



INNER-CITY SYDNEY ABORIGINAL HOMELESS RESEARCH PROJECT

VOLUME 1

Consultant
Architects and
Anthropologists
in Aboriginal
Projects

by

**Paul Memmott, Catherine Chambers, Angie Pitts, Richard Green
and Pam Ingram**

DR PAUL MEMMOTT

B Arch (Hons), Ph. D. (Qld), F.R.A.I.A.
Assoc. Prof.

OFFICE

Aboriginal Environments
Research Centre
Room 517, Zelman Cowen Bldg.
Staffhouse Road
University of Queensland

MAILING ADDRESS

PO Box 114, St Lucia, Q 4067

TELEPHONE

(07) 3365 3660

FACSIMILE

PAUL MEMMOTT & ASSOCIATES

in conjunction with the
Aboriginal Environments Research Centre, University of Queensland
I.B. Fell Research Centre, University of Sydney

Final Report

3 March 2005

LIST OF CONTENTS

VOLUME 1

List of Abbreviations & Acronyms	iii
Acknowledgements	iv
Executive Summary – Inner-City Sydney Aboriginal Homeless Project	v

CHAPTER 1:

INTRODUCTION	1
NSW Partnership Against Homelessness Initiative	1
Study Aims	1
Working Definition of Study Area and Study Target Groups.....	2
Project Methodology	3
Progressive and summative evaluation of research (Stages 1 to 4).....	5
Expected Outcomes	8

CHAPTER 2:

LITERATURE ANALYSIS FINDINGS	10
Introduction	10
Categories of Indigenous Homelessness	10
The At-Risk-of-Homelessness / Hidden Homelessness Category	12
Spiritually Homeless	15
Summary of Categories of Indigenous Homelessness	16
Practice Responses to Indigenous Public Place Dwelling and Homelessness	18
Conclusion on Response Categories	20
Implications for the Current Study	21

CHAPTER 3:

PROFILES OF SERVICE PROVIDERS	23
Chapter Aims and Methods	23
Listing of the Organisations Profiled According to Response Categories	23
3.1 Legislative (Policy) and Police Approaches.....	24
3.2 Patrols and Outreach Services	24
3.3 Diversionary Strategies	26
3.4 Addressing Anti-Social Behaviour.....	26
3.5 Philosophies of Client Interaction	27
3.6 Alcohol & Drug Strategies	27
3.7 Regional Strategies.....	29
3.8 Accommodation Options (Crisis or Emergency, Medium Term & Long Term).....	29
3.9 Dedicated Service Centres and Gathering Places.....	33
3.10 The Physical Design of Public Places	34
3.11 Education Strategies for Non-Indigenous People.....	34
3.12 Phone-in Services	34
3.13 Skills and Training for Field and Outreach Workers	35
3.14 Partnerships	35
3.15 Holistic Approaches	36
Discussion of Service Provision Gaps.....	38

CHAPTER 4:

FINDINGS FROM INTERVIEWS AND FIELD RESEARCH	42
Chapter Aim	42
Profiles of Aboriginal Public Place Dwelling Groups Encountered in the Study	42
Analysis of Interviews with Public Place Dwelling and Insecurely Housed Aboriginal Persons.....	48
Conclusion.....	54

CHAPTER 5:

CASE STUDIES OF HOMELESS PEOPLE & PATHWAYS IN AND PATHWAYS OUT	62
Public Place Dwellers.....	62
Case Study 1	62
Case Study 2	63
Case Study 3	65
Case Study 4	66
Case Study 5	66
Case Study 6	66
Case Study 7	67
Insecurely Housed	69
Case Study 8	69
Case Study 9	70
Case Study 10.....	70
Case Study 11	71

CHAPTER 6:

STRATEGIES AND RECOMMENDATIONS	73
---	-----------

Chapter Aims	73
Portrait of Inner City Sydney Aboriginal Homelessness	73
Recommendations Regarding Service Provision	78

<i>BIBLIOGRAPHY ON INDIGENOUS HOMELESSNESS</i>	88
---	-----------

VOLUME 2: APPENDICES

APPENDIX 1:

