and plans including:
- the City of Melbourne Council Plan 2013-2017
- Homes for People Strategy 2014-18
- Strategy for a Safer City 2011-2013
- Open Space Strategy 2013-28
- Melbourne for All People Strategy 2014-17 (draft).

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[8] *Pathways: Homelessness Strategy* 2014-2017 City of Melbourne

City of Melbourne StreetCount

StreetCount, a point-in-time research series reporting on the number of people sleeping rough in the city has been undertaken by the City of Melbourne since 2008. The aim of the StreetCount is to collect accurate and up-to-date information about the extent of people sleeping rough in parks, streets and other areas of the city.

Following a review in 2012 it was agreed that in the next five years early morning point-in-time StreetCounts would be undertaken every second year with a qualitative research project every alternative year. The fifth year (2016) will align with the ABS Census count of people who are homeless.

1.3 Rough sleepers in Melbourne

Homelessness in Victoria is reported to be slightly under the national average, with 22,773 people or 42.6 per 10,000 people, experiencing homelessness. Approximately 5% of these people are sleeping rough.[9]

Melbourne as a capital city with a relatively large concentration of community services, draws people to the city in search of information, support and services including health, education and housing. Data from the 2011 census indicated that an estimated 1,232 people were homeless in Melbourne and 133 or 11% of these people were reported as living in improvised dwellings, tents or sleeping out.

The latest StreetCount point-in-time data (2014) reported 142 people were sleeping rough in the city. This was an increase of 41 people since the previous point-in-time count in 2012. Of these rough sleepers, 102 people or 72% were male, 20 people or 14% were female (the gender of 20 or 14% was not recorded). The majority of people were 26-40 years followed by the 41-60 year age group.

People were recorded as sleeping in a range of places including, parks, streets, squats and train stations.

Of the 142 people counted/observed as sleeping rough in 2014, 83 participated in a StreetCount (point-in-time) survey. The make-up of the sample of the 2014 point-in-time survey (coincidently also 83 people) is not dissimilar to the StreetCount 2015 qualitative research sample as shown in Table 1 below. The possibility of people being involved in both samples is unknown, however no one involved in the 2015 interviews reported that they had previously been involved in StreetCount.

Table 1: Comparison of 2014 and 2015 research participants

Demography	StreetCount 2014 (point-in-time) survey sample[10]	StreetCount 2015 qualitative research sample
Total participants	83 people	83 people
Males	Not available	81%
Females	Not available	19%
Born in Australia	79%	86%
Identify as A&TSI	12%	19%
Homeless for less than 1 month	2%	2%
Homeless for more than 10 years	24%	29%
Not on the public housing list	56%	51%

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[9] *Census of Population and Housing: Estimating Homelessness*, Australian Bureau of Statistics 2012
[10] *StreetCount 2014 Final Report* City of Melbourne July 2014
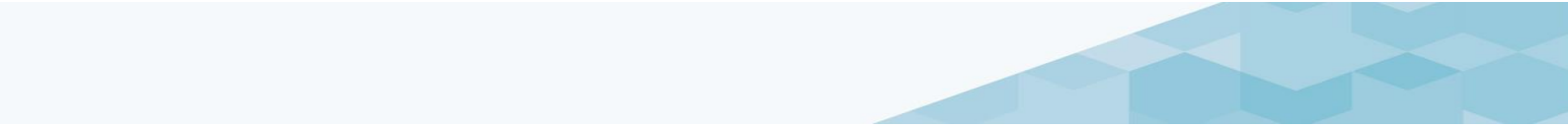
1.4 Homelessness and sleeping rough – a snapshot from the research

People sleeping rough or in improvised accommodation form one of the smallest groups of people experiencing homelessness. There is considerable evidence that people in this group have significant health and other complex issues, and most have been homeless for well over five years. This is the most vulnerable group and requires specifically tailored and coordinated responses to ensure sustainable pathways out of homelessness.[11]

A desk-top literature search (See Attachment 1) identified a plethora of research reports or projects on people sleeping rough. Research reports concerning homelessness and rough sleepers in Melbourne and other areas of Australia in the last five years were scanned to draw the snapshot summary presented below.

Common pathways into homelessness and sleeping rough include:

- family/relationship breakdown, often from an early age
- housing affordability/lack of access to housing – there are currently 35,000 people in Victoria on the public housing waiting list
- domestic and family violence
- lack of housing following a stay at prison.

Common (traditional) characteristics of people sleeping rough identified through this literature search include:

- a history or episodes of physical, emotional and sexual abuse
- experience of institutions such as prisons and psychiatric hospitals
- numerous and complex health and welfare needs
- poor dental health
- experiences of assault
- precarious living including financial and employment insecurities
- high levels of pyschological distress
- low self-esteem.

In addition chronically homeless people are likely to have experienced childhood abuse/trauma/neglect and substance abuse, mental health and serious health issues.

> The idea of ontological security highlights a paradox - people experiencing homelessness, like every one else, actively seek a more stable, meaningful and secure existence but, because they have little access to even the most basic emotional and material resources, their actions and the structures that shape them, often perpetuate homelessness.
>
> Ontological security is the basic need we all have for safety, predictability and continuity in our day-to-day lives. Our homes are a crucial site through which ontological security is established and sustained.
> *This is not living Chronic homelessness in Melbourne* Guy Johnson and Nicola Wylie 2014

More recent research however is challenging the common traditionally understood characteristics of homelessness. 'The fact that there are now more older women than older men entering supported accommodation challenges our notions of who are the homeless. Many do not have a history of mental illness, cognitive impairment, alcohol and substance abuse, or a long history of homelessness.'[12]

Research suggests that there are a number of subgroups within the homeless population, in particular:

- a growing female population and women can experience homelessness differently
- an over representation people of Aboriginal and Torres Strait Islander backgrounds compared to population numbers
- veterans are considered to be amongst the most vulnerable of the homeless population.

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[11] *Pathways: Homelessness Strategy* 2014-2017 City of Melbourne
[12] *It could be you: single, older and homeless* Ludo Mc Ferran 2010

2. StreetCount 2015

The City of Melbourne has undertaken a range of research projects to improve the understanding of the daily lives of people experiencing homelessness. Under a key theme of the homelessness strategy – Know our City – Council has committed to continue to undertake research on people sleeping rough and to build and share this knowledge.

StreetCount 2015 – Qualitative research into the daily-lived experience of people 'sleeping rough' in the city – is the second qualitative research project in the series. The project commenced in January 2015 and was completed in June 2015.

2.1 Aims and objectives

The StreetCount qualitative research 2015 aims to improve understanding of the lived experience and journey of homelessness for rough sleepers. The research aims to inform both the service responses and the opportunities for creating effective pathways out of homelessness for people sleeping rough as well as contribute to Council and community understanding of homelessness.

The research objectives include building on previous StreetCount research, engaging females sleeping rough, gathering qualitative information on the journey of people sleeping rough (over ten weeks) and providing an avenue for people sleeping rough to tell their story.

2.2 Methodology

The project methodology was designed to allow for an open exploratory approach, to have flexibility in processes to accommodate participants' transient circumstances and have a range of research instruments to capture participants' stories.

The research sample aimed to include a diversity of people (18+ years) currently sleeping rough including gender, age groups, and period of time sleeping rough. The sample aimed to include people who would be willing to participate over a ten-week period, however it would also include participants who were willing to be involved in a one-off or irregular type of engagement.

On a weekly basis for ten-weeks three researchers were located at the Salvation Army Hamodova Café during the breakfast and lunch service attended by 100-200 people every day. The researchers approached people to explain the research, establish if they were sleeping rough and invite them to participate in an interview or conversation about their daily life experiences. Interested people were provided with a plain language statement and asked to sign a consent form. All participants were reimbursed $20 per interview. Focus group participants were provided with an additional $30 supermarket voucher.

The interviews/discussions took place at tables located in one area of the café. Each interview took between 20-45 minutes.

An interview survey schedule was used to capture a verbal account of participants' stories. While most participants chose to follow this schedule, a few participants chose to give a descriptive account of their story and others provided their story through photos and paintings.

For further detail on the methodology, consent forms, plain language statement and interview survey refer to Attachment 2.

2.3 Key areas of enquiry

The key areas of enquiry fell into three key themes:

What is the lived daily experience of people sleeping rough?	People sleeping rough's perspectives of services	What are the hopes and aspirations of people sleeping rough
Areas explored included:	*Areas explored included:*	*Areas explored included:*
▪ Health and wellbeing ▪ Hygiene ▪ Contact with others ▪ Sleeping ▪ Safety and security ▪ Daily activities	▪ Knowledge and access to homelessness support services ▪ Use of services, service type and frequency of use ▪ Reasons for not using services ▪ Service/support gaps	▪ The person's hopes and aspirations in six months time

The key findings of the project are drawn from a thematic analysis of quantitative and qualitative information provided by participants.

2.4 Ethics

The City of Melbourne did not require approval from a formal human research ethics committee to undertake this research, however the project approach, plan and processes were developed to the best of intentions within an ethical practice framework. Research practices and processes applied throughout the project aimed to draw on best practice in engaging people who are vulnerable.

2.5 Project challenges

At the outset of the research project, the capacity to achieve an adequate sample of people sleeping rough including a range of age groups and gender was unknown and depended on a number of factors including:

▪ the potential of agencies to link people with the researchers
▪ people's interest / capacity to participate in the project.

Recruiting research participants through a range of agencies engaged with people who are sleeping rough as initially planned was not feasible. Given the vulnerability of the target group, most of the agencies working in this area require formal ethics approval to conduct research with their agency and/or the client group. The project timeframe did not allow adequate time for submitting (and potentially re-submitting) an ethics application. Without formal ethics approval for the research, the recruitment of participants was restricted to one agency.

Tracking the daily-lived experiences of people sleeping rough over a ten–week period is also a major challenge given:

▪ the transient nature of people experiencing homelessness
▪ responding to personal daily needs would take precedence to participating in a research project
▪ people can move in and out of sleeping rough over a short period of time and
▪ participants may not always have the capacity to participate in the research due to health, wellbeing and/or substance use.

2.6 Consistencies with previous StreetCount research

StreetCount 2015 aimed to achieve consistency with previous StreetCount data collections in order to draw comparisons over time, whilst at the same time building, not repeating existing research, knowledge and understandings of people sleeping rough.

A key point of difference between the previous StreetCount qualitative research (2013) concerned questions regarding a person's personal background and pathways into homelessness. StreetCount 2015 did not formally explore questions regarding participants' early life, when they became homeless or why they became homeless. Reasons for this decision are several including:

- there is a significant body of research and an understanding of people's backgrounds and pathways into homelessness
- such questions can be emotionally difficult and can trigger trauma and/or retraumatise the person
- the interviews/discussions were being conducted by researchers, not counsellors
- the research participants were not the (direct) beneficiaries of the research.

Some of the participants chose to disclose their personal information. This information has been included in the project findings, however statistics on participants' experience of sexual abuse, institutions, early school leaving and exposure to drugs and alcohol as a teenager are not presented.

The project undertook a literature review of research into the pathways and experiences of people sleeping rough which has been summarised and presented in Section 1.4 of this report.

2.7 Data limitations

The project sample was restricted to people who attended the Salvation Army breakfast and lunch service. Although the sample did include a diversity of people sleeping rough, common characteristics reported across the participants may be subject to the bias of the type of people who do and do no use this service.

The key findings of the project are drawn from a thematic analysis of quantitative and qualitative information provided by participants. In interpreting the findings, it is important to factor in that all of the data represents participant's qualitative individual experiences and perspectives.

Homeless people camped at Enterprise Park, Melbourne (posted 15 January 2015)[13]

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[13] Reproduced with the permission of Australian Broadcasting Corporation Library Sales, http://www.abc.net.au/news/2015-01-15/homeless-people-camped-at-enterprise-park2c-melbourne-2jpg/6019104

3. StreetCount 2015 overview

3.1 StreetCount 2015 participants

The StreetCount research team attended the Salvation Army Hamadova café breakfast and lunch service on a weekly basis from the third week of March to the last week in May. Over this ten-week period, 83 people currently sleeping rough participated in the project and completed at least one interview.

All participants had the option of participating in further interviews on a weekly basis. This arrangement was not formalised and occurred if the person was present on the day, if the research team had the capacity to include them on the day and if they wished to participate.

