

## SUBMISSION

10 December 2012

### HOUSING ISSUES FOR PEOPLE WITH HIV - NSW PROVIDED BY SYDNEY LHD AND NGO METRO AND REGIONAL HIV SERVICE PROVIDERS

#### Background

This submission provides feedback by a number of HIV service provider organisations on housing issues for people with HIV in Sydney metro and regional NSW.

In preparation for the Housing NSW NGO Partners Reference Group meeting 12 December 2012, a request was made for feedback on issues experienced by people with HIV who are clients within the Eastern Sydney LHD and Sydney LHD, Hunter New England LHD and Northern River LHD. Feedback has been provided by the managers of the SSWAHS Community HIV Services (Positive Central & Heterosexual HIV Service) and SEIAHS HIV Community Outreach Teams and by ACON Housing Sydney and Lismore office staff. The LHD HIV Community Teams provide health and support services to a range of HIV positive clients with generally more complex issues. ACON provides services to GLBTI people and people with HIV. The mix of issues for ACON's clients is more mixed in severity and complexity.

It is estimated that between 12,500 and 15,000 people are living with HIV in NSW<sup>1</sup>. Around 10,170 people know they have HIV (70-80% of all the people in NSW living with HIV)<sup>2</sup>. Approximately 80% of people with HIV live in the Sydney metro area and 20% live in regional and rural NSW (see attachment 1 for metro and regional population distribution)<sup>3</sup>. In 2007, 29% of HIV positive respondents to a Sydney based community research survey reported being unemployed<sup>4</sup>. A significant percentage of these people are in receipt of Centrelink payment (Disability Support Pension or Newstart) and eligible or receiving accommodation support from Housing NSW or other providers.

<sup>1</sup> NSW HIV Strategy 2012-2015, A new Era, NSW Health, p9

<sup>2</sup> Ibid, p9

<sup>3</sup> Mapping HIV Outcomes: geographical and clinical forecasts of number of people living with HIV in Australia, 2010, National Centre in HIV Epidemiology and Clinical Research, p21 – see attachment 1.

<sup>4</sup> Sydney Gay Periodic Survey 2007

## Data on the complex health and social characteristics of HIV Community Service clients in inner-Sydney

Local Health District HIV Community Teams provide clinical and other support services to a group of people with HIV, multiple other chronic health conditions, mental health, alcohol and other drug use and poverty. The combination and conflation of health and social issues, impact on the ability of people to seek and maintain tenancies. Clients are highly reliant on medical and support services. The South Easter Sydney and Illawarra HIV Community team services approximately 160 clients. Positive Central HIV Community Team services a similar number.

Client characteristics of LHD HIV Community Teams:

- Approx. 60% of clients have a mental health diagnoses e.g., mostly depression and/or anxiety which impacts on their ability to navigate and negotiate the system.
- Approx. 50% of clients have chronic diseases e.g., arthritis and osteoporosis; asthma; chronic obstructive pulmonary disease; cancer; cardiovascular disease; diabetes, hepatitis and chronic kidney disease. Clients frequently have multiple comorbidities and often feel unwell and unable to manage daily tasks - such as contacting Housing NSW.
- Approx. 20% of clients have neurocognitive disease e.g., dementia and other neurological conditions which impacts on a client's ability to remember information (appointments); mobilise safely and perform tasks such as writing applications and letters.
- A significant number of clients are socially isolated and withdrawn (70% live alone) and some clients have little support if any, from family, friends and/or other community services.
- Even though HIV has been around for 30 years, many clients still report episodes of stigma and discrimination from within the broader community which impacts on their health and social wellbeing.
- Approx. 40% of clients report illicit drug use (this is under reported) and these impacts on the client's ability to function and attend to everyday tasks. Approximately 12% of clients have a forensic history which is often related to drug use and 12% have problematic alcohol use.
- A smaller number of clients also have major gambling issues which obviously impacts on one's ability to pay rent and other living expenses.
- On referral 10% of clients are homeless and therefore struggle to maintain tenancy and 65% are in public housing e.g., DOH, PRS, community housing and HIV supported housing.
- 83 % of clients are on the Disability Support Pension with most not receiving any additional income from casual and/or part-time work.
- Approx. 20% of clients are from culturally and linguistically diverse backgrounds and 5% are Aboriginal and Torres Strait Islander.
- Approximately 6% have been refugees and an increasing number of referrals have come from the Custody Release program through Justice Health. These clients need a lot of extra support to help assimilate into the community and obviously housing is a key factor.