THE TWO QUESTIONNAIRES USED FOR INTERVIEWING HOMELESS ABORIGINAL PEOPLE AND THE REFERRAL FORM TO SERVICE PROVIDERS

APPENDIX 2:

PROFILES OF ORGANISATIONS SERVICING HOMELESS PEOPLE IN INNER-CITY SYDNEY

LIST OF ABBREVIATIONS & ACRONYMS

AA	Alcoholics Anonymous
ABS	Australian Bureau of Statistics
ACDP	Aboriginal Communities Development Program, NSW
ACS	Aboriginal Children's Service, NSW
ACT	Australian Capital Territory
ACON	Aids Council of NSW
ACWA	Association of Childrens Welfare Agencies
AERC	Aboriginal Environments Research Centre
AHC	Aboriginal Housing Company, NSW
AHL	Aboriginal Hostels Limited, NSW
AHMRC	Aboriginal Health and Medial Research Council, NSW
AHO	Aboriginal Housing Office, NSW
AHURI	Australian Housing and Urban Research Institute
AIC	Australian Institute of Criminology
AIDS	Acquired Immune Deficiency Syndrome
AMS	Aboriginal Medical Service Co-op Ltd, NSW
A.P.	Angela Pitts (sub-consultant to Paul Memmott & Associates)
APO	Australian Policy Online
A.R.	Allen Raisen, SAAP
ATSI	Aboriginal and Torres Strait Islander
ATSIC	Aboriginal and Torres Strait Islander Commission
AWP	A Woman's Place, NSW
Cat.	Catalogue
CBD	Central Business District
CDEPs	Community Development and Employment Projects
CEO	Chief Executive Officer
CHG	Community Hostel Grants Program
CoS	City of Sydney (Council), NSW
CRASH	Construction Industry for Relief and Assistance for Sydney's Homeless, NSW
CSAHS	Central Sydney Area Health Service, NSW
CSC	City of Sydney Council, NSW
CSGP	Community Services Grants Program
CSOS	City Street Outreach Service, NSW
DATSIP	Department of Aboriginal and Torres Strait Islander Policy, NSW
DoCS	Department of Community Services, NSW
DOH	Department of Housing, NSW
DSP	Disability Support Pension
ESTP	Empty Spaces, Temporary Places
FaCS	Department of Family and Community Services, NSW
F.R.	Felicity Reynolds, CoS
GLBT	Gay, Lesbian, Bisexual, Transgender
GP	General Practitioner
HAT	Homelessness Action Team, NSW
HATSOS	Homelessness Action Team Support and Outreach Service (NSW Dept of Housing), NSW
HFA	Housing for Aborigines, NSW
HIV	Human Immunodeficiency Virus
HOT	Health Outreach Team Project, NSW
HPIC	Homeless Persons Information Centre, NSW
IB	Ian Buchan Fell Research Centre, NSW
ICLA	Independent Community Living Association Inc, NSW
I.D.	Identification
IDU	Intravenous Drug Use
IFSS	Redfern-Waterloo Intensive Family Support Service, NSW
IPU	Intoxicated Persons Unit, Campbell House, NSW
ISPs	Individual Support Plans
JGOS	Joint Guarantee of Service
KRC	Kirketon Road Centre (Southern Eastern Sydney Area Health Service), NSW
LAC	Local Area Coverage
LGA	Local Government Association
MSHP	Men's Supported Housing Program (Mission Australia), NSW
MSIC	Sydney Medically Supervised Injecting Centre, NSW
NA	Narcotics Anonymous, NSW
NACCHO	National Aboriginal Community Controlled Health Organisation, NSW
NADA	Network of Alcohol and Drug Agencies
NCOSS	NSW Council of Social Services
n.d.	no date
NESB	Non-English Speaking Background
NGO	Non-government organization
NSW	New South Wales
NYCH	National Youth Coalition for Housing, NSW
NZ	New Zealand
Omg	Operational Management Group
PAH	Partnerships Against Homelessness (NSW)
p.c.	personal communication
PDF	Portable Document Format