Thirty-four people (39%) completed more than one interview creating a pool of 172 interviews.

People were very willing to participate in the project and on a few occasions the research team did not have the capacity to interview all of the people wanting to participate. As well as repeat interviews, with the exception of week four, at each session there was a significant inclusion of new people who wished to be involved in the project.

Graph 1: StreetCount 2015 interviews by week (n=172)
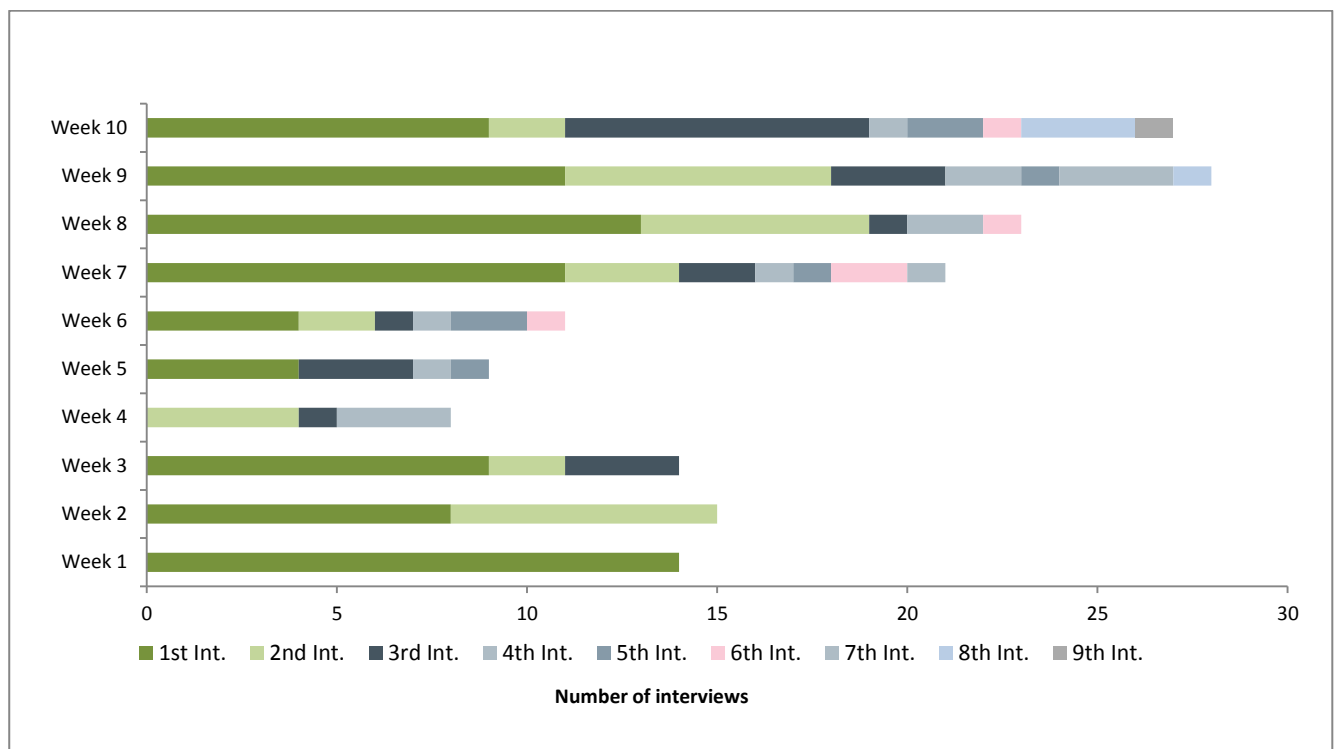
Eight people who had been involved in five or more interviews over the ten-week period were invited to a focus group. All eight people participated in the focus group session.

The findings from the interviews capture and report the story of the daily-lived experiences of the 83 people who are currently sleeping rough in Melbourne.

Qualitative and quantitative data gathered from all of the interviews has been thematically analysed to identify commonalities across the data. Key themes emerged and these are presented in the Sections 4,5 and 6 of this report.

The interview findings are presented as follows:

Report Section	Source Data
Section 4	This is the data from interviews with **83 people** (who participated in one (1) interview only)
Section 5	This is the data from interviews with **34 people** (who participated in two (2) or more interviews)
Section 6	This section draws on the experiences and recommendations of all participants, but particularly those who participated in the focus group after completing five or more (5+) interviews.

Individual case studies are presented throughout to illustrate individual perspectives of daily life and pathways in and out of homelessness.

3.2 Case Study

Paul provides a perspective of being homeless for 5 weeks in Melbourne…

Paul returned to Perth after living for 8 years in New Zealand as a chef. After his possessions were stolen from his apartment in Perth, he came to Melbourne seeking work as a chef. Since arriving in Melbourne five weeks ago, Paul has spent his days looking for work, and his nights sleeping in a train station waiting room.

'I have gone from living in a really nice apartment in New Zealand with a top job, to the train station in Melbourne in only a couple of months.'

About 12 people stay in the train station waiting room each night, and the Protective Services Officers allow this: *'As long as you are polite – it seems to be OK.'*

Paul refuses to go onto Centrelink payments, as he thinks he will then be trapped. He is very hopeful that he will find employment soon. He has managed to survive on $1.50 for three weeks, and only found out about the Salvation Army breakfast and lunches a few days ago.

Paul gets up early each day, and goes to Burger King and Hungry Jacks where the workers allow people to come in and get warm. There is also free Wi-Fi, so Paul can look and apply for jobs over the internet. However finding a job has been hard – you can't get a job without accommodation, and you can't get accommodation without a job.

For the rest of the day, Paul tried to keep active:

'There is nothing to do and that is why drug use for people sleeping rough is so high – drugs give rough sleepers a purpose-its horrible. There is not much to do – I have never walked so much in my life. It is harder being homeless than working in a kitchen for 17 hours a day. The boredom is bad during the day and nights are hard. You get 1-2 hours sleep per night. It is safer to sleep during the day. It is difficult finding somewhere safe to sleep. And hard finding the right people to trust. You have to deal with lots of mind games, people looking at you like you are dirt – it is not nice. Everyday turns into a blur. You feel like an orphan and hope someone will come and collect you.'

Paul is in contact with some services which are trying hard to help him get accommodation, however not being on Centrelink payments is a problem – some housing services can't assist if you're not on Centrelink.

'People on the street look out for each other. [We] got another homeless person some services. He had just arrived in Melbourne and we hooked him up with the Salvation Army. That's what people did for me. Apart from junkies, everyone tries to help each other- they tell people where to go and where not to go. The guys at the police station are really cool.'

'I have had a hard couple of months – it's very frustrating. What scares me is the ice on the street at the moment. It is very bad and really scares me.'

For confidentiality names and details of this case study have been modified.

3.3 Case Study

James talks about his journey from sleeping rough to living in public housing…

30 years ago, James was living in the US with his wife and two children. Then he went on a 'slide down'. James lost contact with his family, and returned to Australia where for more than twenty years he has been living on and off in train carriages, at tram depots, in and out of boarding houses, and on the street.

'I should not be here. Working, gambling, drinking, partying – I just blew it. I had good jobs working for the railways. But I've suffered for years. I know I was an idiot. Help is no good until you want to help yourself.'

Four months ago, James secured public (drop-in) housing in a southern suburb. He has a fridge and a bed donated from St Vincent's, and a TV rescued from hard-rubbish. He feels safe.

'I don't gamble. I woke up to myself. I could kick myself for being such an idiot. Once I wanted to help myself and services were supportive – it has started to pick up. I come to the Salvation Army for food and company. Now, there's no drinking, no pokies.'

James lives on $200 per fortnight, and continues to access services like the Salvation Army for food and clothing vouchers, but mainly for the company.

It's not about getting things, it's about getting out and interacting with people. Otherwise you are going to go mad.'

James feels like he could write a book about what has happened to him over 30 years. He said it was really good to talk to the interviewer about his life. It was one of the first times he has spoken to someone about his experience, and it meant a lot to him.

For confidentiality names and details of this case study have been modified.

4. Findings: About the people sleeping rough

4.1 Who is sleeping rough?

The project was successful in engaging 83 people sleeping rough including a diversity of gender, age groups, period of sleeping rough and Indigenous background. Although people were not formally asked about their family situation, through their stories a number of people mentioned that they were grandmothers, grandfathers, mothers, fathers, sons and daughters.

> Using the term 'sleeping rough' however is a misnomer – as most of the people we talked to were not able to 'sleep' very much at all.

Age and gender

Of the 83 people sleeping rough:

- 16 or 19% were females, 67 or 81% were males
- the majority were 30-39 years followed by the 40-49 years age group.

Graph 2: StreetCount 2015 Participant age and gender breakdown (n=83)
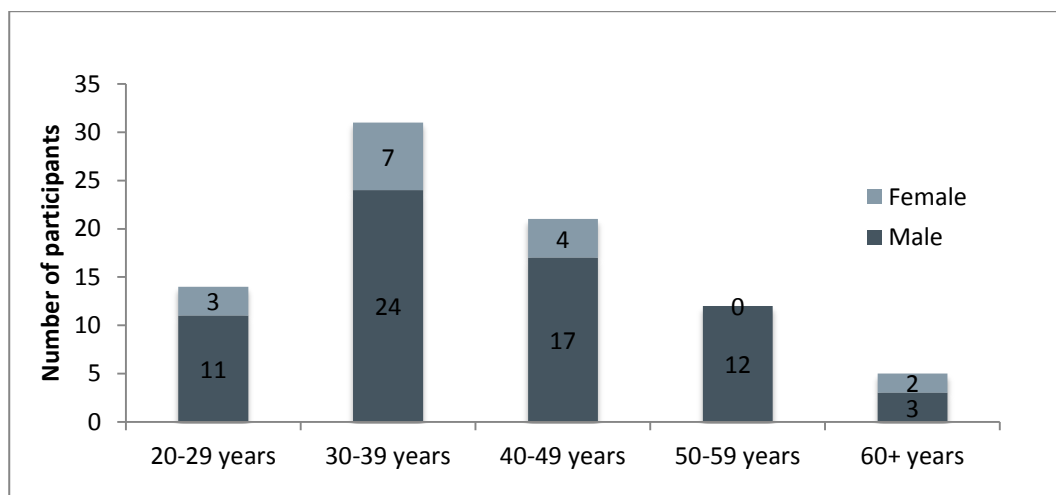
Females have previously been identified as a 'hidden' sleeping rough population and are considered to be an undercount in previous StreetCounts. Although an increase on previous StreetCounts, the number of females participating was influenced by the numbers attending the breakfast and lunch service. With the exception of the 50-59 years group, females were represented across all of the age groups with most in the 30-39 years age group.

Country of birth and Indigenous status

Of the 83 people sleeping rough:

- 72 or 86% were born in Australia.
- 16 or 19% identified as Aboriginal and/or Torres Strait Islander
- both males (9) and females (7) identified as Aboriginal and/or Torres Strait Islander.

Housing waiting list

Almost half (40 people or 49%) of participants reported that they were on the public housing list or some other housing list (for example, Aboriginal Housing). There is no significant difference between males and females with regard to being on the public housing waiting list.

Some participants were unsure if they were on the housing list, stating that they used to be.

> *I used to be on the list. Not any more. I was offered a house but did not take it because it was too rough, it was too dangerous. So after that you go to the bottom of the waiting list and stay at the bottom forever.*

> *I was on the list but I don't know what happened.*

Of the 40 people who reported that they were on the housing list, 14 stated they had been on the list for five or more years.

Income

With the exception of two participants, people's income was from Centrelink – either Newstart or a Disability Support Pension. A few people stated that they supplemented their Centrelink payment with a part-time job, begging and/or money from charities.

Length of time sleeping rough

Defining 'sleeping rough' and counting people sleeping rough has inherent difficulties as outlined earlier in this report. People who are homeless can experience different patterns of moving in and out of homelessness or between different levels of homelessness. People who participated in this project reported that they were currently sleeping rough, however their period of sleeping rough may have been 'on and off' or 'consistent'.

Twenty-four people or 29% of all participants had been sleeping rough for ten years or more. Half of these people had been consistently sleeping rough over this period of time, the other half on and off.

