



CATHOLIC COMMISSION FOR
**JUSTICE,
DEVELOPMENT
& PEACE**
MELBOURNE

SINGLE WOMEN AND HOMELESSNESS - WHICH WAY IS HOME?

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Brooke: *You just feel it's a real shame job, you just don't want to tell anyone, you just don't.*

Interviewer: *You feel uncomfortable about it?*

Brooke: *Yeah really uncomfortable, it's because of the stigma homeless people are all scumbags and that's not true.*

ABOUT THE CATHOLIC COMMISSION FOR JUSTICE DEVELOPMENT AND PEACE

The Catholic Commission for Justice Development and Peace Melbourne (CCJDP) aims to help educate and give leadership to the Catholic and wider community in the gospel message of justice and in the social teachings of the church. The Commission's Charter requires it to work for justice in public, local and national structures. It seeks to achieve these ends through research, analysis, working with parish networks, public forums, in schools and in the media. It actively seeks to explore ways that social justice can be improved in society and in the performance of mechanisms that have a role in public life. This Occasional Paper is the eleventh in the CCJDP's series. This Occasional paper builds on the joint report by the CCJDP and Catholic Social Services "A Voice for the Silent Strugglers- towards a Social Just Housing Option" [1997].

CCJDP thanks Sue Casey, Carol Vale, Belinda Bannerman, Tony McKosker, Netty Horton, the Catholic Homeless Network and Catholic Social Services.

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FOREWORD

WOMEN AND HOMELESSNESS - A HUMAN RIGHTS APPROACH

Marc Purcell, Executive Officer

Homeless single women are invisible in our society, not least in the failure of official statistics to adequately record their presence. This paper seeks to remedy this lack of official attention and put the plight of homeless single women firmly on the agenda of Government and Non Government Organisations. It is qualitative research based on in-depth interviews with homeless women, which assists in understanding the causes and suggests some possible solutions. As Sue Casey's research shows, women's pathways into homelessness are varied and require multiple responses. Sue Casey, a community worker of many years' experience who completed this research at Melbourne University's School of Social Work, has uncovered a valuable lode of data based on the experiences of women. Implicit in her approach is a concern for the dignity and rights of women.

A rights based approach to single women's homelessness is vital to reducing its incidence. Catholic Social teaching states that we are made in the image of God and should enjoy inalienable rights that are socio- economic i.e. shelter, food, work and education and political and legal rights.¹ Human Rights are integral to Catholic Social teaching and Pope John XXIII illustrates this:

The common good is best safeguarded where personal rights and duties are guaranteed. The chief concern of civil authorities must be to ensure that these rights are recognised, respected, coordinated, defended and promoted.²

It is essential for the promotion of justice and solidarity, that these rights are protected by all social institutions. The Catholic Church's social teachings also state that a society should always give special attention to the needs of the poor. To this end the Church teaches that Governments, as leading social institutions, must work to alleviate poverty.

The right to housing is one of the human rights recognised in Article 25.1 of the 1948 Universal Declaration of Human Rights and therefore is part of the body of international, universally applicable and universally accepted human rights law. No less than 12 different texts adopted and proclaimed by the United Nations explicitly recognise the right to adequate housing. For instance, the International Covenant on Economic, Social and Cultural Rights (ICESCR) which Australia has ratified, declares (in the sexist language of the day) that:

The States parties to the present Covenant recognise the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions. The States parties will take appropriate steps to ensure the realisation of this right....

The rights of women include the right to housing under Article 14 of the 1979 UN Convention on the Elimination of All forms of Discrimination against Women – a

¹ Encyclical, *Pacem et Terris* (Peace on Earth) 11 April 1963.

² Peace on Earth, Ibid.

treaty also ratified by Australia.³ While the Australian Government has not implemented this UN Convention into domestic legislation, there is a moral expectation that having ratified the UN Convention, Australian governments in the Federation will seek to: *"undertake steps... by all appropriate means... to the maximum of its available resources; and to achieve these [rights] progressively."*⁴

The UN Committee on Economic Social and Cultural Rights states that Governments are required to adopt national housing strategies. To this end the Victorian Government has done well for undertaking a process of consultation which led to the Victorian Homelessness Strategy [2002] (VHS) and for placing homelessness within a rights framework.⁵ The Government is to be commended for beginning to address some of the issues about single homeless women raised in this occasional paper. Community organisations will be watching closely the Government's forthcoming Women's Housing Policy and how it will address many of the areas of need identified in this paper, particularly the adequate allocation of funds to ensure effective, ongoing services.⁶

The Victorian Homelessness Strategy lacks a comprehensive gender analysis however, and the rights of women are viewed primarily through the lens of domestic violence or thematic approaches to mental health and juvenile justice. The Victorian Homelessness Strategy also lacks a comprehensive analysis of homelessness in relation to cultural diversity and disability. However, dedicated resources are required to bring about long term solutions. The investment in this sector needs to be significant. Pilot programs – if successful - need to be recurrently funded in addition to adequate funding for existing services.

A human rights approach to housing also requires that the Victorian Government strive to realise the right to housing "to the maximum of its available resources". In this regard both the Commonwealth and the Victorian Governments are failing. The Victorian Homelessness Strategy, while replete with good ideas, and innovative pilot programs, contains an important caveat around which addressing human rights and preventing the homelessness of women and others depends. The Victorian Homelessness Strategy states that it: "...cannot significantly or immediately increase the supply of affordable housing".⁷ The Victorian Government shifts the blame for this to the Commonwealth under the funding agreement contained in the Commonwealth State Housing Agreement (CHSA), arguing that the Commonwealth is the "prime catalyst" for increasing the supply of social housing. Is this assertion adequate in 2002?