PFLAG	Parent and Friends of Lesbians and Gays
P.I.	Pamela Ingram (employee of PMA)
P.M.	Paul Memmott
PMA	Paul Memmott & Associates
Qld	Queensland
RAHC	Regional Aboriginal Housing Committee, NSW, of DOH
RSCs	Recovery Service Centres
REPIDU	Resource and Education Program for Injecting Drug Users, NSW
R.G.	Richard Green (employee of PMA)
RPAH	Royal Prince Alfred Hospital
RSCs	Recovery Service Centres
RWA	Redfern Waterloo Authority, NSW
RWPP	Redfern Waterloo Partnership Project, NSW
RWST	Redfern Waterloo Street Team
SAAP	Supported Accommodation Assistance Program, NSW Department of Community Services
SNDS	Special Needs Dental Service, Campbell House, NSW
STDs	Sexually Transmitted Diseases
SWOP	Sex Workers Outreach Project, NSW
TAFE	Tertiary Adult Further Education
T.O.R.	Terms of Reference for the Study
U.K.	United Kingdom
UNSW	University of New South Wales
UQ	University of Queensland
US	University of Sydney
UTS	University of Technology Sydney
W.A.	Western Australia
WAGEC	Womens' and Girls' Emergency Centre Inc
WHO's	We Help Ourselves
WISH	Women in Supported Housing (Mission Australia), NSW
WRM	NSW Women's Refuge Movement
WRRC	Women's Refuge Resource Centre, NSW
YAA	Youth Accommodation Association, NSW
YDAC	Youth Drug and Alcohol Court, NSW
YMCA	Young Mens Christian Association
YWCA	Young Womens Christian Association

ACKNOWLEDGEMENTS

Staff of the NSW Aboriginal Housing Office for project administration and logistic support:- Russel Taylor, Ross Hampton, Julie Morgan, Nathan Moran.

Staff of the Aboriginal Environments Research Centre for report production: Lee Sheppard, Linda Thomson, Carolyn Nottingham.

Staff of the Ian Buchan Fell Research Centre for Project Management support: Colin James, Sue Clarke.

Aboriginal Housing Office Redfern, for occasional use of its premises and resources.

EXECUTIVE SUMMARY – INNER-CITY SYDNEY ABORIGINAL HOMELESS PROJECT

Introduction (Research Aims and Methods)

The Inner-City Sydney Aboriginal Homeless Research Project was commissioned by the New South Wales Government's Aboriginal Housing Office (AHO) as a part of the *Partnership Against Homelessness* initiative, which was established to "co-ordinate and improve a wide range of housing and support services for homeless people" (NSW, Dept of Housing, 2002A). Its detailed aims were to:

- (1) To investigate types of inner-city Aboriginal homelessness;
- (2) To map pathways for Aboriginal persons/families/groups in the inner-city into, within and out of homelessness;
- (3) To provide strategies to address immediate and on-going accommodation, support or other needs expressed by participants;
- (4) To identify effects of government policies on Aboriginal persons experiencing homelessness in the inner-city;
- (5) To train Aboriginal researchers so as to build research capacity; and
- (6) To inform the Partnership Against Homelessness to support the implementation of targeted projects to address the needs of homeless men and women and to inform the homeless service system generally. (NSW Aboriginal Housing Office, 2004, p. 2.)

At the outset of research work in May 2004 a number of potentially relevant groups and territories had been defined through the research team's previous experience of the study area (refer to Figure A following). As fieldwork progressed, social profiles of a number of distinct Aboriginal homeless groups subsisting in the inner city Sydney area at the time of the survey began to emerge. By the end it was possible to describe the existence and social characteristics of six groups:

1. Redfern/Waterloo dwellers (Group A);
2. Newton dwellers (Group B);
3. Central Railway Station dwellers (Group C);
4. City/Town Hall dwellers (Group D);
5. Kings Cross/Darlinghurst dwellers (Group E);
6. Broadway/Glebe dwellers (Group F).

[Note: A written profile was composed for each of these groups and is included at the beginning of Chapter 4. A map showing the physical relationship between the general territorial ranges of each group accompanies these descriptions.]