Table 2: Length of time sleeping rough

Period sleeping rough	Male	Female	Number of people	% of people
Up to 1 week	1	1	2	2%
Up to 1 month	-	2	2	2%
1-6 months	7	2	9	11%
6-12 months	7	3	10	12%
1-2 years	9	2	11	13%
2-5 years	13	2	15	18%
5-10 years	5	1	6	7%
10+ years	21	3	24	29%
Other (please specify)	4	-	4	6%
Total participants	67	16	83	100%

% have been rounded

Graph 3: StreetCount 2015 Length of time sleeping rough (n=83)
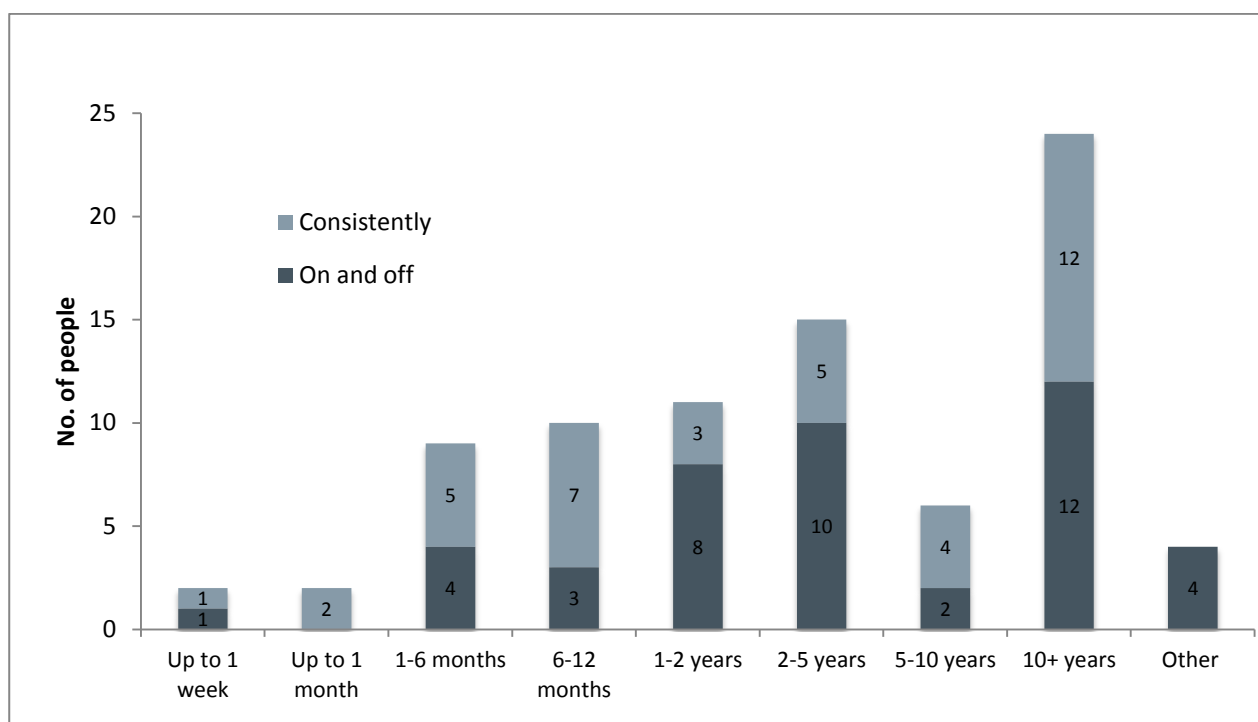
Some participants chose to share information about why they were sleeping rough. Anecdotally the pathways included family breakdown at an early age, coming out of prison, drug and alcohol abuse, marriage breakdown, gambling, a breakdown in housing and financial difficulties.

> *I have been running away since I was 9 years old.*

> *A lot of people get out of jail and have nowhere to go. Only reason I went to jail was I breached my agreement cos I didn't have any housing.*

> *I have no resume which makes it hard. I have a mobile, a bank account, a tax file number and photographic ID. If I can get through the door I am a very hard worker. I am homeless because I am caught between a rock and hard place.*

4.2 Where are people sleeping rough and how often do they move?

People were asked where they had slept in the previous week and how long they had stayed in that place. People reported sleeping in a range of places including parks, train stations, alleyways, doorways, stairwells, under bridges, in car parks etc. There are no reported differences between males and females with regard to where they slept.

> *You try and choose a dry out-of-the-way spot so you don't get harassed by the cops and don't get moved on.*

> *I stay in random places like playgrounds, at the back of an old radio station, in a grandstand, just wherever I can find that is sheltered.*

> *I slept in a back lane in (one of the city) streets – I was very happy there for a couple of weeks. I could get in through the vent and then replace the cover and nobody knew I was there.*

> *Never reveal an exact location. It's a survival tactic so I can't tell you where I am sleeping.*

Graph 4: StreetCount 2015 Where people have been sleeping (n=83)

Location	No. of people
Other	32
Couch surfing	24
Park	20
Street	19
Squat	17
Under bridge	15
Train station	14
Alleyway	14
Car park	9
Church (garden)	7
Car	3
Community housing	2
Building site	1
Hotel/Motel	1
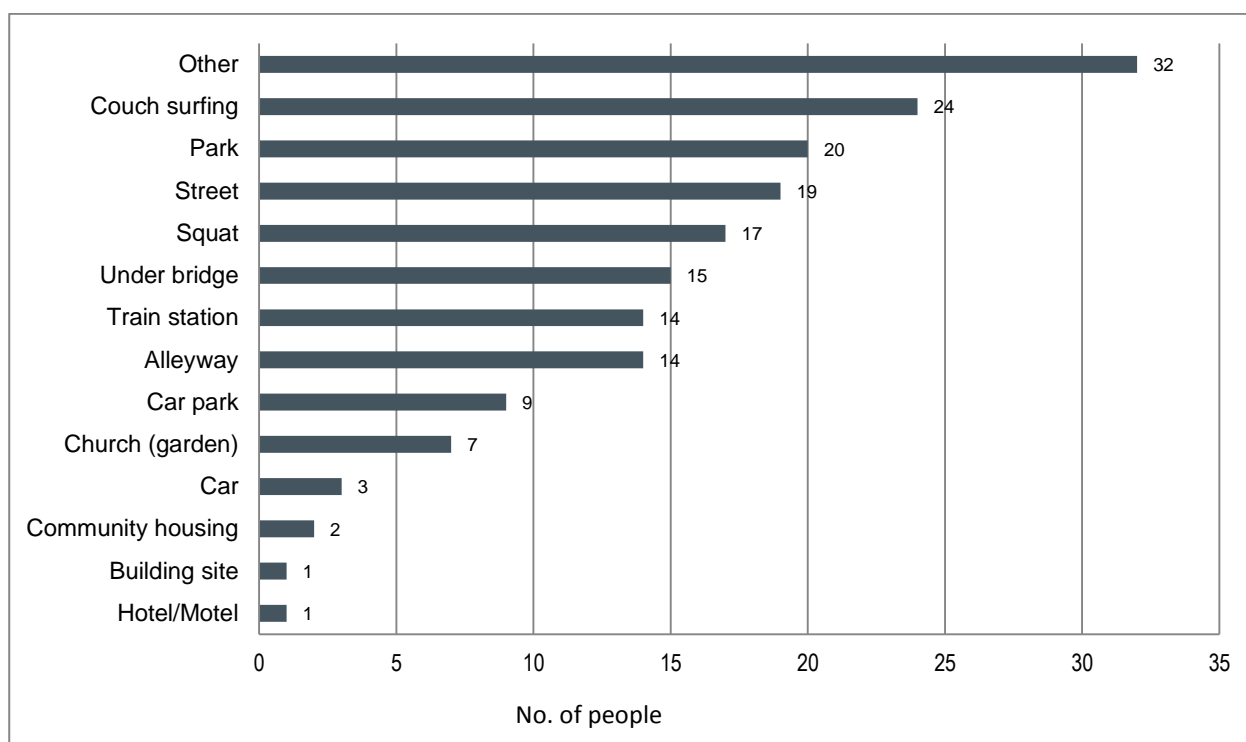
Places recorded under 'other' include a range of responses including 'don't sleep', 'sleep anywhere', 'doorways', 'stairwells' 'random places' and 'don't want to say'.

How long people stay in the one place depends on a number of factors – the weather, if they feel safe, if they can stash their belongings there, whether they get moved on and who else arrives at their spot. If people find a 'good spot' however, they stay for as long as they can, usually until someone finds out and moves them on.

A significant number of people (42) reported that they moved places every few days, and a further ten people reported that they had been in the same place for a week. Only two people had been staying in their current location for 12 months. (Ten people did not answer this question).

> *Sleep anywhere, keep moving, don't stay in the one spot.*
>
> *I slept in a stolen car for two nights then couch surfed for a week. I would rather take ice and stay up all night than sleep on the street. It's cold, people rob you and you don't feel safe.*
>
> *You have to move around because people find out about your squats. Other homeless people find your spot. It depends on what drugs other people are on.*
>
> *Have stayed two months in the same place with my girlfriend. It's an undercover car park. We stumbled across it. The security guard lets us stay there. It's undercover and out of the rain.*

4.3 Looking after belongings

People related many stories of the need to stash their belongings and hope that they are there at the end of the day when they return. Some people take only what they need for the day and hide other things such as bedding and clothes. Some take all of their belongings with them all day.

A few participants mentioned using lockers to store their most valuable belongings, however many also mentioned the lack of storage facilities and the cost of storage. In addition to what participants referred to as 'a lack of lockers and storage', access to lockers was also raised by a few people.

> *You need to have access to lockers 24/7. At the moment if you can get a locker (at a homelessness service) you can only access it during working hours. This is no help when you need your blankets at night time or on the weekend. So we end up having to hide the stuff or carry it around all day.*

> *Last night we had all of our stuff stolen. This is the second time in a few weeks. So we have to start all over again getting some blankets and clothing.*

A few people said that looking after their belongings was one of the hardest things to manage when sleeping rough. Things get lost and stolen easily and then it takes a long time to get them back, in particular any personal documentation.

> *My ID and medicare card were stolen – no address, so can't replace it. Everything keeps holding you back. Can't do one without the other.*

4.4 Services used

All of the people participating in the research were attending the Salvation Army Hamodova café which is open Monday to Friday 9am – 1pm. Most of the people were there for breakfast or lunch or both but some also came because it was somewhere where to spend a few hours and/or somewhere to catch up with other people.

A daily 'service use' pattern for people who are sleeping rough has been derived from asking people – what services had they used in the past week and how often they had used these services. The responses are subject to individual interpretation, recall and disclosure and do not necessarily provide a precise summation of services used. The information collectively however does provide insight into common patterns of service use.

Graph 5: StreetCount 2015 What services did you use in the past week and how often? (n=83)
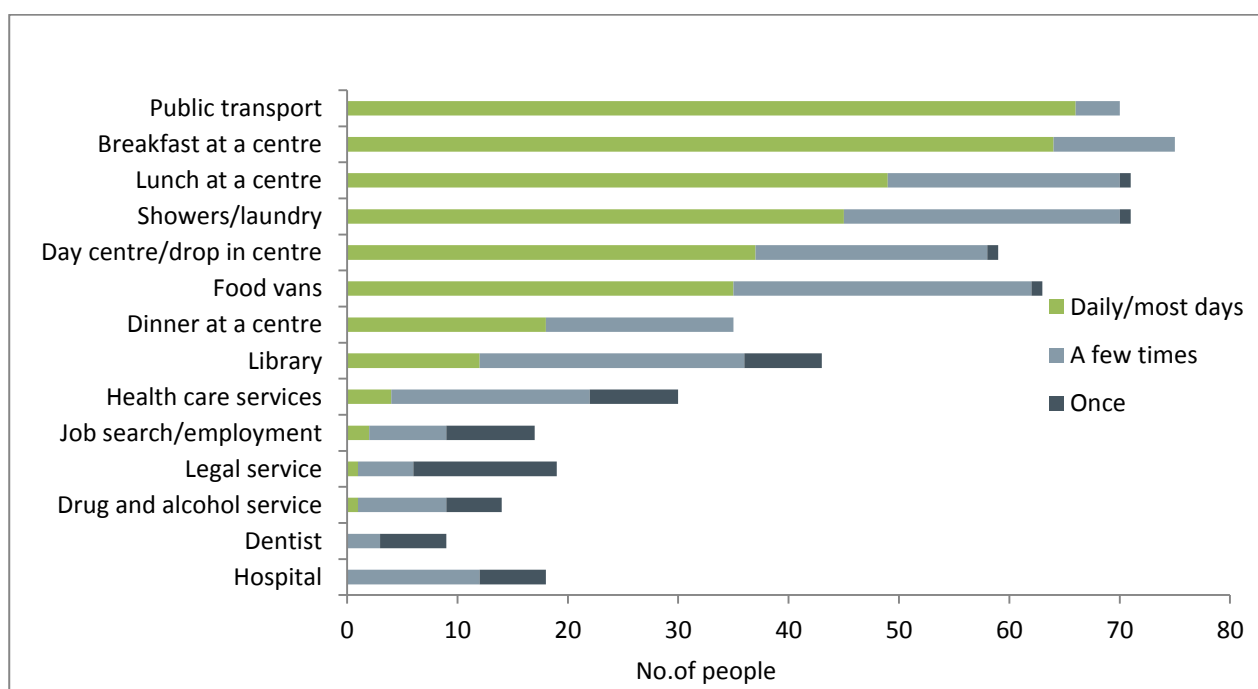
On a daily basis, public transport was the most commonly used service (66 people).