³ States are specifically required to eliminate discrimination against women in rural areas and to ensure to such women the right to enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply.

⁴ Article 2.1. International Covenant on Economic, Social and Cultural Rights.

Any doubt that people have a legally enforceable human right to housing, can be dispelled by cases such as that of 900 South African squatters who successfully challenged their eviction from land they were living upon, in the South African Constitutional Court under the South African Bill of Rights. In 2000 the Court unanimously decided that the government had to progressively realise, through adequate programs, the squatters human rights to adequate housing.

⁵ State Government of Victoria, Department of Human Services, Victorian Homelessness Strategy: Action Plan and Strategic Framework, Melbourne 2002, p.5.

⁶ The Government has funded two new women's crisis centres. See also Ministerial Advisory Committee on Women's Housing, Women's Housing Policy Background Paper, Victorian Government Department of Human Services, May 2001,

⁷ VHS op.cit, p.17.

The Victorian Government acknowledges that Commonwealth funding for public housing has declined 30 % over the past decade.⁸ There is little doubt that the Commonwealth and the States should increase the national stock of public and community housing. It is important too, that the Commonwealth reverse the decline in funding to the states for capital works under the Commonwealth States Housing Agreement. Both the Commonwealth and States favour Rental Assistance over funding capital stock. But given the long-term decline Commonwealth funding and the stock of public housing, it is right to expect that the Victorian Government could do much more in its own right.

The Victorian Government's Social Housing Innovations Project (SHIP) made a good start in this direction with an allocation of \$90 million over three years (2002-3) for social housing.⁹ The State will soon receive however, a new injection of funds from the Commonwealth in the form of GST revenue. Additionally is sitting on a substantial budget surplus estimated to be around \$700 million. This has been augmented by stamp duty windfall from the private housing boom in Victoria. Some of this bounty should be used to strengthen the SHIP program so as to increase the availability of social housing to levels that adequately meet demand. Ideas such as establishing a fiscal allocation from stamp duty on house sales in Victoria to fund capital works in public housing should be widely canvassed. An unequivocal statement announcing an ongoing increase in the State's allocation of funds for long term capital works for social housing would be welcome. Without an increase in social housing, the Victorian Housing Strategy runs the risk of remaining a series of good pilots lacking the jumbo jet of funding (from the central agencies of Treasury and Premier and Cabinet) to take off.

A continued commitment from all players to a human rights framework in working with homeless women is very important and should include gender analysis based on the UN Convention on Elimination of Discrimination Against Women and associated UN human rights standards. The State Government should employ a whole of government approach to women's homelessness, as it does with its 'Women's Safety Strategy' and allocate concomitant resources from across Departments and agencies. Finally, it is hoped that this Occasional Paper will generate discussion amongst Victorian community organisations working on women's homelessness, specifically and support services generally. It is hoped that it will act as a catalyst towards improving networking and advancing research, advocacy, and public awareness and government responsiveness to the rights of women.

⁸ Ibid, p.17.

⁹ This was over and above the joint funding made available Commonwealth State Housing Agreement. Recently, the Government has committed \$15 million for a second round of funding under the Social Housing Innovations Project, including \$3 million for ethno-specific accommodation for older people.

SINGLE WOMEN AND HOMELESSNESS - WHICH WAY IS HOME?

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INTRODUCTION

Women-headed households make up over 70% of the world's homeless.¹⁰ Homelessness is not however unique to societies with third world economies. It is increasingly a phenomenon experienced by women in societies with advanced capitalist economies such as Australia.

Single women are often described as the 'hidden homeless'; their needs often overlooked within a context of overwhelming unmet need. Estimating the number of people who are homeless is inherently problematic. The Australian Bureau of Statistics (ABS) has only recently begun to attempt to collect census data on numbers of homeless people and do not currently provide a breakdown of numbers of single women. However, to indicate the magnitude of the issue, in 1995 it was estimated that between 16,150 and 17,300 single women experienced homelessness in Victoria over a twelve-month period.¹¹

The purpose of this discussion paper is to provide an overview of the key issues in relation to homelessness in Melbourne as it affects single women without dependent children. Single homeless women without dependent children are one of a number of potential focuses for a study of homelessness. Homelessness affects people of all ages and family types. This current study provides part of the overall picture.

This discussion paper draws upon interviews with women who have experienced homelessness and current literature relating to housing and homelessness. The primary research involved in-depth interviews with eleven women who had experienced homelessness, with a focus on their pathways into and out of homelessness. In order to describe the diversity of experiences of homelessness a distinction is made between situational, long-term and chronic homelessness. These concepts will be described further within the context of the paper.

¹⁰ Mulherin, T. *Ten Years onStill no Place for Women*, Council to Homeless Persons Conference, Melbourne, 1996.

¹¹ Horn, M. *Women Alone... Stepping Forward*, Hanover Welfare Services, Melbourne, 1995. In relation to trends in homelessness overall, in the year to June 1999, Victorian crisis and transitional housing providers reported a 51 per cent increase in requests for emergency accommodation from 29,000 to 43,800, *Working Report of the Victorian Homelessness Strategy Ministerial Advisory Committee*, Department of Human Services, April 2001, p.13.

The women were between the ages of twenty-five and forty-five at the time of interview, considered themselves to be single whilst homeless and without dependent children in their care.¹² At the time of the interview the women were living in fairly stable circumstances and so were in a position to reflect back on their experiences.

Women were asked questions not only about their experiences of homelessness and their pathways into and out of homelessness, but also their views about service provision and what should be done to address homelessness. Although contacted through services in inner Melbourne, women had often experienced homelessness and/or lived elsewhere and ended up in inner Melbourne, often to access services.