The research project tasks included literature review and analysis, interview data collection and analysis, compilation of service provider profiles, and collation of data and literature in a report. Paul Memmott & Associates had compiled a large body of published and unpublished literature on Indigenous homelessness during a number of significant recent projects which it had conducted. This collection was drawn upon for the literature analysis contained in the current report, and is included in its bibliography. The profiles of service provider organisations were compiled using notes from a number of stakeholder workshops and interviews, a collection of relevant literature, and resources available online. The profiles were given to the relevant contacts for review and comment.

A total of 53 homeless persons were interviewed using either of two questionnaires designed for use during this project (refer Appendix 1). The field team was able to effectively target six people for follow-up interviews. Five agreed to have their interview sessions recorded on cassette tape. In addition to these one-on-one structured interviews, informal interviewing occurred to aid the development of the homeless group profiles, addressing such issues as group identity, territory ('beat'), accessed services and perceived lifestyle issues. It was required that the field research be qualitative, incorporating aspects of participatory action research and narrative data gathering. The process was also reflexive, allowing for changes to be incorporated as work proceeded and as new insights emerged into how best to gather and analyse the information being received. The locally based field researchers were employed to engage with the relevant communities and potential participants over a period of six months. Two Aboriginal research assistants were employed as field workers: Mr Richard Green of the Daruk language group and Ms Pam Ingram of the Wiradjuri language group. Both were long-term residents of inner city Sydney and familiar with its Aboriginal community. Their team leader was Ms Angela Pitts, a part-time social planning consultant to the Aboriginal Housing Company in Redfern who was also carrying out doctoral research at the University of Sydney.

As the project evolved, the Aboriginal Housing Office established two committees. The first was called the Project Steering Committee comprising representatives of a range of Aboriginal, non-government and local authority agencies providing services to homeless people in Sydney. The second was called the Reference Group and comprised Aboriginal representatives from both government and NGO agencies.

The project brief required that field researchers respond directly to the requests and apparent needs of the Aboriginal homeless people interviewed, in regards to accommodation and support, by referring them to services or agencies in a manner guided and informed by the Project Advisory Committee. To achieve this goal, interviewees were invited to complete an Agency Referral Form, which was to be forwarded through the Aboriginal Housing Office to the particular agency for action.

Categories of Indigenous Homelessness

This section contains a summary of the findings from a survey of the relevant literature and various responses to Indigenous public place dwelling and homelessness across Australia that was conducted during 2002 (Memmott, Long & Chambers 2002). This extensive work has generated three categories of Indigenous homelessness—public place dwellers, those at-risk of homelessness (also known as ‘hidden homelessness’), and the spiritually homeless—which are described in the table following. The work also generated a list of 15 ‘response types’, a term that the authors employ to refer to a broad range of initiatives including philosophies, policies, programs, services, strategies, methodologies, legislations and activities that are aimed at addressing the needs of Indigenous people who are homeless and/or residing in public places. [The response categories used for this study were: Legislative (Policy) and Police Approaches, Patrols and Outreach Service, Diversionary Strategies, Addressing Anti-social Behaviour, Philosophies of Client Interaction, Alcohol and Drug Strategies, Regional Strategies, Accommodation Strategies, Dedicated Service Centres and Gathering Places, Physical Design of Public Places, Education Strategies for Non-Indigenous People, Phone-in Services, Skills and Training for Field and Outreach Workers, Partnerships and Holistic Approaches.]

Table: Categories of Indigenous Homeless People

Note: These are not mutually exclusive categories.