Breakfast (64 people) and lunch (49 people) at a centre were also highly used everyday or most days. This reflects the attendance at the Hamodova café however people also referred to other breakfast and lunch programs that they used, particularly on the weekends. Fewer people stated that they had dinner at a centre, with many people using food vans in the evening.

Showers and laundry services were also commonly used (45 people) daily or most days, however, many people stated they used these a few times a week. People referred to difficulties in accessing showers and laundry services relating that 'at times they could not get these'.

Going to a day centre or a drop in centre was a common daily/most days activity for 37 people and a further 21 people said they did this a few times a week.

Forty-three people said that they had used a library in the previous week. A number of people talked about using the library as a place to go to relax, read books, use the internet, charge their phone and catch up with others.
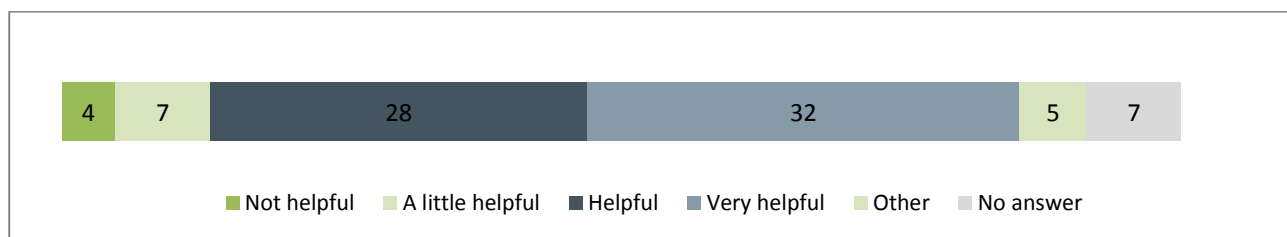
People were asked to rate 'how helpful' were the services they used. On a four-point scale from 'not helpful' to 'very helpful' the majority of people rated the services as 'helpful' or 'very helpful'.

Graph 6: StreetCount 2015 How helpful to you were services that you used (n=83)

| 4 | 7 | 28 | 32 | 5 | 7 |

Not helpful ■ A little helpful ■ Helpful ■ Very helpful ■ Other ■ No answer

Many comments were received about the Salvation Army and many people stated that they did not know how they would survive if the Salvation Army (food service in particular) was not there.

> *The Salvation Army lunch and breakfast are a life saver.*

> *Could not live without the Salvos. The Salvation Army is a hub. Catch up with friends (or people you know) everyday. Go to the toilet, say hello.*

Although participants were not asked to comment on the services, many people did provide some comments. These included:

- there are plenty of food services during the week but an absence of food services on the weekend
- there is often a shortage of showering and laundry facilities
- there are not enough places to go just to relax, sit down, have some quiet time
- it would be good to have more fresh food and vegetarian options in the food services.

Difficulties staying in hostels, boarding houses and/or some crisis accommodation were raised by some participants. Reports of not feeling safe, being exposed to violence, drugs and alcohol, and the high costs of this accommodation were given as reasons for not using this accommodation.

In response to the question – 'Over the last few days, were there any services that they needed but could not get?' – the most common answer was 'no' (24 people). It is the researchers' opinion that this response cannot be interpreted as 'not in need of a service' but is more likely to be a reflection of people's aspirations or lack of aspiration and/or their belief that services cannot provide a solution for them.

Of the people who did report a need for services the most commonly mentioned services were:

- housing/accommodation
- showers
- laundry
- services on the weekend
- mental health services.

> *We need laundry and shower facilities. Too many people are trying to get into the showers and use the laundry at the same time. Sometimes it is a two-hour wait and there is no weekend access to showers.*

> *I had no clothes this week. Because of the long line for the laundry. Now I have to wait for pay day and go to the public laundry. It will cost $12. It is too much money.*

4.5 Filling in the day

For most people daily-life meant 'just dealing with getting food and shelter'.

> *I don't have anytime for anything other than trying to manage food and sleeping. I don't socialise with other people. My husband and I just stick together.*

> *Getting food is my main priority. I do nothing socially. I am very detached since I have been homeless. Finding somewhere to stay that is warm and dry is very hard.*

> *I used to spend most of the day looking for food and shelter when I first became homeless, but not now.*

In the main people socialised with friends or other people who are homeless, usually at a centre such as the Hamodova café. Many people pointed out however that they did not consider the people they socialised with at a centre as friends but as people who were going through the same experiences as themselves.

Most of the participants (49 people) did not visit family. Many people related that they had not visited family for a long time, others stated that they would like to be in contact with their children but were not. A few of the participants were family – two people were siblings and two were a parent and adult child.

> *Yesterday was Mothers' Day. I felt a bit depressed.*

> *My situation is completely hopeless. I don't know where to turn to next. I came to Melbourne to get back with my daughter, now I have lost her again. The worst is losing my four grandchildren.*

Table 3: Participation in activities

Over the past week have you participated in any of the following activities	Daily	A few times/once	Did not do this
Socialised at a centre	37	15	9
Socialised with friends	30	16	10
Socialised with other people who are homeless	43	8	8
Visited family	3	10	49
Spent most of the day looking for food and shelter	51	4	5

A few people reported that they were involved with recreation programs such as Reclink and others had been able to get a gym membership (through a homelessness agency). Libraries continued to be mentioned as good, warm and comfortable places to go and for some people the libraries are a regular part of their week.

Many participants talked about dealing with 'boredom' and having nothing to do all day. 'No money', 'not feeling welcome', 'not having enough sleep' and 'just dealing with survival' were mentioned as reasons contributing to the boredom and having nothing to do.

> *Boring days, just stay at the Salvos till it closes. Then just walk around.*

> *You can't go into the shops with your backpack. They think you are going to steal something.*

> *It is a nightmare living on the streets. There is nothing to do during the day. That is why people drink and take drugs.*

Activities that people would like to be doing but were not able to included sport, gym, art, school, education and to have a place where they could go, just to relax. Some of the women participants stated that they would like to have a women's space to go.

> *I would like to go swimming. Try to do something that makes you feel normal. Would like to get back to basics - socialising, group activities, playing cards, doing something. I would love to go down to the beach and go surfing.*

> *I would like access to some sporting activities e.g. a pool, an oval, a boxing ring at a gym. Places without grog. Just to be able to go to somewhere where there are social sports would be good.*

> *I would like to go to school – I left at grade six.*

> *I would like some women's services. Somewhere we can feel confident to open up. Somewhere for women to go and feel comfortable.*

> *I would like to do some art – it helps me feel calm.*

4.6 Relationships with others

People referred to their interactions with other people (strangers) in the community and between other people who are homeless. There were many stories of goodwill from 'random people' being kind, offering help, giving food, giving clothing and giving money. Other stories related to feeling humiliated or ignored by the general public.

> *Someone dropped off a backpack full of toiletries for us the other day. Don't know who they are they just left them for us with our stuff.*

> *I sometimes beg when I need money. Mostly it's more good than bad, but you always feel that you are being judged. Sometimes people say nasty things, but you just let them say what they want to say and let them be.*

> *I feel mostly ignored by people in the street.*

An impression gained from the stories shared is that there are some people in the community who regularly visit or catch up with people sleeping rough. Some participants described these people as their 'regulars' – people who come by and see how they are going, or who regularly come by and give some money.

Other main relationships referred to were with other people who are sleeping rough. Some stories related the support and kindness between 'streeties' whilst others related trying to maintain a separation from other 'streeties' especially when drug and alcohol was involved. Needing to work out who can be trusted is important for survival.

> *There are always fights and dramas going on. That's just normal.*

Examples of support and kindness between 'streeties' included sharing information on where to go to get services, sharing of food, socialising and looking out for each other.

You get word of mouth about services from other people – what is good to go to, what is good to use.

We had a BBQ down by the river the other night with some oldies (who are homeless). I have been wanting to do this for ages. It was really good. The old fellows really enjoyed it. We all sat around, had a chat, had a yarn and some great food.

Last night we met a guy and he was starving. We gave him what we had. He had just got chucked out from a hostel. We gave him a banana and he was so grateful. He was starving.

4.7 How safe do you feel?

Safety was a key area explored in the research. People were asked to rate 'how safe they felt' over the last week. Of the participants who answered this question about half did not feel safe.

Graph 7: StreetCount 2015 How safe have you felt over the past week? (n=83)
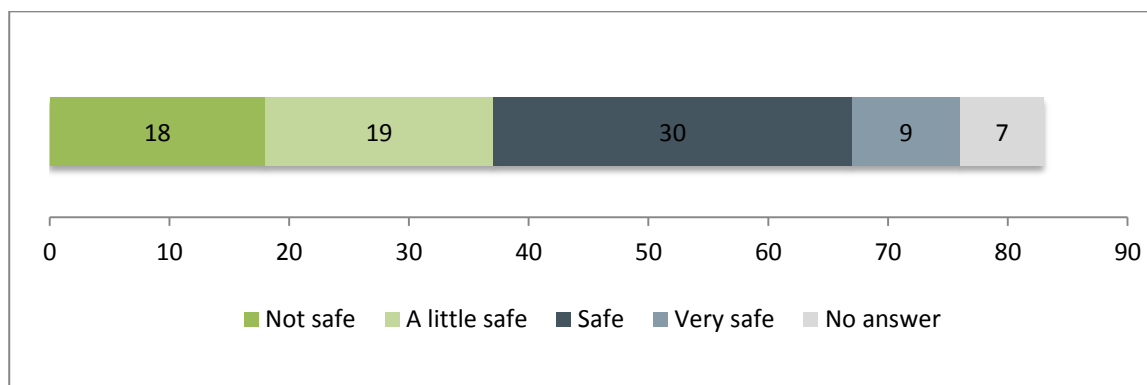
The need to always be alert, 'always watching your back', 'always on the lookout for people that might harm you' – were commonly relayed. Getting things stolen and getting bashed were also frequently mentioned. Women in particular said that they did not feel safe at all, but being with a partner helped. Others slept in groups where people took turns at 'being on watch' to help them feel a little safer.

I felt safer in jail.

I feel like I am going to get robbed and bashed. With having anxiety this is worse. I am always worried about this.

Where I am at the moment I feel safe. Sometimes I get a bit edgy. I sleep with a group - not a big group, but enough to look after each other. We keep this spot to ourselves. We take turns at sleeping and looking out.

A few people have been staying at my site have been affected by ice, and they are really unpredictable, and I have to be careful.

Friday and Saturday night are really unsafe. I don't sleep till day-break. Stay up as long as I can.

People also mentioned feeling unsafe in hostels, boarding houses and crisis accommodation. Some people reported that staying in this type of accommodation was 'frightening' with concentrated exposure to violence, drugs and alcohol, aggressive behaviour and theft. Some people commented that they felt safer on the streets.

Rooming houses are nut cases, kicking in the door – rather stay on the street with my back to the wall.

The most common response to an open question – 'what is needed to help people sleeping rough feel safer?' – was 'housing'. The 'need for housing' in order to feel safe, was stated by 35 people. Being able to get away from people drinking and on drugs was also frequently mentioned.