HOME

Definitions of homelessness are inextricably linked with the meaning and reality of home. Home is not only a shelter or somewhere to sleep, but a place for socialising and building relationships, a place for work, for relaxation, for contemplation and a place where one's unique cultural identity can be expressed. Typically the word home carries an implied meaning associated with family life, which in a society such as Australia is often idealised as a nuclear family. However, a significant proportion of the Australian population now lives alone. Twenty-four percent of Victorian households are now single-person households.¹³

In reality, homes are not always safe or comfortable. They can be the sites of violence¹⁴, conflict and oppression. To be living in a situation where violence is an ongoing threat, is to be without the safety and security of having a home.¹⁵ Violence is much more likely to be a contributing factor in women becoming homeless than for men.¹⁶

DEFINITIONS OF HOMELESSNESS

Given that a home is far more than a shelter, homelessness is far more than being without accommodation, it includes significant social and emotional dimensions in addition to physical hardship.

Women interviewed for this study described homelessness as follows - *'just to be alone, nowhere to go', 'not having a home, not having a stable roof over your head, nowhere to live', 'to be alone', 'not having a secure, safe environment to live in ...it covers such a wide area', 'when you've got nowhere to live basically... and you're on the streets', 'my idea of homelessness is not having a roof over your head, out on the streets'*.

¹² A number of women did however have children who were living with their fathers, in alternative care or had grown up.

¹³ Australian Bureau of Statistics (ABS), *Australian Social Trends 2000*, 'Australia Now' on-line, Family National Summary Tables- Living Arrangements, Commonwealth of Australia, 2000.

¹⁴ In 1996, almost one quarter of women who had ever been married or in a de facto relationship had experienced violence at some time by a male partner. Australian Bureau of Statistics (ABS), *Australian Women's Year Book*, (Cat. No. 4124), 1997, p.159.

¹⁵ Homewood, J. *Accommodating Women - An Overview of Women and the Housing System*, Women in Supportive Housing, Melbourne, 1994.

¹⁶ Horn, M. p.45.

Helen: *We talk about homelessness at the 'Big Issue', it's not just a concept of you know, there's an old guy, the old drunk sleeping on a park bench, people relate that to homelessness and whatnot, you know 'homelessness' ... it can be so broad, you know, I was living at the Regal Hotel,¹⁷ which is you know..., if you know St Kilda at all, and that's being homeless.*

In a study in inner Melbourne social researchers described homelessness as having two interconnected dimensions: “*a lack of secure affordable accommodation; and the fracturing of relationships with families and communities of origin*”.¹⁸

The definitions of homelessness used by the Victorian Homelessness Strategy¹⁹ include three categories of homelessness: primary homelessness: - to be without conventional accommodation, such as people sleeping out, in a car or in parks or squatting; secondary homelessness - moving from one form of temporary accommodation to another; and tertiary homelessness - living in a boarding house on a medium to long-term basis, without security of tenure or personal kitchen and bathroom amenities. These categories focus on one's physical environment and are useful for assessing the incidence of homelessness in a more objective sense, whilst other definitions assist in understanding the lived experience of being homeless.

CAUSES OF HOMELESSNESS

This paper is premised on the understanding that the underlying causes of single women's homelessness relate to economic disadvantage caused by low income and an inadequate supply of affordable housing. Within that context there are a range of factors that make some individuals more vulnerable to homelessness than others. These factors will be explored in this discussion paper.

Housing Affordability & Availability

In Victoria, there is insufficient affordable housing for people on low incomes. Low-cost private rental has become scarce whilst public housing waiting lists continue to be extensive.

In relation to private rental, a study conducted in the north eastern suburbs of Melbourne found that low-income households - young people, sole parents and singles, were spending around 50% of their income on rent.²⁰

The March Quarter 2001 Office of Housing Rent Report reports median rent for a one bedroom flat in Victoria at \$150 pw.²¹ This is not affordable for a person on a social security payment. The availability of affordable rental is limited - between March

¹⁷ The Regal Hotel was a private hotel in St Kilda that has closed since this interview.

¹⁸ Driscoll, K., Wood, L. *A Public Life - Disadvantage and Homelessness in the Capital City*, Department of Social Science and Social Work, RMIT for City of Melbourne, 1998, p.2.

¹⁹ *Working Report of the Victorian Homelessness Strategy, Ministerial Advisory Committee, Department of Human Services, April 2001, p.7.*

²⁰ North East Regional Housing Council, *The Rental Reality - Private Rental in the North East*, prepared by Marnie Lyons, 1997.

²¹ Department of Human Services (DHS), *Rental Report*, Office of Housing, Government of Victoria, March Quarter, 2001.

2000-01 only 18-27% of overall vacancies in one-bedroom flats was affordable for people living on a Centrelink income.²²

In relation to public housing on 30 June 2000 there were 40,969 applicants on the public housing waiting list. Only approximately 11,000 allocations could be made during 1999/2000.²³

Risk Society

Within this context of an inadequate supply of affordable housing, some women are more vulnerable to poverty and homelessness than others. The concept of the 'risk society' is useful in exploring these vulnerabilities in more detail within a systemic framework. In the latter part of the 20th century and beginning of the 21st century, major changes to economic policy, the impact of globalisation and major social changes have led to what can be described as 'manufactured uncertainty' in a 'risk society'.²⁴

'Manufactured uncertainty' is described as the level of uncertainty in people's lives in contemporary societies that is not inherent to the human condition, but has direct links with external factors such as deregulation of the labour market and the economy.²⁵

Within this 'risk society', individuals who are well paid, well educated and have good material and emotional supports from family or friends are buffered against the extreme outcomes of risk taking. Indeed risks may present as a range of exciting opportunities that includes opportunities to change careers over a lifetime, gain further education and travel. For those without buffers, such uncertainty of employment, housing or family and social relationships can very easily lead to insecurity and a loss of opportunity and ultimately homelessness.²⁶ This was the case for women interviewed for this study.