## Housing issues identified

HIV Outreach Team - HIV and Related Programs Service, SES and Positive Central & Heterosexual HIV Service:

- **Crisis Accommodation** - there is a definite lack of crisis accommodation particularly for clients who have never been exposed to homelessness. Although there are places such as Oasis, Foster House, Matthew Talbot and Haymarket, there often always full and can be quite intimidating for people with HIV who are not used to these types of services.
- **Waiting times** - for assessment of Housing Pathways - application often 3-6 months for clients who may be homeless and with serious health conditions
- **Communication** - It would be helpful if there was a designated phone line for health staff to make client enquiries. Waiting times are extensive. This becomes a barrier for staff that are attending to clinical matters.
- It also appears to be quite easy for a client to become lost in the Housing system. Often staff do not have any identifiable contact person within the Department e.g., Client Services Officer. On occasion there have been examples where clients have not had anyone as their Client Services Officer because staffs have moved into another role.
- Once clients are registered for housing, they do not get updates to inform them where they are on the housing list e.g., in terms of their priority or whether they have moved up the list. Although the onus maybe on the client to contact NSW Housing this can be very stressful for those clients with complex care issues e.g., drug and alcohol issues, chronic medical issues, anxiety and depression.
- Often if Housing request health staff provide more information (e.g., a letter to support a client's housing application), there is no feedback as to the status of the application.
- **Support for clients with complex issues** - there is little or no support for clients who are ill or have mental health issues and have been approved for PRS to find properties, especially on weekends. This can be very challenging for clients.
- There is limited foresight or flexibility in the system for the types of clients who do not meet housing criteria e.g., around their income threshold, particularly for the working poor.
- It is the HIV Community Team's impression that there is generally a lack of tolerance from housing providers for clients with poor behaviours e.g., particularly around engagement, poor house cleaning habits, etc. More patience, empathy and compassion are required for clients with mental health and psychological issues.
- There is also limited tolerance for clients who are assessed as living in borderline squalor, often moving down the eviction path as opposed to finding other solutions first. This approach really just moves the problem on to somewhere else and often becomes a more compounding problem.
- Violence is no longer recognised as a reason for requesting housing transfer. Yet, HIV related stigma and violence and/or homophobic stigma and violence continue to be major problems for some clients.
- Home modifications & safety of clients is not being done despite formal application and follow up. Occupational Therapists are unable to contact anyone who will agree to approve them. The following feedback was received from an OT working for the Positive Central service - As an OT I have great difficulty in getting basic home modifications completed to ensure people's safety in their housing accommodation. We are now spending a lot of time chasing up home modifications (a lot of time on the phone chasing referrals for mods and staying on hold with

little response to concerns) . It is putting clients at risk in their home. It would be good if there were some answers as to why this is occurring

**David Murray | Program Manager | HIV Outreach Team  
HARP Service**



**Pene Manolas**  
Manager Community HIV Services (Positive Central & Heterosexual HIV Service) |  
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## ACON Housing Services Sydney

The ACON Housing project assists people with HIV and members of the gay, lesbian, bisexual and transgender (GLBT) community, who are on low or limited incomes. The following is an approximate number of managed and one-off client services at ACON offices in Sydney, Newcastle and Lismore.

Managed clients	One-off incident of services	Location
150	450	Elizabeth Street Surry Hills
20	80	Hunter
30	100	Northern Rivers

Issues raised by ACON clients and ACON support workers include:

- **Affordability** - while health issues are significant for clients presenting to ACON, affordability is also an issue. Some people are unable to maintain full private rental due to limited income (Disability Support Pension or Newstart). For those on Newstart, the loss of employment can be due to a range of health and social factors. Private rental is highly competitive and expensive in Sydney. While Housing NSW asks clients to seek out alternative, boarding Houses and Guest Houses, studios, bedsits, are also expensive for those on a Centrelink income varying from \$160 - \$300 per week. There are few properties available.
- **Communication** - lack of information on when PRS is declined or even when considered. No formal documentation that PRS has been considered, rejected and the reason. Lack of information hinders the client's ability to appeal.
- **Support for client's issues** - when clients complain about issues with a Housing NSW Client Services Officer, little or nothing is done. There is an insistence that the complaint be in



writing, the document is scanned and date stamped and returned to the client. Still little is done.