To feel safe, you need a house.

We need a secure place without drugs.

Better lighting, more cameras and more patrols from security and police.

4.8 Impact on health and wellbeing

When asked – 'What are the hardest things to manage when you are sleeping rough?' – a number of participants talked about their mental and physical health. Keeping 'mentally stable' for many people was one of the hardest parts of sleeping rough.

Managing your life when you are sleeping all over the place. Hard to organise your life, hard to get a job. It feels like no one cares.

I am generally fit and sane but living on the street stuffs you up a lot and makes you angry at the world and angry at yourself.

Depression is key factor for most streeties.

Everyday I am aiming to keep my mental health together, trying not to get too high or too low, just keep on going on. It's important to talk to people everyday, just to say hello and to talk.

Exposure to drugs and alcohol and mostly being around people with complex and multiple issues were constant daily issues impacting on mental and physical health.

One of the hardest things is staying off drugs. I have been clean for a while but it's getting harder and harder because I am around it constantly on the street.

Participants reported that a lack of sleep due to the cold conditions, not feeling safe and any number of disturbances had a significant effect on their health and wellbeing. People often reported only getting a few hours sleep a night and then trying to get bits of sleep during the day – in the library for example.

Keeping your own self to feel normal is hard. I always feel a bit run down and unwell.

I sleep anywhere warm, a corner space. I have double pneumonia. I have been offered a boarding house but the landlord is awful and there are bedbugs.

I feel cold, feel lonely, isolated, rock bottom.

You don't really sleep at all – you get constantly woken up. Being on the street everyday life is a struggle and it takes a lot of effort.

Other commonly mentioned things that are hard to manage included:

- the weather especially the cold and the rain
- changing your clothes
- carrying luggage / belongings

- finding the right people to trust
- managing hygiene particularly for women
- keeping out of trouble, getting away from people who are trouble.

Being homeless is a hassle to get anything done – even going to the toilet. Everything people take for granted, we have to battle with.

If you live on the street, you revert (back) to crime.

4.9 Hopes and the future

In response to the question – 'Where do you hope to be in six months time?' – 48 people stated that they hoped to be in housing, to be in their own home. Many people associated having a job and having their mental health issues sorted out to be inclusive parts of their hopes of having a house.

I hope to have a job and a house and be a normal citizen.

I hopefully will get somewhere to live permanently. I have been on housing lists since I was 16 years old.

I would like to be in my own place, housing commission or private rental.

Hopefully in a house and not in jail.

Hopefully a house. Feels hopeless not having a house. The future feels hopeless.

Other people expressed no hope or thoughts about their future, expressing that they took things a day at a time and/or that they had given up.

Unless I get a place I will be doing the same stuff.

The waiting list for housing means that I will be in the same place.

Don't know, could be dead. Take it day by day.

After being in this situation for so many years, there is no hope.

4.10 Case Study

Jenny is 30 years old and has been homeless for 15 plus years...

'I have been sleeping in all sorts of places for over 15 years I often sleep in the backyard of empty houses because that is where I feel safer. In summer I go to the beach, that's my preferred place to sleep.'

Over the years Jenny has had a couple of offers of housing but it has not worked out. Jenny has also been in boarding houses, rooming houses, emergency accommodation and has used a range of services and supports including counselling, drug and alcohol programs, food services and recreation services.

'Generally (service) people treat you well, but I do not like some places where they ask too many questions and make you feel uncomfortable. I regularly go to a health centre for women's health. You can do your tests there, get free medication and feel like you are one of the people using the service, not just a homeless person.

Every time I am in accommodation I can't seem to cope but when I am on the street I feel a bit better. When you get housing, support services stop. My mental illness increases after I have been in housing and then I fall back into homelessness. I am addicted to living on the street because there are more services. But when you're homeless it devalues your life span. You are always worried about your stuff.

I think there should be counselling before you go to a house – is this the right place for you? how are you going to go at paying the rent?. Something like a living skills training – cooking, budgeting, shopping and ongoing support would be good. There needs to be a life program – teaching living skills, not just 'band-aid support'.

It is madness being homeless. I hope to be rehabilitated from madness and being homeless.'

For confidentiality names and details of this case study have been modified

4.11 Case Study

Rosie has been sleeping rough for five years

Rosie has been homeless since she landed in Melbourne five years ago. She currently sleeps on the street, moving between Elizabeth Street, Swanston Street and various alleyways and train stations. Rosie is very grateful for the support she receives – blankets, food, clothes and getting to use a shower.

During last week I got to stay at my uncles place for a couple of nights. I felt safe there but I can only stay there occasionally as there are problems. While I am there I feel safe and I can think about other things. Then I go back on the street and get into that mode again. I dread it. But I will get though. I always do.

Rosie would love to be in a house and do some normal things.

I would like to go to the movies, do some shopping for some nice clothes, it would make me feel a bit normal. But I do not have any money.

Rosie has recently partnered up and this makes her feel a bit safer. They have an appointment with an employment place and they hope this will help with housing.

In six months time I hope to be in a house and have my daughter back. We have lost contact.

For confidentiality names and details of this case study have been modified

Participants were encouraged to 'tell their story' about sleeping rough in whatever form they wished. 'Travelling with the four seasons' is one of the participant's contributions.

Presented with permission from the artist 'Sally' 2015

5. Findings: Life from week-to-week

StreetCount 2015 aimed to capture the daily-lived experiences of people currently sleeping rough and where possible to track this over a ten-week period.

Of the 83 people who participated in a first interview, 34 people returned for two or more interviews. These 34 people included males, females, people of Aboriginal and Torres Strait Islander backgrounds and people sleeping rough for various periods of time. Table 4 provides a breakdown of the people who returned for two or more interviews.

Table 4: Breakdown of 34 people who did 2 or more 'return' interviews

Male	Female	ATSI	Period sleeping rough				
			Less than 6 months	6-12 months	1-5 years	5-10 years	10+ years
24	10	10	8	5	7	1	13

Maintaining the contact with people over a ten-week period was challenging and the majority of people participated in only two or three return interviews. Some people participated relatively consistently over the ten-week period, others at random intervals. For most people their return interview occurred the following week and for others it ranged from two weeks to eight weeks. As anticipated, participants dropped out over the ten-week period, with seven people engaging in a total of five or more interviews.

Many factors impacted on the number of people involved in return interviews including:

- the transient nature of people who are sleeping rough
- the health and wellbeing of the person and their capacity to participate
- the persons interest in the research
- whether the person was at the Hamodova cafe at the time when the researchers were there
- the number of people who wanted an interview and whether the researchers were able to include all of the people who wished to participate on the day.

From the 34 people who participated in a 'return interview' (two or more interviews) there were a total of 89 interviews over the ten-week period. The findings of people's journey – week by week – are presented to draw out 'what changed for people over this ten-week period'. Some case studies are used to present some individual journeys.

Table: 5 Number of people by number of return interviews

Interview type	Number of people
A total of 2 interviews	11
A total of 3 interviews	11
A total of 4 interviews	4
A total of 5 interviews	2
A total of 6 interviews	1
A total of 7 interviews	0
A total of 8 interviews	3
A total of 9 interviews	1
Total return people	34

5.1 Key themes across ten weeks

Where do people sleep and for how long?

As identified in the first interview people slept in a range of places, with couch surfing, streets, parks, squats, under bridges, train stations, and alleyways being the most mentioned places. This situation stayed relatively the same over the ten-week period, with aggregate data for people participating in interviews two to nine indicating minimal change.

Graph 8: Where people have been sleeping interviews 2-9 (n=34)
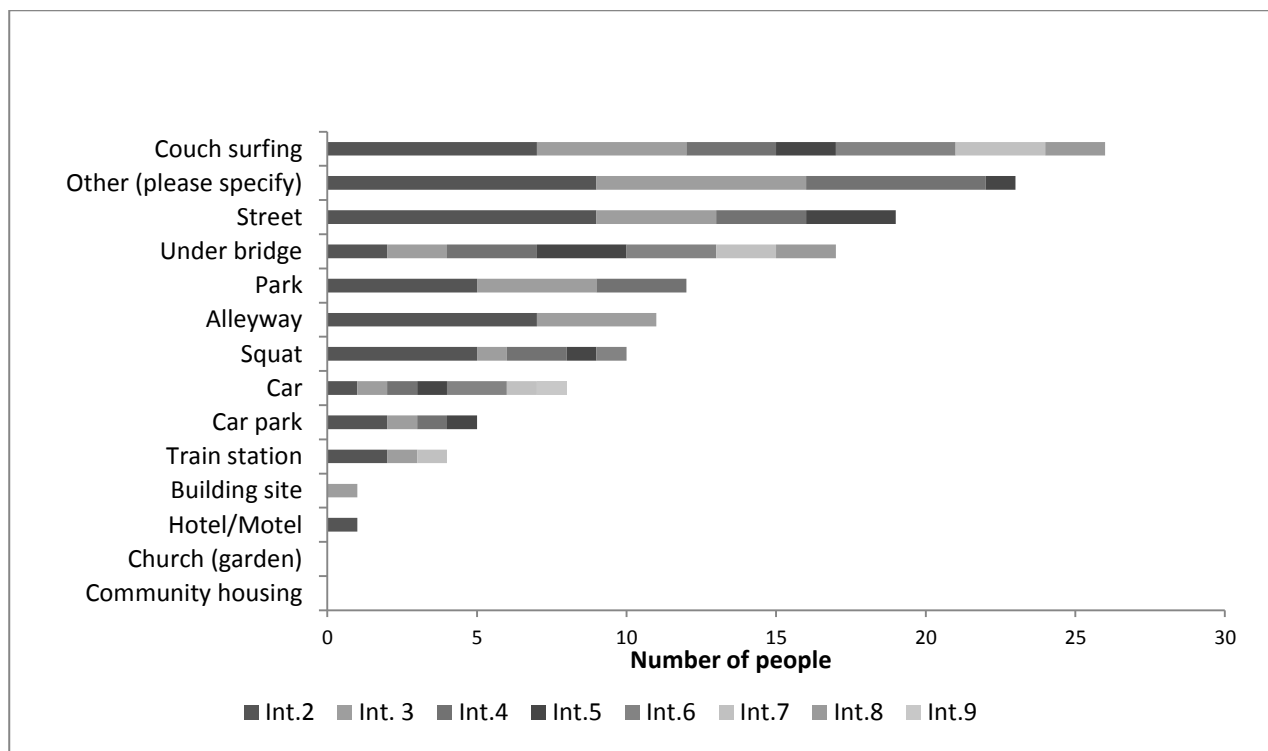
Most people continued to report changing where they slept every few days, again reporting safety as the main reason for this. A few people in their interviews mentioned they would prefer to couch surf or find a place that is more sheltered as the weather was becoming colder.

Looking after belongings

Looking after belongings continued to be reported as one of the hardest things about sleeping rough. During the ten-week period at least four people related having their belongings stolen.

Would like lockers for a few hours a day. That would help as I am carrying big bags around all day.

What is really hard is having no place to put my stuff. The (agency) removed my things. The (agency) notice said to contact them to get the stuff back but that has not happened. I lost my wallet with my ID.

Where we were squatting before, we lost everything. We had our stuff stashed in a car park. It was stacked up and it all got taken. Then we started again, slowly getting everything back.

Services used

At each interview people were asked about the services they had used in the previous week. A clear pattern emerged of service use. With the exception of a one-off service (for example a visit to the dentist, or the health centre) the services used were much the same each week.

Same services this week except I did not use health services this week.

Just the same everyday, just eat the food given to me.

Most people reported at each interview that the services they used were either 'helpful' or 'very helpful' to them. The need for more showers and laundry facilities was continually reported by over the ten weeks.

Need a lot more free laundry and showers for homeless people. The laundry is useless – you queue to get in. People on the street do not usually have change. Never-ending. A whole day if you are lucky to get in to the laundry or showers. While waiting, trouble starts, so you just end up leaving.

Filling in the day

Sport, physical activity and recreational activities, such as a bus trip to the country were nominated as things people would like to do, but were unable to, and these were reported often across the ten weeks. Others consistently stated throughout the ten-week period that they would like to be able to just paint and draw, 'do my art'.

I express myself through my paintings. Drawing on the street relaxes me. That is how I get rid of my pain. I would like to have somewhere where I could go to do art to express my feelings.