A relatively unregulated private rental market, the high cost of entry into home ownership and limited availability of public housing, has led to continuing high numbers of people experiencing housing stress, housing related poverty and ultimately homelessness.

A range of factors have been identified as making women more vulnerable to homelessness when there is an inadequate supply of low cost housing. These factors include inadequate income in relation to housing costs, mental illness, social isolation, being victim to violence and sexual assault as an adult and/or in childhood, poor education, limited work skills, family breakdown, institutionalisation, physical and intellectual disability, acquired brain injury, chronic illness and substance abuse. Grief and loss are often very significant for homeless women whose lives are marked by a multiplicity of these circumstances and events.

²² Between March 2000 and March 2001 between 18.6% and 26.9% of 1 bedroom stock, were affordable. Affordable rent is defined as 30% of a statutory income including rent assistance. The increase in availability of affordable housing in December 2000 (26.9%) and March 2001 (25.1%) is described as being due, at least in part, to increase in Centrelink payments to off-set impact of GST, rather than decreases in actual rental costs, *Office of Housing, Rental Report March 2000, June 2000, September 2000, December 2000 and March 2001*.

²³ Department of Human Services, *Segmented Waiting List Review, Consultation Paper*, November 2000.

²⁴ Giddens, A. 'Affluence, Poverty and the Idea of a Post-Scarcity Society' in *Social Futures, Global Visions*, (ed) De Alcamatara, C., Blackwell Publishers, UK, 1996, p.152; Beck, U. *Risk Society: Towards a New Modernity*, Sage Publications, London, 1992; Winter, I., Stone, W. *Reconceptualising Australian housing careers*, Working Paper No. 17, April 1999, Australian Institute of Family Studies, Commonwealth of Australia, Melbourne, 1999, p.2.

²⁵ Giddens, p.152, Winter & Stone, p.2.

²⁶ Winter & Stone, pp. 2-3.

OVERVIEW OF WOMEN'S PATHWAYS INTO AND OUT OF HOMELESSNESS

Women in this study had experienced homelessness for relatively short periods of time, through to a lifetime of homelessness. In order to describe these experiences in greater detail three groups of experiences are described.

These groups of experiences are described as situational, long-term and chronic homelessness.²⁷ Situational homelessness is used to describe the experience of homelessness that occurs in response to a single or shorter term crisis or circumstances, but some form of alternative accommodation is able to be found. Long term homelessness is used to describe homelessness that has resulted from a series of critical events without resolution, that have led to extended periods of homelessness over a number of years. Chronic homelessness is used to describe the experience of women who have never had a home, their childhood spent in multiple placements whilst in the care of the state leading onto a lifetime of adult homelessness.

Situational Homelessness

Lindy and Aba are both young women. Lindy in her mid twenties is a musician who grew up in rural Victoria and Aba, who is thirty, is a recent immigrant from Africa. She worked as a cook before coming to Australia. Both Lindy and Aba became homeless in response to a particular crisis. In Lindy's case a mental illness led to her losing her job and accommodation (that was associated with her work). She was able to find accommodation in a women's rooming house through a women's housing referral service. Aba had to move from living with her extended family and couldn't afford private rental on her own. She was able to find short-term shared accommodation through a transitional housing service.²⁸

Neither woman considered herself to be homeless. Both were able to access accommodation and support services in a timely manner. Although both women required other support services, their support needs did not affect their ability to maintain a home. However, neither woman was able to afford to live in private rental due to her reliance on social security income.

Lindy felt that the rooming house where she lived was suitable to her needs at the time as it provided some social interaction, without the pressure and isolation of maintaining a flat. In contrast, Aba was keen to find her own flat or house - although relieved to have somewhere to live, she found the circumstances of the shared house difficult, as described in the case study below.

Women in the situationally homeless group were able to access housing support services before their situations deteriorated to 'sleeping rough' or resulted in extended periods of institutionalisation. In the longer term, Lindy considered the private rental market an option as she expected to be able to work part time teaching music. Aba was applying for public housing, as she simply couldn't afford private rental on a social security income.

²⁷ These groups are based on work by Brown, K.S., Ziefert, M., 'A Feminist Approach to Working with Homeless Women' *Affilia*, Vol.5, No.1., Spring, 1990, pp.6-20, which relates to homelessness in the United States of America. They have been modified to reflect the different experiences of homelessness in Australia.

²⁸ Transitional Housing services are funded by the State government and provide short-term accommodation for people who are homeless in flats and houses.

Aba

Aba was thirty at the time of interview. Born in Africa, she migrated to Australia three years earlier to live with her extended family. In her country of origin she had been a cook. In Australia she has been unable to find work and was struggling to learn English, with only very limited access to English classes. When she had to move out of the house where she lived with her extended family she had nowhere else to go.

Pathways out of homelessness

At the time of the interview Aba was living in a group house with two older women whom she described as being 'mentally disabled'. She was glad to have somewhere to live, but found it very difficult living with these older women.

It's very hard to live with this type of lady because they are elderly, our cooking system is very different, the way we use the kitchen, and our custom and culture is different and it's very hard to continue with...

Due to these issues she was unable to have friends and family to visit. She was unable to afford private rental on her own, so was actively seeking out a public housing property.