1. PUBLIC PLACE DWELLERS.	Living in a mix of public or semi-public places (as well as some private places, which are entered illegally at night to gain overnight shelter) eg parks, churches, verandahs, carparks, drains, riverbanks, dilapidated buildings.
1.1 Public place dwellers – voluntary, short-term intermittent.	These people are often staying in conventional accommodation (eg a relative’s house) and may have their own residence in a rural or remote settlement. When they socialise in public urban places, they may or may not decide to camp out overnight, usually with others, despite the availability of accommodation.
1.2 Public place dwellers – voluntary, medium-term.	Residing continually in public places (including overnight); acknowledge they have another place of residence in a home community but uncertain if and when they will return.
1.3 Public place-dwellers – voluntary, long-term (chronic homeless).	Residing continually in public places (including overnight); it is unclear whether it is possible for such individuals to readily reconcile with their home community/family due to a range of emotional barriers; they have come to regard a beat of public places as their ‘home’.
1.4 Public place-dwellers - Reluctant and by necessity.	Residing continually in public places, and who (a) Wish to return home but need to remain in urban area due to a service need or to support a hospitalized relative or similar; or (b) Wish to return home but no funds for travel and/or capacity to organize travel.
2.0 THOSE AT RISK OF HOMELESSNESS / HIDDEN HOMELESSNESS	At risk of losing house or of losing the amenity of house.
2.1 Insecurely housed people. [Olive 1992, ABS 1999A.]	Residing in adequate housing but under threat of losing it; lack of secure tenure; possibly due to circumstances of poverty.
2.2 People in sub-standard housing. [Olive 1992.]	Persons whose housing is of a sub-standard architectural quality, possibly unsafe or unhealthy housing [but raises issue of cultural standards.]
2.3 People experiencing crowded housing. [Olive 1992: 2,3, Keys Young 1998:iv, Memmott 1991:258-261.]	Persons whose housing is crowded [but crowding should be defined as involving considerable stress (and not ascertained by density measures alone).]
2.4 Dysfunctionally mobile persons. [Olive 1992, Keys Young 1998, ABS 1999A, Berry et al 2001.]	In a state of continual or intermittent residential mobility incl. temporary residence (eg crisis accommodation) that is a result of personal and/or social problems (eg violence, alcohol and substance abuse, personality or ‘identity crisis’, lack of emotional support and security).
3.0 SPIRITUALLY HOMELESS PEOPLE. [Berry et al 2001:34-43, Keys Young 1998.]	A state arising from: (a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one’s understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused

Portrait of Inner City Sydney Aboriginal Homelessness

This brief portrait of the Aboriginal homeless of inner city Sydney, both public place dwellers and the insecurely housed (hidden homelessness), draws on the information contained in Chapters 4 and 5 of this report. The field research conducted as part of this study revealed that approximately six distinct Aboriginal homeless groups or 'mobs' operated in the inner city of Sydney (see previous listing). They quite frequently moved between areas, however, they largely operated within a set of clearly designated territories. They often functioned like a family unit, looking after one another's personal possessions and safety. Each one identified strongly with the society of its members and exhibited a political dynamic. Certain protocols had to be observed when entering or engaging with the different groups.

The majority of the Redfern/Waterloo mob (Group A) socialised and gathered at the Block and the Redfern Post Office. Many members slept rough at the Block, some constructing makeshift dwellings that were regularly removed by Council. Others made their way to family and/or squats around Newtown and Glebe. The key issues for the Block involved drug and alcohol consumption and drug-related crime. Most of the Newtown mob (Group B) were found to live in squats and frequently begged on King Street near the Newtown Square, and around Redfern railway station and its Post Office. They also socialised at the Square, the suburb's Post Office and on the Block. This group were considered a very tight knit family unit that shared all its resources. The majority were alcoholics. The Central Railway Station group (C) largely slept rough at Belmore Park, although some members slept in parks around Surry Hills and the city. Central Station was usually the first stop for transients arriving from outside of Sydney. While most moved off to find family and friends on the Block, some remained, particularly Queenslanders. The group was found to socialise and beg at Belmore Park and the railway station, but also in Newtown and Redfern. Again, the majority were alcoholics.