I have been going to boxing training at a gym on Flinders St. I have been learning boxing and kickboxing and I brought some of my friends from the squat to do the training. I could not do the computer course although I was been accepted into the course because I have no ID.

A few people mentioned that some of their days are taken up with legal issues, often involving attending court, going to a lawyer, getting their papers in order. One person regularly travels to New South Wales to attend court and has been doing this for over a year. Keeping track of your legal history, difficulties in attending appointments and having to present at court after sleeping on the street the night before were examples given of the added difficulties of dealing with legal matters while homeless.

Relationships with others

People continued to refer to their interactions with the community in general and between other people who are sleeping rough. Some examples of goodwill from people in the community included:

One woman left two Easter eggs for us.

Someone gave me $100 last night. Just a random person. This has only happened to me once before when I was seven and a half months pregnant and on the street.

Some people, in particular two ladies who see us regularly have encouraged us to keep going and get off ice. These people regularly give us some money and they have been very encouraging and positive and that has helped us keep going on getting off the drugs.

Melbournians are helpful people. This really sticks out - unique quality. 9/10 for helping people on streets. You can't starve - lots of food places around the city.

Safety

People continued to rate how safe they felt at each of their interviews. Over the ten-week period there were 74 responses to this question. Of these responses 36% rated their safety as 'a little safe or 'not safe', 55% rated feeling 'safe' and 8% 'very safe'.

You are always listening, you can't relax. You're living on 'egg shells'. Worried about staying in the city there is too much violence. A young woman came at 3 am in the morning asking can if she could sleep near us blokes. I had to say no. A guy near us has his sleeping bag burnt. That worried us.

I have my dog so he protects me. No-one can get near me when I am asleep. I am not going to give up my dog!

The security guard person is decent and is looking out for us.

Impact on health and wellbeing

People talked of a range of health issues that they were dealing with over the ten-week period. Mental health and drug and alcohol addiction in particular were referred to as ongoing struggles for many people sleeping rough. Anecdotal information shared in the interviews indicated that for many people it is a daily struggle to get out of a negative mindset. Other health problems continually mentioned include the impact of not sleeping very much – never getting a 'good nights sleep'.

Going about day-to-day things, dragging yourself to things and keeping your mind distracted is half the battle.

I would like my own life back. Got to go to court all of the time. Always looking over my shoulder. people fighting, bashing, vomit, suicide, burning cars, shooting people. I would like to live without fear.

During the ten-week period a range of health conditions were mentioned alongside the difficulty in accessing medical help. A few people reported having dental issues and not being able to access dentists. Access to adequate eye care and glasses was reported as difficult for some. A few people mentioned needing to regularly go to a doctor or hospital for their health conditions that included diabetes and cancer. Others stated that you generally do not feel healthy when sleeping on the street.

One of the hardest things for me is getting sick. It is hard to get well again when you are outside all the time.

I need to get to a dentist. I have been on the waiting list for many years.

I have broken my glasses but I am not eligible to get another pair yet. I need to wait another 12 months before I can get another pair.

I have a chest infection but I won't go to the doctor, it's not a doctor problem. The last doctor I saw would not give me a prescription. I bought tablets with the money that I got from the last interview.

I visited the hospital to get an ultrasound and got to see my baby.

A few people related being well connected to health services and regular attenders at a community health centre for doctors and allied health.

I have been to the podiatrist at the community health centre. I have had a bone spur for about a year. It is very painful. They were great. They gave me information about stretches, will get orthotics for me and they will pay to replace my shoes.

5.2 What changed?

For the people who continued to participate in multiple interviews (2+ interviews) week-after-week they generally reported that overall their daily life remained relatively the same.

Nothing really happening - just sleeping on the street. 'Sleepy Streety Week'. Bed when the sun goes down, and get up when the sun comes up. Get stoned and chill out. Helps you get a good night's sleep when you are stoned. Have a laugh, fall asleep.

Same shit, different day.

Just want somewhere to sleep. Don't want a TV etc, just somewhere to sleep. I often do house sitting, but there's nothing coming up at the moment. If I could start the day with a shower I could do other things. I was given a bike - but can't keep it. Had to give it away. Someone was going to get me a ticket to the City baths but I have to get the pass and give it back - but the person at that (agency) that I had to be in contact with went on leave.

The weather was a factor that many people discussed in their interview, in particular the cold, rain and wind. Night temperatures over the ten-week period ranged from two degrees to ten degrees.

Cold – has been cold lately. Had to use my sleeping bag as a guard this week and cardboard windbreak.

It's getting really cold. Getting colder quicker and for longer. Dark quicker. Better when there is cloud cover – it's not as cold.

It is getting too cold out there when you wake up you feel like you can't move.

During the ten-week period some people referred to something important that had happened to them during the week. These personal 'changes' included a range of situations and/or anticipations about getting employment, reducing drugs, seeing family, travelling interstate or addressing their housing situation. Some individual examples are illustrated below.

For me everything has been the same except I am drug free and eating heaps. Put on heaps of weigh. Getting properly hydrated. Now I wake up hungry. Used to not eat for the whole day - now I need breakfast, lunch and tea.

I got information I did not have. I put my name down for things, such as housing, but nothing has come of it. Waiting for (agency) to do something – I have had a couple of interviews for it.

I got a phone call from my daughter, had not heard from her since Christmas - had lost touch.

There were only three people during the ten-week period reporting that they were no longer sleeping rough and had managed to secure some form of accommodation. These individual stories are presented in part 5.5 – Moving out of sleeping rough?

5.3 Snapshot of some individual journeys

Male Homeless for 12 months

Week	Lowest degrees @ 4am	Sleeping Arrangements	Services Accessed	Services helpful	Safety	Hopes
1	6°	Car	Breakfast Lunch Food vans Showers /laundry Mental health Public transport Library	Not helpful	A little safe	Better housing Better mentally
2	10°	Car	Same	Helpful	A little safe	Housing
3	6°	Car	Same	Not helpful	Not safe	No longer hope to find housing
4	Did not see					
5	9°	Car x 5 nights Couch x 2	Same	Helpful	Safe	A house
6	7°	Car	Same & Centrelink	Helpful	Safe	More positive about housing
7	4°	Car x 6 nights Hospital x 1	Same & hospital	Very helpful	Safe	Stable housing
8	9°	Car x 6 nights Train station x 1	Same	Very helpful	Safe	Don't know
9	Did not see					
10	2°	Car	Same & housing agency	Very helpful	Safe	Hopefully a house

Female homeless for 6 months

Week	Lowest degrees @ 4am	Sleeping Arrangements	Services Accessed	Services helpful	Safety	Hopes
1	6°	Car park	Breakfast Lunch Food vans Day Centre Public transport Showers/laundry	Very helpful	A little safe	A home
2	10°	Move around Under bridges Parks ,Streets	Same	Very helpful	A little safe	No comments
3	6°	Same	Same	Very helpful	Not safe	Housing
4	Did not see					
5	9°	Same	Same & housing agency	Very helpful	Not safe	Home and a job
6	Did not see					
7	4°	Same	Same & job agency	A little helpful	Not safe	Have a BBQ
8	9°	Same & Couch x1	Same	No comment	A little safe	Not hopeful
9	Did not see					
10	2°	Same & Couch x 2	Same	Helpful	A little safe	May have an offer of a room

5.4 Hopes and the future

Week-after-week, most people hoped to be in safe, secure and stable housing in the future. 'A roof and four walls' was continually repeated in response to where do you hope to be in six months time.

> *I hope to be in a place/accommodation – so that I can have the grandchildren when they come down.*

> *Need more places for emergency accommodation. Lots of places say they do emergency accommodation, and when you get there they are referral services.*

> *I believe that private rental is too expensive for people on low incomes - landlords should get a discount on land tax, water rates etc for renting to people on low incomes. This might help getting more affordable housing.*

Some people talked of being stuck and in the end just giving up. One participant described his previous year in the homelessness system as:

> *When you are first on the street you get offered a couple of nights in a hotel. Then this runs out, the funds run out and you find your way to a crisis centre. You are then offered one night in a room. That night there is a lot of yelling, fights, cops in and out, someone over-doses, someone is bashed. Next day you go to another housing service and start again.*

> *You work you way around the circle a couple of times and then give up. I look back a year ago and it's still the same for homeless people.*

A person who has been homeless for five years described the frustration as:

> *You cannot understand what it is like to be homeless unless you experience it - but as the hours go on from morning to evening to night and experiencing it over and over again its hard to explain entirely how it feels emotionally. How many times do I have to go to (agency) round and round to housing workers. Go around on merry go round. Some of us want change. Only going from one housing place to another. Waiting list is ridiculous. We are the lower society.*

Other hopes expressed by people included:

- to be in employment
- to lead a normal life
- to be able to finish schooling
- to get back with my children
- to be better mentally.

5.5 Moving out of sleeping rough?

Over the ten-week period, the researchers heard only three stories of people who were no longer (at least for the moment) sleeping rough. As mentioned earlier however, the pathways for the many people who did not continue with interviews are unknown.

The stories of the three people we know of are presented in their own words below.

Female – homeless for less than 2 weeks

I have been one and a half weeks on the street with my husband. Last night we met someone on the street and he said we have a room. An old fellow – we felt we could trust this man. Met him a few times at the food van. Went back to his house four days ago. Paid our rent of $150 per week for 2 people. He eats at food van and is known to food van people.

Female – homeless for 10 years

I got a room! I have been sleeping in a laneway near the laundry. I stay there for security. It's got cameras. I am getting a job in the laundry and can work at cleaning the rooms. Start next week. Get a uniform and room that gets taken out of my pay. They saw me working hard to clean the lane for the hotel. They noticed it and gave me a job.

Male – homeless for 20 years

Things have really changed. I got a house through Salvation Army (Magpie Nest house) and life has gotten a lot better. I still come to the Salvos for breakfast. I saw a Mental Health nurse and got an assessment – now I have got a Case Manager and we have set out a big plan – I will be volunteering a few days a week, and going back to school – Year 12 again. Also doing a graphics course.

The house is five minutes from the train, everything is close by. I have to share the house with some people – but I am happy to share. My housemates do not do drugs or alcohol and they keep the house really clean. As long as I follow my case plan, I can stay there as long as I like. I cover the bills. Food is still an issue at home – we don't have much.

I will still drop in at the Salvos. They have given me the world – a smile on my face. It's years since I smiled and it's a nice feeling. I am from Melbourne. It's a home – that's all I care about.

6. Findings: What would make a difference?

Throughout all of the interviews, people raised a number of ideas and suggestions regarding what would make a difference to them. In addition the focus group explored issues raised throughout the interviews and participants discussed their thoughts on possible solutions. These ideas and suggestions are presented below.

6.1 Ideas for supporting people to move out of sleeping rough

Housing

Housing was the most commonly reported factor that would make a difference to people sleeping rough.

Suggestions included the need to provide support services with housing, the need to match-up people for suitability of sharing / rental accommodation, the need to have a long-term housing solutions, the need to have more than just short-term solutions.

Example Individual suggestions:
▪ Permanent housing – not just bits and pieces of accommodation – permanent housing. Services are helpful but we need accommodation.
▪ Need to supply more housing in the areas we want to live in.
▪ Need to help people get accommodation. Should work through (all the issues) until they are settled. The (agency) program, after eight weeks you are back on the street. We get sick of telling the stories. If we could get housing and counselling that would be good.
▪ We need better screening of people. Background checks and then prioritise people in housing based on this information.
▪ Housing places take too much money. While they are putting you up in a hotel – why can't they put this money into a bond?

Improve health and wellbeing of people sleeping rough

People talked about the struggle with their health and wellbeing. This included health issues due to lack of sleep, drug and alcohol misuse, mental health, depression and having nothing to do.

Suggestions included having greater access to recreation, sport and sports facilities such as gyms, basketball courts, ovals. A few people reported that they would be interested in doing art and participating in creative activities. These activities would help people keep mentally and physically active and reduce the boredom and dependency on drugs and alcohol.

Accessing medical attention when you need it such as doctors, dentists, eye care would improve people's capacity to look after their health.

Example Individual suggestions:
▪ Have greater access to bulk billed doctors, including on the weekends.
▪ Have a pay back system for dental work.