Long-term Homelessness

The women in the long-term homelessness group experienced homelessness for extended periods of time, at least a couple of years through to approximately ten years. These women came from a variety of backgrounds: Karen had been in the workforce and married with a young child, Shaun had worked in the manufacturing industry and was an artist, Belinda an athlete, Mary was planning to further her education in the TAFE sector having commenced university study in the past, Brooke had worked in a managerial position, Helen had spent time as a young woman travelling and working her way around Australia, and has a son who now lives with his father. All but one woman in this group had been in the paid workforce for most of their lives, had completed school, and had maintained their own private rental properties.

Women in this group became homeless following a series of multiple crises and events that put them at increasing risk of homelessness, often over an extended period of time, before actually becoming homeless. Contributing factors included at least two if not more of the following - unemployment, mental illness, death of a child, death of a close family member, substance abuse, marital breakdown, sexual assault and domestic violence.

Karen's story is, of course, unique, but has resonances with the pathways into homelessness of a number of women in this group. Women in this group had experienced primary homelessness (slept rough) for extended periods of time or had lengthy psychiatric hospital admissions or series of admissions, whilst their housing was tenuous. Consequently, the experience of homelessness itself contributed to the perpetuation of their homelessness.

As a result of experiences of extended periods of homelessness, multiple crises and, more often than not, lack of timely access to support services, the women's pathways out of homelessness were often circuitous and difficult.

Women reported their access to housing and support services was limited by a number of factors, including a limited number of crisis and transitional housing services available for single adult women, lack of readily available information about services that do exist and women not necessarily identifying with being homeless. A related issue identified by one woman was that service providers, police and others made an assumption, that if you were homeless or a drug addict, you had always been that way and so would know about the homelessness service system. Findings of this study suggest the contrary.

Karen

Karen was in full time employment, married and renting a house, not far away from purchasing a home. Her first child died soon after birth and she reported that unresolved grief led to undiagnosed post-natal depression following the birth of her second child. A contributing factor was her feelings in relation to how the death of her child was handled by the hospital. Occasional amphetamine use following the death of her first child became a habit. Her marriage broke down and her husband left with their child. She felt so unworthy due to her depressive illness that she was unable to accept assistance from her husband's family. She eventually had to move out of her home; she was too ashamed to accept social security payments and she survived by shoplifting.

She experienced primary homelessness for a period of about three years, sleeping out on a school verandah, in a vacant house and sometimes a clothing bin.

She recounted seeking emergency accommodation just once. The only available accommodation was a room in a private hotel, which she did not accept as she felt it was safer to sleep out. Eventually, she was sent to prison for shoplifting. It was here that she was linked into services and had time to dry out. She recounted wryly, 'well I went into having to be normal again, sleeping in a bed, getting up and having a shower everyday'.

Pathways out of homelessness

In prison, Karen was referred to a housing support agency. She was able to move into a mixed gender group house when she left jail. She was in one group house that was closed down due to violence of other residents and had to move onto another. At the time of the interview she had completed a corrective services order that had resulted in paid work, which she was about to commence at the time of interview. She was still an occasional drug user, but was able to manage this within the context of her lifestyle. Her stay in the transitional accommodation was time limited and, now she had work, she had been asked to begin looking for her own place. She expected this to be private rental.

Karen felt that if she been able to access affordable housing early on then her situation would not have dragged on as long as it did. For various reasons she had not accessed any sort of counselling or psychiatric support, except when she was in prison. She still felt after all the ordeals that she had experienced that somehow she should be able to cope.

At another level, women expressed feelings of shame and feeling like they should be able to cope on their own which served to further limit access.

Brooke: *You just feel it's a real shame job, you just don't want to tell anyone, you just don't.*

Sue: *You feel uncomfortable about it?*

Brooke: *Yeah really uncomfortable, it's because of the stigma homeless people are all scumbags and that's not true.*

When they did access services, women reported often not being eligible due to their age or sex or family status. The homelessness service system consists of a range of different housing and support services that often target particular groups of homeless people, for example, youth, single men, and women escaping domestic violence. Women were often wary of staying in cross-target crisis services due to fears of violence.

The women who had experienced long-term homelessness talked about opportunities and lost opportunities for referral to appropriate services; more timely intervention and potentially shorter periods of homelessness. The women's responses suggest that generalist services need to be more heavily targeted as referral sources for homeless

women. This included Centrelink, General Practitioners, psychiatric in-patient services, jails, police, needle exchange services and crisis services. In many ways these were services that women often couldn't avoid contacting due to their circumstances.

Once women in the long-term homelessness group accessed a housing support program including accommodation they appeared to stay with that service through to finding a home. However, this remains a hypothesis based on a limited sample that requires further investigation. Nevertheless, this did contrast to women in the chronically homeless group who generally had accessed more than one housing support service over time.

The women in the long-term homeless group had all required a range of support services in order to re-establish themselves. All the women utilised more than one service in order to move on from being homeless. These services included housing support, health, welfare, mental health, drug treatment services, counselling and education and training services.

A number of women in the long-term housing group commented that the primary cause of their extended period of homelessness was lack of affordable housing, regardless of the other crises and circumstances with which they had to deal. At the time of interview all the women were living in reasonably stable circumstances including private rental, rooming house, transitional housing or with family, so they were in a good position to reflect back on the difficulties of re-establishing housing after a period of homelessness.

Given that all women in this group had past experience of maintaining their own home, if appropriate crisis and longer term housing and support services relating to their range of other issues had been available earlier, then it could be reasonably expected that their experience of homelessness would have been shorter. This was the case for Brooke: although she spent an extended period of time getting back on her feet as a result of a mental illness, she was able to move into a community-managed rooming house when evicted from her flat. She had access to accommodation and support services at an early stage, which meant that she didn't experience primary homelessness and was able to focus on dealing with her mental illness and working towards a return to employment, which she had achieved at the time of interview.