The City/Town Hall mob (Group D) slept rough at the Town Hall/Cathedral Square off George Street and in Hyde Park, also socialising in these locations. Some members slept at the Belmore and Domain Parks, while others were found begging at Circular Quay, Hyde Park and the Town Hall. Most were alcoholics. It was observed that some of this group socialised with people from their hometown or region. The Kings Cross/Darlinghurst group (E) slept at various places around the Kings Cross area, including Potts Point and Woolloomooloo. Some members slept under concrete car parks near St Mary's Cathedral, while others lived in squats around the city. Still more lived outdoors. They usually socialised and begged at Kings Cross and its railway station, Oxford Street and Taylor Square, and their main meeting place was the Wayside Chapel. The group's members were not all Aboriginal. Most were heroin users, however some used speed and cocaine. A number of homeless transvestites and transsexuals working along the Oxford strip were observed. They had arrived for the 2000 Olympic Games and stayed, and almost all were from north Queensland. The Broadway/Glebe mob (Group F) slept rough around the Broadway area or in squats around Glebe. They were found socialising and begging at Glebe Point Road, the Broadway Shopping Centre and at Central Railway Station. Those interviewed were alcoholics and had developed related mental illnesses. Group members mingled with others with medical conditions who gathered near the Royal Prince Alfred Hospital psychiatric ward and rehabilitation clinic.

Pathways Into Homelessness

Here a general description will be made of the homeless Aboriginal people interviewed for this study. It is followed by discussion on a number of factors that lead people into homelessness and prevent them from being able to readily change their circumstances. The sample of homeless people interviewed included 37 public place dwellers and 16 insecurely housed individuals. The majority were aged between 25 and 45 years, and were most often male. Public place dwellers were significantly more likely to have been in their situation for five years or more, while the large majority of the insecurely housed had been so for between one and a few years. The interview data also revealed that both categories of homeless people moved between these states during their overall homeless careers. Only two of the respondents who had lived rough in the past had also rented a room or been a tenant in a residential property in the past. None had ever actually been responsible for a lease. Only one of the public place dwellers interviewed had rented a room or boarded in the past. The remainder had been staying with friends or relatives when not living on the streets or in squats.

A clear majority of interviewees came from regional and rural New South Wales, a large proportion of them originating in communities inland from the east coast. Just over one fifth of respondents were from Sydney. As a destination, Sydney was thought to provide better chances for employment and education. Significantly, in leaving their home communities, people also sought the excitement of a large city and were drawn by the fame of the Redfern Aboriginal community. Some people were also escaping the turmoil being experienced in their home communities and the toll being taken by elders dying without anyone assuming their cultural roles and duties. A significant majority of the people from elsewhere preferred to remain in Sydney. Other things that attracted people into the inner city, included: (a) the existing homeless population with its valuable advice for newcomers, (b) an array of places to seek immediate shelter, and (c) the availability of a range of services compared to other areas.

Mental & Physical Illness

While the interview data revealed that almost a quarter of respondents had been diagnosed or were suspected of suffering from a mental illness, the researchers witnessed a greater incidence of this problem on the streets across all the groups identified. A significant majority were public place dwellers, and almost half of these had been so for five years or more. As well, just over half of the respondents declared they were suffering from a physical illness; the large majority again being public place dwellers. The age group experiencing the highest incidence of physical illness was the 35 to 45 years olds. Slightly fewer than 17% of respondents were both mentally and physically ill, the vast majority of these people being public place dwellers. The woman described in Case Study No. 1 (Chapter 5) not only experienced a number of ailments related to living rough in cold conditions, such as lung problems, but her homelessness had also made her depressed. This was made worse by unresolved feelings regarding the rape, which had brought her to Sydney. This woman's cousin (also CS1), suffered a number of illnesses related to his alcohol consumption and life on the streets, in particular a psychosis that remained undiagnosed and untreated. All the interviewees suffering from a mental illness endured their conditions without medication or ongoing treatment. People with this level of disability require close monitoring and support to enable them to change their circumstances. And many require assistance in the long-term to ensure they remained securely housed. Often parents with mental illness had significantly compounded the instability of their children's living arrangements and been a factor in their homelessness.