6.2 Ideas for supporting people while sleeping rough

Improve (practical) support for people sleeping rough

Improving access to common daily support needs included improvements to showers, lockers and laundry facilities and weekend services. Suggested food services improvements included having more fresh food, more vegetarian food, and better food services over the weekend.

On a daily basis when people are just dealing with getting shelter, food, a shower, looking after belongings and walking around all day, there is limited capacity for addressing any other needs such as trying to get a job or trying to find housing.

Example Individual suggestions:
- Have access to affordable 24/7 lockers at train stations.
- Increase access to lockers through the libraries.
- Having more showers attached to places such as the Salvation Army.
- Have more food services options, in the city over the weekends.
- Have a place where people can go to relax in the afternoon and on weekends
- Have a women's space or a place where women can go and relax.
- Have some shelters where people can go and be sheltered from the rain and cold.

Better access to information about services and activities would help people sleeping rough.

Example Individual suggestion:
- Have a weekly 'What's on' information board at the places where people sleeping rough frequent.

Better coordination of services

People reported a need for having better coordination between services so that you don't keep going around and around the different services.

Example Individual suggestions:
- There needs to be more case-workers and more coordination between services.
- Organisations need to talk more to each other.
- Having a register of homeless people would be good. That would help to get your (personal) information back if you loose your documents and ID.

6.3 Ideas for supporting personal development

Suggestions regarding personal development included supporting people to return to school to finish their education, supporting people to enroll in courses and supporting people to improve their living skills.

6.4 Case Study

Tom talks about his pathway out of homelessness...

Tom has been sleeping rough, and in boarding houses, long term. He currently has accommodation through 'housing choices' – but has a story about how this could have been different if the right services had not stepped in at the right time.

After Tom was kicked out of home, the police picked him up and put him in a hotel. "*They gave me a referral and helped me out with one week's rent. That's what I needed at the time and I got through. I got pretty lucky.*"

It was tough getting housing, and Tom spent time in a lot of different boarding houses feeling safe, but cramped.

"*In a boarding house you feel like you are in a shoebox and you have to get along with the neighbours/other borders. A lot of people in a small space, arguments arise. You can't leave any food around. You can't leave anything in the fridge. You can't avoid stepping over each other, the room is very small and you have to share everything else. It's not good but I toughed it out for a while.*

Tom thinks boarding houses are good short-term, but longer-term he "lost the plot." Tom ended up in a fight, which resulted in him having his leg amputated; he spent the following months in hospital and rehabilitation.

"*With the hospital system, I got looked after so well and spent several weeks in the trauma unit then 6 weeks in rehab. My amputation and wheelchair were all paid for. Really generous health services at the Royal Melbourne Hospital. Rehab was at Royal Park – it was awesome, I really got looked after.*

Then when rehab was nearly finished I had nowhere to stay. I had a week to find somewhere that was wheelchair accessible. The rehab were not going to throw me out on the street, but they made it clear that I had to try and look for housing as well. My internet was prepaid so I looked for housing on the internet.

A social worker stepped in and hooked me up with 'housing choices'. The place is accessible, completely decked out for a wheelchair.

Took me months after I left rehab to walk. The Red Cross used to come and pick me up and transport me to appointments. Then once I was walking, I was pretty much independent. I have to take a lot of pain medication. Now I take methodone for pain management. It is helpful, accessible and affordable.

I am on the DSP which is a lot easier. However, I sometimes struggle getting scripts, medicine etc. I get short of money. I come to the Salvation Army when I have spent all of my money. I have been to the Salvation Army for food a few times when I have been in financial strife. It keeps me going through the difficult patches.

I have had good luck with services. Melbourne is awesome. The police are helpful – they will direct you to certain places and give you information about services."

For confidentiality names and details of this case study have been modified.

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7. Conclusion

StreetCount 2015 engaged 83 people currently sleeping rough in Melbourne. Over a period of ten weeks, while located at the Salvation Army's Hamodova café, researchers listened and documented many stories of life, day-to-day, week-to-week for people sleeping rough.

People who participated in the research came from all walks of life, backgrounds and age groups. A significant number (24 people or 29% of participants) reported that they had been sleeping rough for more than 10 years. Although not formally asked about their family situation, through their stories people mentioned that they were grandmothers, grandfathers, mothers, fathers, sons and daughters.

Participants reported sleeping in a range of places around the city – train stations, parks, under bridges, squats, streets, alleyways, doorways and friends' couches to name the most common. Most people moved their sleeping spot every few days, generally to try and feel safer. People feel lucky if they find a place of their own (the back of a building site, in a stairwell, in the bushes near the Zoo) where they can stay for a few days, undiscovered.

Day-in and day-out, week-by-week, not a lot changes. For most, each day is taken up with finding food and shelter, packing up / stashing belongings or carrying them around. Dealing with violence, drugs, alcohol, sickness and depression are common issues. Having to keep going, trying to maintain mental health and mindset, and 'fill in each day' are everyday challenges. For some, alcohol and drugs are taken to help cope or take the pain away.

> *How else do you make sleeping on concrete feel ok?*

The cumulative impact of little sleep, or sleeping whilst 'on the look out', dealing with the weather, never having anywhere to close the door and relax, and constantly never feeling really safe, takes a toll mentally, physically and spiritually. This is often in addition to carrying complex and long-term problems and personal histories including trauma and abuse.

> *I saw my father shot in front of me when I was eight. My family didn't cope and by the time I was thirteen I was out on the street – dealing heroin, before I even knew what it was.*

In general, people regularly use a range of services everyday or most days – breakfast / lunch at a centre, food vans in the evening, showers and laundry services (at least a few times a week). On the whole people found that the daily support services were 'helpful' or 'very helpful' to them.

Seeking housing or accommodation was a source of constant frustration and challenge. Going around and around the homelessness services, feeling stuck, not seeing any way forward, or how anything will change, was common for many of the people sleeping rough.

> *There are so many people needing help and not enough people to do the follow-up. Services want to hear your story but not follow-up. We give up on ourselves sometimes, but you just need one person to believe in you and stick by you. Our friends can't support us because they are down.*

Acknowledgement is made of the complexity of 'how best to support people to move out of sleeping rough and homelessness' including finding the balance between providing support while rough sleeping and/or providing support to move out of homelessness. The people we spoke to felt that having more showers, laundry facilities, weekend services, access to sport, recreational and art activities, would improve their daily-lives.

Some people wanted more sheltered areas for sleeping. Some recalled there use to be church halls where people could sleep, or sheltered places which are now taken-over by cafes and gentrification. Again the complexity of the situation is challenging – issues with safety, disruptive behaviour and exposure to drug and alcohol when a lot of

people are sleeping rough in the same place. These issues were often given as the reason for constantly needing to move where you slept.

The worst case scenario would be a tent city.

At the same time, on a day-to-day basis, human contact is usually with other people sleeping rough. Looking out for each other and helping each other out, particularly for new people on the streets, was described in many examples. On the other hand – the need to be alone, not knowing who to trust, or not knowing when a problem may erupt, are daily factors for many people.

The same dichotomy was reported when referring to contact with the public in general. Examples of goodwill were many however, these were alongside stories of cruelty and feelings of being ignored and demeaned. Families were not part of many people's lives, with only a few people in contact with family.

Most people wanted to be 'in a home' in six months time. Some people did not have any hopes. Three people over the ten-week engagement period reported success in obtaining some form of housing or accommodation, at least for the meantime. The destination of many others (who were only interviewed once or who did not return for further interviews) is unknown.

Participating in the StreetCount research was a chance to share their story, especially to a non-service provider – It is good to let people know what it is like on the street. During the focus group however, while participants thought it was good to do research, they strongly felt that something needs to be done with the data.

The survey gives you something to look forward to. Its been very good, helps me get stuff off my mind.

Good to talk about being on the streets and want to see what comes out of it – otherwise there is no point in doing it.

People's stories provided an insight into the daily-life of people sleeping rough in Melbourne and their views on what could make a difference. There was no significant difference between males and females in the data we collected with the exception of some of the women feeling safer if they were with a partner. The information highlights the vulnerabilities of this population group as reported in previous research and by homelessness services. It also points to the need for housing and wrap around services – consistent with current homelessness policies and service directions.

The universal right to safe and secure housing, is more than a roof over one's head. As outlined in *Pathways: City of Melbourne Homelessness Strategy* 2014-2017, the City of Melbourne has many opportunities to work towards reducing homelessness in Melbourne.

We should not be on the street. We are meant to be one of the best countries but everyday we see a new person who is homeless. It is getting worse. Each day we come across a new person who is homeless. No one gets to leave the streets. Always the same faces, and then the new ones on top of it.

Attachment 1: Literature review sources

Melbourne/Victoria specific research

Ageing in what place? The experience of housing crisis and homelessness for older Victorians Final report

Hanover 2011

Ageing out of place: The impact of gender and location on older Victorians in homelessness A Pilot Study. Hanover 2011

Exploring Primary health Care Needs, Welfare requirments and Service Use of People Experiencing Homelessness within Melbourne's CBD and Inner Suburbs Melbourne General Practice Network January 2012

Evaluation of the Melbourne Street to Home program: Final Report. Melbourne, HomeGround Services. Johnson, G. & Chamberlain, C. 2015

Homelessness Research Project Stage one City of Melbourne July 2007

Homelessness Research Project Stage two City of Melbourne December 2007

Homelessness Research Project Stage three Final report City of Melbourne October 2008

Living Rough in Melbourne StreetCount 2013 City of Melbourne September 2013

Many Ways Home Women and Homelessness in Melbourne Final report City of Melbourne August 2014

Mapping services for rough sleepers in Hobart, Canberra and Melbourne Nicola Wylie and Guy Johnson RMIT university June 2012

This is not Living Chronic homelessness in Melbourne Guy Johnson AHURI RMIT, and Nicola Wylie J2SI Sacred Heart Mission 2011 (the first in a series of reports)

Women's Homelessness Prevention Project – two month snapshot. Justice Connect Homeless Law June 2014

Australian research

Census of population and housing: estimating homelessness ABS Cat. No.2049 Australia 2012

Emerging trends VI – SPADT Rough Sleepers (QLD) 500 lives, 500 homes Fact Sheet 2014

Housing insecurity and precarious living: an Australian exploration Kath Hulse and Lise Saugeres Australian Housing and Urban Research Institute (AHURI) 2008

How homeless men are fairing: Baseline report from Michael's Intensive Supported Housing Accord (MISHA) Mission Australia 2012

It Could be you: female, single older and homeless Ludo McFerran 2010

Older Women's Pathways out of Homelessness in Australia Report for the Mercy Foundation University of Queensland February 2014

Journeys Home A longitudinal study of factors affecting housing stability Research Report No.6 By Andrew Bevitt, Abraham Chigavazira, Nicolas Herault, Guy Johnson, Julie Moschion, Rosanna Scutella, Yi-Ping Tseng, Mark Wooden and Guyonne Kalb May 2015

Mental Health and Homelessness Final Report Dr Lauren Costello, Dr melanie Thomson and Dr Katie Jones for the Mental Health Commission of NSW June 2013

Rough Living Surviving Violence & Homelessness Catherine Robinson University of Technology Sydney 2010

Specialist Homelessness Services 2011–12 Cat. No. HOU 267 AIHW

Thunder in the soul: Experiences of sleeping rough and interventions in three Australian locations Eleanor Button and Jo Baulderstone Flinders University of South Australia 2013

Attachment 2: Project methodology

Recruitment

The target group for the research was people who are currently sleeping rough in the city. On a weekly basis over a ten-week period three researchers were located at the Salvation Army Hamodova Café during the breakfast and lunch service where between 100-200 people attend every day. The researchers approached people to explain the research, establish if they were sleeping rough and invite them to participate in an interview or conversation about their daily life experiences. From the second week onward, people were approaching the researchers requesting to be included in the research. On some weeks the researchers were unable to include all of the people who wanted to participate.

Interview/discussion setting

The interviews/discussions took place at tables located in one area of the café. This enabled participants to still access breakfast and lunch whilst participating and provided a level of openness and safety for the researchers.

Consent

All participants were explained the purpose of the research and how the information will be used and were provided with a plain language statement prior to signing a consent form. For people who participated in more than one interview/discussion, the purpose of the research and their prior consent were revisited prior to commencing. See Plain language statement & consent form

Interview/discussion tools

A range of interview/discussion instruments were used to capture a verbal account of participants stories including a structured survey and open discussion led by the participant .With the aim of the research being to capture people's own stories, the interview/discussion tools were used to facilitate this. While most participants choose to follow the survey schedule, a few participants chose to tell us a descriptive account of their story and others provided their story through photos and paintings. See interview schedule.