Chronic Homelessness

The term chronic homelessness²⁹ is used in this discussion paper to describe the experiences of women whose pathways into homelessness occurred as children and teenagers, rather than as adults. Jacinta, Rosie and Annie had very little or no experience of home, although they were in their twenties, thirties and forties respectively.

Annie and Jacinta spoke about experiencing abuse and neglect as young children, and Rosie about the death of her father that resulted in their going into the care of the state. None of these three women could describe a place that they thought of as home except for very short-term experiences. They had all had a lifetime of moving from institutions to temporary accommodation and moving in and out of contact with support services. Resiliency was highlighted by these women as being the key to simply surviving all that they had experienced.

²⁹ The term chronic homelessness is well and truly part of the lexicon of the homelessness field in Australia. It is often used to simply describe long-term homelessness. In this paper a distinction is made between long-term and chronic homelessness.

Not being able to stay put in one place for any length of time was another key theme for this group. All three women had really struggled to achieve any stability of housing over many years that had started with the inability of their families to be able to support them as children. They all talked about needing to learn the practical skills necessary to maintain a home, which was a distinguishing factor compared to the other two groups. This went as far as the women identifying difficulties in having a home compared to being homeless. This was particularly the case for Rosie and Annie, who were older than Jacinta and had consequently experienced longer periods of homelessness, and appeared to have had fewer supports as teenagers.

A number of writers about homelessness have identified the need for different skills to survive when homeless, such as living in the present and having a 'survivalist orientation' that make it difficult for women to establish long-term goals.³⁰ Both Jacinta and Annie spoke about long-term goals - Annie getting public housing and Jacinta, who was younger, going back to school. Schooling was something Jacinta had been able to achieve in the past, however, and Annie had a number of steps to go before even applying for public housing. Rosie had no plans, although talked about having options this time around.

Rosie and Annie had significant characteristics that made it difficult for them to search for scarce long-term housing that appeared to result from their experiences of homelessness over a lifetime. In Rosie's case it was volatility and for Annie it was substance abuse. This may also have been the case for Jacinta. She had had a substance abuse problem in the past and described herself as having a 'short fuse'.

Jacinta: Well it's hard, I'm just learning now to settle down, and to stay in one place for a length of time. Unfortunately this place doesn't really suit me, so I'm trying to stick it out here until the absolute most, until I'm almost ready to commit suicide or something.

The experiences of these three women, Jacinta in her twenties, Rosie in her thirties and Annie in her forties, provides an insight into the failure of the provision of social services for homeless children across the decades which led to their being homeless as adults. As stated by former human rights commissioner, Brian Burdekin in the late 80's, care of the state is a key predisposing factor for homelessness as an adult.³¹

The women in the chronically homeless group all reported using multiple services over time. This included housing support, health, welfare, mental health, drug treatment services, and counselling and educational services. They also required additional support to learn practical skills associated with maintaining a home.

The women in this group had accessed many services over time and were able to provide valuable insights into the sorts of models that they found most helpful. The most successful model reported by women who had experienced chronic homelessness were services that were respectful and allowed women to contact and engage and re-engage over time.

For example, Rosie had moved from a women's residential service to her own flat in a transitional housing program. She left to move to the country with a friend, and when that didn't work out, rather than become homeless again, (which is what had

³⁰ Brown, K.S., Ziefert, M., pp.8-9.

³¹ HREOC (Human Rights and Equal Opportunity Commission), *Our homeless children*, Australian Government Publishing Service, Canberra, 1989.

happened in the past), she was able to return to the residential service in order to have a base from which she could once again move into a flat.

Annie was living with her daughter at the time of interview and had applied for transitional housing. Jacinta was living in a rooming house but wasn't happy and hoping to move back to another rooming house where she had lived in the past. Neither Jacinta nor Annie was able to talk about anywhere as ever having been home. Rosie had only experienced home once, in the flat with the transitional housing service.

Jacinta

Jacinta was in her mid twenties at the time of interview. She had a degenerative neurological condition and also suffered from asthma. She was living in a women's rooming house.

Jacinta lived with her family until a male family member sexually assaulted her in her early teens. She was forced to leave home and go into the care of the state. As a teenager she moved in and out of youth refuges, state run youth residential services and slept out. She returned to her family when she had a baby. Her child eventually went into foster care. She had to move out again due to the threat of further sexual assault.

In her early twenties she had a second child and returned to finish her final year of school, whilst living at her mother's and then a rooming house. She is very proud to have accomplished this level of schooling. Eventually things did not work out and her child went into care. Again she had to leave her mother's home due to threat of sexual assault.

She spent her early twenties in a similar manner to her teenage years, except the types of accommodation she had access to changed. She continued to sleep out at times, but also stayed in rooming houses, crisis accommodation and transitional accommodation at various times. She was sexually assaulted whilst staying at a mixed gender emergency accommodation service.

Pathways out of homelessness

At the time of interview she had been living in a rooming house for three months. She was having some difficulties dealing with the relationships in the house. However, she was determined to stick it out while she waited for a vacancy at another rooming house where she had lived in the past. She was attending sexual assault counselling which she was finding effective and planning to enrol in a vocational course. She had attended a specialist drug and alcohol service to overcome a drug problem and had not used drugs for three months.

COMMON THEMES

In summary, a range of issues have been identified as making women more vulnerable to homelessness within the context of an inadequate supply of low-cost housing and insufficient work opportunities. These factors included inadequate education, psychiatric, intellectual and physical disability, acquired brain injury, institutionalisation, substance abuse, grief and loss, being subject to violence, sexual assault, childhood deprivation and abuse, being a new arrival to Australia and chronic illness.