- Clients who are undergoing harassment and vilification from other tenants have fear of reporting this to HNSW due to the fear of further victimisation by the persons they are complaining about.
- Clients are more likely to be harassed and vilified around their sexual orientation rather than HIV status. Their HIV status is not generally known. However if a client's HIV status becomes known, there can be further harassment and vilification.
- Clients do not complain to Housing NSW as they see complaints as futile.
- Same Sex domestic violence does not seem to be taken into consideration when offering a suitable housing offer.
- Clients are afraid to enter into consideration for Housing NSW properties especially the High rise complexes. This is due to fear of being targeted, harassed and vilified from others in Housing NSW properties with complex issues.
- Housing NSW Client Services Officers are very hard to see and talk to. There is limited privacy in the Housing NSW offices.
- Clients feel pressured into making decisions.

#### Raymond Webb Housing Project, ACON

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### ACON Housing Services Lismore

It should be point out that relationship and cooperation from the Lismore office assists ACON client in the region. Staffs are compassionate and professional.

However a range of systemic issues are reported:

- **Waiting times** - length of time for applications to be processed for new applicants has increased. Staff in regional offices are under pressure, appear poorly resourced and dealing with increased complexity of need from applicants.
- Length of time for applicants already approved in one region to be accepted into another region appears to have increased.
- Offers of suitable accommodation for persons approved to transfer is excessively long. Length of time before an offer is made can be up to 4 years.
- **PRS change** - has increased time length for approval. This is particularly hard on new applicants living with HIV who are already compromised. The uncertainty of accommodation impacts on their ability to manage their physical and mental health, link in with practitioners, and adversely impacts on adherence to medications and further increasing health vulnerability.
- **Cost** - increase in cost of private rental in the Northern Rivers region is impacting on clients supported on DSP, and increasing the number of applicants requiring assistance either into public/social housing stock or PRS.



**Marie Reilly, A/Manager Northern Rivers ACON**

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If you require further information in relation to the matters raised in this submission, please do not hesitate to contact me.

**Yours sincerely**  
**Lance Feeney**  
**Positive Life NSW**  
**Advocacy**

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## Attachment 1

**Table 5: Number of people living with diagnosed HIV by statistical region and year**

	Year			
	1990	2000	2010	2020
<b>Australia (Total)</b>	<b>9580</b>	<b>14161</b>	<b>20956</b>	<b>28422</b>
<b>NSW</b>	<b>6001</b>	<b>8059</b>	<b>9924</b>	<b>11721</b>
<b>Sydney</b>	<b>4863</b>	<b>6485</b>	<b>7852</b>	<b>9082</b>
Inner Sydney	1398	1953	2268	2471
Eastern Suburbs	596	954	1036	1099
St George-Sutherland	445	505	611	730
Canterbury-Bankstown	264	318	423	507
Fairfield-Liverpool	162	276	335	371
Outer South Western Sydney	78	132	169	216
Inner Western Sydney	393	354	414	481
Central Western Sydney	386	370	427	483
North Western Sydney	454	467	554	681
Lower Northern Sydney	245	428	568	680
Central Northern Sydney	174	314	461	601
Northern Beaches	117	191	289	383
Gosford-Wyong	151	222	296	380
<b>NSW Rural</b>	<b>1138</b>	<b>1574</b>	<b>2072</b>	<b>2638</b>
Hunter	335	433	542	681
Illawarra	167	267	342	423
South Eastern	47	92	145	211
Richmond-Tweed	186	240	300	368
Mid-North Coast	187	220	286	351
Northern	34	66	109	146
Far West-North Western	29	47	63	85
Central West	97	118	135	159
Murray-Murrumbidgee	56	92	149	214

Source: D Wilson (2010) *Mapping HIV outcomes: geographical and clinical forecasts of numbers of people living with HIV in Australia*, National Centre in HIV Epidemiology and Clinical Research, Table 5: Number of people living with diagnosed Hiv by statistical region and year, p21.