Eight participants who have been involved in five or more engagements were invited to participate in a focus group. The focus group explored the key issues raised throughout the ten-week research period and discussed possible solutions and pathways out of sleeping rough. See focus group schedule.

Recording

The interviews / discussions were recorded (written down) by the researcher. The possibility of (audio) recording participants information was discussed prior at the outset of the project, however the research team deemed this as not necessary and not suitable in the open setting where the interviews/discussions were taking place.

Reimbursement

All participants were reimbursed $20 per interview/discussion/engagement. Focus group participants were provided with an additional $30 supermarket voucher.

Analysis

The data collected through the project was analysed utilising a thematic analysis to draw out commonalities across the data and identify key themes and findings.

Plain language statement

StreetCount 2015 Qualitative research into the daily lived experience of people 'sleeping rough' in the CBD

INFORMATION SHEET FOR PARTICIPANTS

Why are we doing this research?
The City of Melbourne is conducting exploratory research with people who are sleeping rough in the city in order to gain a better understanding of the day-to-day lives of people sleeping rough. A better understanding of rough sleepers daily experiences, issues, concerns and challenges will assist Council's work in helping to address the needs of rough sleepers in the city.

Who will be doing this research?
Effective Change, a research company are responsible for conducting the research on behalf of the City of Melbourne. Effective Change has an experienced team of researchers who will be conducting the interviews in the city over the next few months (March – June 2015) with people sleeping rough.

What will it mean for participants?
People who are currently sleeping rough in the city are invited to participate in the research. With your consent, you will be asked if you wish to participate in a short interview or to have a chat about your life at the moment.

We would like people to participate in the research over a number of weeks with up to ten interviews. The interview or chat can take place somewhere that is convenient for participants, however usually this will take place at one of the services you are attending.

Participation is completely voluntary and you do not have to answer any questions that you do not want to.

A payment of $20 cash will be given to each participant on completion of each interview or chat.

How will the information be used?
The information collected in the research will be compiled into a report by Effective Change for the City of Melbourne.

Privacy
The information you give us will only be used for the purposes of the research project. Your information will be treated as confidential and no names or identifying information will be used in any of the research reports.

Questions:
If you have any questions please call Nanette Mitchell at the City of Melbourne: 9658 9920 or Email: nanette.mitchell@melbourne.vic.gov.au or
Katherine Wositzky from Effective Change: 9388 1661

Docs.ref.9039729

Consent form

CITY OF MELBOURNE
STREETCOUNT2015   **Consent Form**

The City of Melbourne is undertaking qualitative research with people who are sleeping rough in the city as part of the StreetCount2015.

Your participation in the research is voluntary and your access to services will not be affected. You do not have to answer any questions that you don't want to. Just let me know and we can skip it. We can also take a break any time you like.

All of the information collected from participants is anonymous and confidential.

The interview will take somewhere between 45 minutes and an hour.

Please read the attached project 'Information sheet for participants' before signing this consent form

INFORMED CONSENT
I have read the Information sheet for participants and understand the purpose of the interview.
I agree to participate in the study.
I understand that I can withdraw from the interview at any time.
I understand that data from the survey will be used by the City of Melbourne in the ways identified in the project summary.
I do/ do not agree to the interview being recorded

Name: ....

Signature: ....Date: ....

Participant ID (initials and date of birth).......................................

Name of interviewer:...
Date of interview:..
Location of interview:..

If you have any questions please contact: Nanette Mitchell, City of Melbourne,
Ph: (03) 9658 9920 Email:nanette.mitchell@melbourne.vic.gov.au

REF#9039694

City of Melbourne ethics statement

City of Melbourne StreetCount 2015

STATEMENT OF ETHICS

1. StreetCount2015 Overview

The City of Melbourne will conduct its eighth StreetCount of people sleeping rough over the months of February to June 2015. StreetCount2015 aims to collect accurate and up-to-date information about the experience of people sleeping rough in parks, streets and other main areas of the city. StreetCount2015 will also enable a comprehensive comparison with the findings from previous StreetCounts. Findings from the study will assist the City of Melbourne to plan, develop and make decisions about appropriate long-term solutions to homelessness.

2. Guiding Principle

All staff involved in StreetCount2015 will receive relevant briefing, training and/or instructions prior to participation. They will be expected to use a human-rights based approach when interacting with people experiencing homelessness - an approach which:

- ♦ is empowering
- ♦ is respectful of people's rights and treats everyone with dignity
- ♦ encourages participation
- ♦ is inclusive
- ♦ builds on people's strengths and knowledge of their own lives.

3. Confidentiality

All personal information collected will be kept private and confidential. It will not be possible to identify rough sleepers from the survey, or from the voluntary identification code. The actual location of rough sleeping places will not be passed on to other areas of Council or the police. Data analysis of StreetCount2015 will be provided in a collective form and individuals will not be identified.

4. Informed Consent

Research staff conducting the surveys will give a brief verbal explanation of the StreetCount. Written consent to proceed with the survey will be recorded on the survey form. Separate verbal consent will need to be given for the voluntary identification code.

5. Duty of Care - Safety and Risk

The safety of all participants and staff is paramount in StreetCount. The research will be conducted in a way that minimises risks to all participants.

In case of an emergency, where research staff notice a person is in need of urgent medical/other attention, or are at risk of harming themselves or others, contact will be made with appropriate emergency services such as the ambulance or police. In such emergencies 'duty of care' takes priority over confidentiality.

6. Results of StreetCount2015

A report on StreetCount2015 will be prepared discussing findings to assist council in responding to the needs of people experiencing homelessness. It is anticipated that the City of Melbourne will provide a report on the StreetCount2015 findings in the second half of 2015.

7. Questions

If you have any questions or concerns regarding StreetCount2015, please contact Nanette Mitchell, City of Melbourne Phone: 9658 9920 Email:Nanette.Mitchell@melbourne.vic.gov.au

Docs. ref. 9039687

Interview schedule

StreetCount 2015 INTERVIEW SURVEY TOOL

StreetCount 2015 qualitative research participant registration form

Name they wish to be called by:................................. ID Initials: ....

Date of birth: Month............................ Year............................

Gender: Male ☐   Female ☐   Other ☐

Country of birth: ....

Do you identify as Aboriginal or Torres Strait Islander?   Yes ☐   No ☐

Are you on the public housing waiting list?   Yes ☐   No ☐

If yes, how long have you been on the public housing list?.................................

What is your main source of income?..

Does the participant wish to continue in future interviews?

Yes ☐   No ☐   Maybe ☐

Other comments

SLEEPING ROUGH AND SERVICES USED

Participant ID (initials) .... Date of birth.....................................

Name they wished to be called by:..

Date of interview...................

First engagement/interview ☐   Period since last interviewed:..........days

1. Can you tell me about where you have been sleeping in the City over the past days/week?

Which night/s	Where	What type of shelter
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........
		☐Park ☐Car ☐Street ☐Squat ☐Train station ☐Other.........

Any other comments about where sleeping rough...

1.1 For how long you have been sleeping rough?

On and off for:

☐Up to one week ☐Up to one month ☐1-6 months ☐6-12 months

☐1-2 years ☐2-5 years ☐5-10 years ☐10+ years

Consistently for:

☐Up to one week ☐Up to one month ☐1-6 months ☐6-12 months

☐1-2 years ☐2-5 years ☐5-10 years ☐10+ years

Other/ any comments

2.   Have you used any services or are you planning to go to any services today?

☐Yes ☐No ☐Not sure

   If yes what services? If no any reason why not?

2.1 Over the last few days/past week what services have you used?

What service?	How often did you use this service?
Breakfast at a centre	☐Every day ☐A few times ☐Once ☐Did not use
Lunch at a centre	☐Every day ☐A few times ☐Once ☐Did not use
Dinner at a centre	☐Every day ☐A few times ☐Once ☐Did not use
Food vans	☐Every day ☐A few times ☐Once ☐Did not use
Health care service	☐Every day ☐A few times ☐Once ☐Did not use
Hospital	☐Every day ☐A few times ☐Once ☐Did not use
Dentist	☐Every day ☐A few times ☐Once ☐Did not use
Drug and alcohol service	☐Every day ☐A few times ☐Once ☐Did not use
Day centre/drop in centre	☐Every day ☐A few times ☐Once ☐Did not use
Centrelink	☐Every day ☐A few times ☐Once ☐Did not use
Job search/employment	☐Every day ☐A few times ☐Once ☐Did not use
Showers/laundry	☐Every day ☐A few times ☐Once ☐Did not use
Legal service	☐Every day ☐A few times ☐Once ☐Did not use
Public transport	☐Every day ☐A few times ☐Once ☐Did not use
Library	☐Every day ☐A few times ☐Once ☐Did not use
Other (specify)	

2.2 How helpful to you were the services that you used?

   ☐Not helpful ☐A little helpful ☐Helpful ☐Very helpful

Any comments about the services

2.3 Over the last few days/week were there any services that you needed but you couldn't get? (Provide detail of which services and/or why services were not accessible)

3. **What have your days been like over the last few days/week? Have you participated in any of activities such as:**

Activity/	How often?
Socialised at a centre	☐Every day ☐A few times ☐Once ☐Did not do this
Socialised with friends	☐Every day ☐A few times ☐Once ☐Did not do this
Socialised with other people sleeping rough	☐Every day ☐A few times ☐Once ☐Did not do this
Visiting family/friends	☐Every day ☐A few times ☐Once ☐Did not do this
Spent most of the day just dealing with getting food and shelter	☐Every day ☐A few times ☐Once ☐Did not do this
Went to a swimming pool	☐Every day ☐A few times ☐Once ☐Did not do this
Went to the movies	☐Every day ☐A few times ☐Once ☐Did not do this
Other	

3.1 What activities would you like to be doing that you are not able to?

4. **Over the last few days/week how safe have you felt?**

Not safe   A little safe   Safe   Very safe
☐   ☐   ☐   ☐

Any comments

4.1 As a rough sleeper what is needed to help you feel safer?

5. **Can you tell me about the things that have happened to you this week that have been important to you? What were they?**

5.1 What are some of the hardest things that you have to manage when you are homeless and/or sleeping rough? What could make it easier?

5.2 Are there some good things that have happened to you over the last few days/week, or some good things about sleeping rough?

6. **Where do you think you will be in six months time? Where do you hope to be in the future?**

7. **Any other comments (participant or interviewer)**

Focus group schedule

STREETCOUNT 2015
Pathways out of homelessness

Sleeping rough focus group

Tuesday 2nd June 10-30 am- 12 pm, The Salvation Army, 69 Bourke Street Melbourne

Agenda

1. Introductions
2. What we will do today
3. Reiterate consent to participation previously given, privacy of information, how the information will be used

4. What was said in the interviews

    a. How many people we spoke to
    b. How many interviews
    c. The key issues raised by people sleeping rough

5. Are there any other issues that people want to add?

6. Issues discussion – What can be improved for people while they are sleeping rough?

    ▪ **Storing belongings**
    Why is this an issue or why does the current storage/ lockers system not work?
    What would be some good solutions for people who are sleeping rough to be able to store their belongings?
    What needs to happen?
    Where should they be located?

    ▪ **Access to showers**
    What are the specific problems?
    What could be done to improve access to showers?
    Where should they be located?

    ▪ **Access to services at the weekend**
    What support is needed over the weekend?
    What are the most important services that you need over the weekend?
    Where should they be located?

    ▪ **Wellbeing and keeping healthy**
    Can you get access to a doctor when you need it?
    What could be improved?
    Can you get access to dentist/eye specialist/ podiatrist etc when you need it?
    What can be improved?

    ▪ **Activities and keeping mentally and physically active**
    What are the barriers to keeping mentally and physically active for people who are sleeping rough?
    What needs to happen?
    What could be improved?

7. Issues discussion – What steps/supports are needed to help people move out of sleeping rough to more secure accommodation?

8. What has participating in this research been like for you?

    Have there been any benefits for you?
    Have there been any difficulties for you?
    How could we improve this in the future?

9. Any other comments?