There were also more subtle oppressors that women described as part of the experience of being homeless. Many women described the frustrations and powerlessness of being homeless. The numbers of agencies that needed to be approached to get a response, approaching services that were for men only or youth only or whatever. Part of the experience of homelessness for many women in this

study included periods of institutionalisation including children's homes, youth detention centres, psychiatric hospitals³² and prisons.

Violence, the hidden nature of single women's homelessness and grief and loss will now be discussed in more detail as issues common to many of the women interviewed for this study, but not unique to any one of the groups of experiences identified.

Violence

The fear and often experience of violence was significant for the women interviewed for this study. Women identified violence as a cause of homelessness and as part of the experience of homelessness. This included childhood sexual assault, violence in the home and violence and/or sexual assault experienced whilst homeless and being witness to violent incidents whilst homeless.

Annie, Jacinta and Mary all recounted childhood sexual assault as a key contributing factor in their becoming homeless. Both Helen and Rosie had experienced violence in the home as adults. Quite curiously, Helen did not seek out domestic violence services in the first instance because she did not think she was a 'battered wife'. This was because she was not married to her violent ex-partner. Helen was articulate and worldly and yet almost missed out on this service that was a key support for her in moving on from being homeless.

Three women in this study reported being sexually assaulted whilst homeless. These assaults occurred in a mixed gender emergency accommodation service, in a private hotel and whilst one woman was sleeping out. Given that women were only interviewed once, this is probably an under-reporting of the issue. Other women witnessed violence in a variety of settings or were simply wary of staying in mixed gender settings due to safety concerns. Within this context many women felt that mixed gender accommodation services were simply not an option.

Sleeping Rough – Hidden Homelessness

Five of the eleven women interviewed for this study had slept out at some time during their experience of homelessness. In response to fears of potential violence, women who slept out chose very out of the way places. They reported sleeping in cars; in sheds in suburban locations; in houses with no furniture and on the verandah of a suburban school. Karen commented that she thought sleeping out in this way was a safer option than a private hotel. This contributes to the hidden nature of single women's homelessness.

This was not a unique experience of women who were chronically homeless, but also applied to women who had had their own homes in the past. Women slept rough for various periods of time, sometimes for periods of six to twelve months. Of the five women, only Jacinta had slept out with other homeless people. This occurred when she was a teenager and she 'hung out' at Flinders Street Station.

It is often assumed that it is men that are the ones who are sleeping rough. This small sample suggests that a significant number of women sleep out during the time that they are homeless, which is consistent with the findings of a study conducted in inner Melbourne.³³ One of the main sources of information about homelessness is

³² Although mental health services have now been deinstitutionalised and are generally located in general medical hospitals, Brooke's description of her feelings about three months in a psychiatric service were consistent with that of an institution. Other women had spent extended periods of time in hospital in the past, including periods before deinstitutionalisation occurred in Victoria.

³³ Driscoll and Wood, p.24 surveyed 87 people who were homeless in inner Melbourne. Of these 42.1% of women reported that they generally sleeping rough compared to men (38.8%). In response to

data collected by homelessness agencies, including a person's living circumstances on referral. Based on the stories of women in this study, this phenomenon of women sleeping rough may be further hidden as, often, women were only referred to a homelessness service when they were in an institution or in other circumstances. For example, two women negotiated short stays with family members in order to have a base to seek out homelessness services.

Although the Australian Bureau of Statistics (ABS) recently began to collect census information about people who are homeless, the collection can really only ever provide indicative data, as it is limited to contacting people who are using homelessness services or living in circumstances considered 'typical' of the homeless and able to be located. The majority of women in this study would not have been part of the collection when they were sleeping rough.

Grief and Loss

The intensity of grief and loss experienced by so many women interviewed for this study, highlights the under emphasis this issue in writings about homelessness. The losses and sources of grief for women in this study included the death of a child, the death of a parent, loss of home, loss of family, loss of culture, loss of dignity, loss of friends and loss of a sense of power.

Karen had experienced significant unresolved grief due to the death of her child and another woman, Shaun, the death of her mother. However, grief and loss were also evidenced amongst other women in the study in response to loss of home and lifestyle. These issues were most obvious for the older women in this study who had experienced a comfortable lifestyle in the past. However, women who had never really experienced home expressed feelings of sadness, grief and anger that seemed to be about opportunities that they did not have and the sense of loss attached to what could have been.

ADDRESSING WOMEN'S HOMELESSNESS

The women's pathways out of homelessness, the types of supports they required and the time it took to get back to having a home or establishing a home were related to their pathways into homelessness and experiences of homelessness itself.

Some significant differences in experiences of homelessness have been described using three categories of homelessness. However, the women interviewed for this study had many similar reflections and comments to make about the causes of homelessness and what needs to be done to address homelessness and related issues.

Comment has already been made on the need for women to have access to safe, affordable housing and adequate income as a key to addressing homelessness. In addition, women utilised a range of health, welfare, mental health, specialist drug treatment services, education and training, counselling and other support services to assist them in addressing the myriad issues that they faced as a result of their experiences of homelessness and pathways into and out of homelessness.

The most successful housing and support model, based on feedback from the interviewed women, was an integrated women-only service that included residential, transitional and rooming house accommodation. In addition, women were referred to a range of other services.

the question 'where are you sleeping tonight?' 19.1% of men were going to sleep rough and 15.8% of women. Men were more likely to use crisis accommodation than women, which may reflect the greater number of crisis beds available to single men, than single women in the inner city area.

In terms of transitional housing women expressed a preference for 'women-only' services with a one bedroom flat being the accommodation of choice for the majority of women. However, two women who lived in women's rooming houses found them suitable for their needs. Other women who lived in rooming houses reported finding it difficult, particularly the number of residents who had significant behavioural problems that impacted on other residents. One woman commented that she thought some women were being accommodated in a rooming house, when they required accommodation with a higher level of support.

At times transitional housing appeared to create just another step on women's ladder out of homelessness. Women were able to stay in transitional housing from a number of months through to two years. In some circumstances, the transitional accommodation they were moving out of was similar to that which they were seeking as permanent accommodation. In many instances a more practical option would be for women to be able to move into long-term housing directly from crisis accommodation.

The issue of not being able to access crisis and housing support services in a timely manner was highlighted by a number of women. This included not knowing where to go to begin to seek out services, long waiting periods and not being eligible for a number of crisis and housing support services due to age and/or gender.³⁴

In addition, women were concerned about violence in cross-target services and/or had experienced or witnessed violence in cross-target services so did not attempt to use these services.

A related issue in terms of access to women's services is that women's services often aren't advertised with a sign on the front gate due to security concerns and aren't as well known as the large men's shelters for example. This serves as a barrier to access that provides a challenge in terms of promoting women's services in other ways.

Inadequate access to services was an issue for women not only when they were actually homeless, but also during the period when they were at risk of homelessness and experiencing crises. The findings of this research suggest that prevention of homelessness and early intervention include the provision of a range of social supports and health and welfare services before women become homeless. This would support them in staying in employment, if employed, and to maintaining their housing. In this study, that included access to specialist counselling, mental health services, specialist drug treatment services and education, employment and training services. This is in addition to the housing related supports such as emergency relief and tenancy advice to assist households to maintain their housing when facing housing related poverty.

Overall, the pathways out of homelessness relied on factors other than just adequate service provision. Women's own personal strengths were often highlighted by women as being the key to their moving on from being homeless.

³⁴ In Victoria, only 5% of Supported Accommodation Assistance Program (SAAP) funding, the main source of government funding for crisis and housing support services is allocated for single women only services. *SAAP National Data Collection, Victoria supplementary tables, Annual Report 2000-01*, Australian Institute of Health and Welfare, 2001, Table 2.1, p.4. This does not include funding allocated for services specifically for women escaping domestic violence.

A number of women also commented on the importance of services and activities that assisted them in understanding homelessness and in other circumstances sexual assault, in a broader, political context that served to empower women. This included feminist counselling, participation in a homelessness rights/advocacy training course and vendor activities associated with the 'Big Issue'.

Significant relationships with others were also important as part of the pathway out of homelessness for women. Often this was a particular support worker, who was perceived as being respectful and concerned, but also included friends and sometimes family.

CONCLUSION

This paper highlights the fact that homelessness occurs when there is insufficient low cost housing to meet the needs of people on low incomes. However, within this context, the systemic causes of homelessness are not limited to housing injustice and income inequality, but include a range of factors that contribute to the oppression of particular groups leaving them more vulnerable to poverty and homelessness without the necessary buffers required for survival within a 'risk society'.³⁵

Women's pathways into homelessness and experiences of homelessness, described in this paper, were often marked by multiple traumatic events and overlapping oppressions and consequent social and economic disadvantage. In their pathways out of homelessness women required timely access to crisis accommodation and a range of health and other support services and sooner, rather than later, access to safe, affordable housing. In addition, a number of women highlighted the lack of readily available information about housing and support services for women.

In terms of prevention of homelessness women required access to affordable housing and access to a range of health, welfare and counselling services.

In summary, the findings of this research suggest that a range of approaches are required to address women's homelessness that include -

1. Further development of safe, affordable social housing options suitable for single women, for example, one bedroom flats or smaller scale rooming house/apartments with personal bathroom and kitchen facilities to ensure safety and personal space, located near public transport and other amenities.
2. Further development of women's homelessness services that are able to provide integrated access to a comprehensive range of appropriate accommodation, housing and support options, including:
 - Outreach services;
 - Crisis services;
 - A range of transitional housing and support options;
 - Short-term, and medium to long term residential services.
3. Ensuring that approaches to service delivery in women's services are based on empowering women, with the provision of flexible and diverse models of support that enable women to actively engage with services and make real choices in relation to their lives.

³⁵ Beck, U. *Risk Society: Towards a New Modernity*, Sage Publications, London, 1992.

4. Further development of information and referral services for women in relation to housing and support services which would include:
 - Provision of information through a range of agencies – general practitioners, mental health services, community health services, hospitals, police, courts, prisons, needle exchanges, Centrelink and other similar services;
 - Consideration of the development of a central referral service including a single phone number that could be widely advertised or similar approach to enhance access.
5. Access to a range of specialist counselling, mental health, drug treatment and disability services; employment, education and training opportunities and recreational activities.
6. Further development of training opportunities for generic and specialist health, welfare, police and prison staff to enhance understanding of homelessness and related issues, including the particular issues facing women.
7. The inclusion of data relating to single women without dependant children in future ABS homelessness reports and similar data collection activities, including reports on gender by households and by age, which are not currently included.
8. Further research into homelessness as it affects single women, including a longitudinal study involving a large sample over an extended period of time, which further explores the needs of single women including the points of early intervention and prevention of homelessness of single women.

There is a need to understand in greater detail the pathways into and out of homelessness of single women in order to provide more timely assistance based on the different needs and requirements of different women and so prevent and/or minimise the effects of homelessness.

This research provides only part of the picture of women's pathways into and out of homelessness, but I hope makes some contribution towards the amelioration of women's homelessness.