Alcohol & Drugs

Across all the groups, the majority of the Aboriginal homeless interviewed were found to be alcoholics and/or addicted to drugs. The analysis of interview data revealed that proportionally within the samples obtained, almost twice as many public place dwellers as the insecurely housed were alcohol dependent, the large majority being men. And another significant majority of people who had been either homeless or insecurely housed for ten years or more were alcohol dependent. The proportion of drug addicted public place dwellers was almost three times that of the insecurely housed. And again a clear majority of drug users were men. Almost 14% of the total number interviewed were both alcohol and drug dependent, and nearly three-quarters of the people in this category had been public place dwellers for ten years or more. The Chapter 5 case studies clearly demonstrate the destruction caused by alcohol and drug addiction, and most particularly the threat that these problems represent to achieving secure housing. Two of the eight interviewees depicted were confirmed alcoholics, and an additional one regularly consumed alcohol to socialise with her group but claimed she was not addicted. Two more were addicted to both alcohol and drugs and another two were addicted specifically to heroin. This means six to seven of the eight cases presented in Chapter 5 involved serious alcohol or drug abuse. It must be accepted that for people with a long history of drug or alcohol abuse, the path to stability will be long and must be attended carefully by outside support agencies, otherwise people will slip back into homelessness.

Violence & Crime

Many of the interviewees cited violence as being a serious risk to life as a public place dweller. The male researcher described the situation of a number of female public place dwellers who were continually the victims of sexual and physical abuse at the hands of male transients. The Chapter 4 discussion of group identities revealed that this was a common pattern for how homeless women were treated. The majority of women interviewed were on the streets either because of domestic violence or sexual abuse from a family member.

Insecure Housing (Hidden Homelessness)

This research reiterates the fact that the issues of insecure tenure, overcrowded and substandard housing stock, and dysfunctional mobility are intertwined; they interact with one another over the course of people's lives. These factors combine with the other symptoms of disadvantage such as poor physical and mental health, or the reduced ability to cope with such difficulties, drug and alcohol abuse, and involvement with the criminal justice system to keep people teetering on the edge of a life of public place dwelling. Many of the insecurely housed interviewed were living as boarders, a circumstance inherently prone to change. A boarder's security relies on the behaviour of the head tenant, visitors and other boarders, and on the actions of the dwelling's owner. And with the Aboriginal community's cultural preference for household visiting and hosting larger numbers of such household visitors for longer periods than the general Australian population, the actions of such visitors are often less subject to control. These people can also overburden services that were not designed for such high loads. As outlined in Chapter 2 the concept of overcrowding does not purely revolve around density but must incorporate both the numbers and characteristics of occupants that cause stress. Case Study No. 9 demonstrates the kind of factors that indicate a dwelling is overcrowded. A male interviewee came to Sydney to study and improve his employment prospects, and felt that his overcrowded dwelling made him feel homeless. Eleven people and numerous visitors occupied his house, and despite everyone being polite and considerate, there was no privacy for the household's regular members. This man felt strongly about the issue of overcrowding in Aboriginal communities and households, and warned that other interviewees would lie rather than face reprisals from housing authorities over this issue. With regards to substandard conditions, all of the case studies reported that their residences were in need of maintenance, had basic facilities such as toilets and showers that were not working or had been in urgent need of repair for an extended period in the past. [Refer to the following discussion of young people for a consideration of dysfunctional mobility.]

Racism

Both of the Aboriginal field researchers believed that racism played a significant part in the level of Aboriginal homelessness. Aboriginal people experience more discrimination from housing providers than the general Australian population, as well as having lower levels of literacy and numeracy. These factors keep people marginalised.

Young People

Both field researchers reiterated the need to consider how young people are drawn into homelessness and how it can affect their adult lives. Understanding this situation was seen as vital to halting the increase in homelessness in the study area. The male researcher described how homelessness and the social problems that help produce and perpetuate it work across generations. Parents can pass their drug habits onto their children but the example they set as drug dealers also has a huge effect. Case Study No. 2 most clearly illustrates where homelessness or the risk of it can begin, and how dysfunctional mobility emerges and can lead to public place dwelling lifestyle. This woman's circumstances also provide a stark warning about the effect which family violence and abuse can have on young lives, particularly when the levels at which these crimes are occurring in Indigenous communities throughout Australia are considered. Her case demonstrates the value of intervening effectively in lives where dysfunctional mobility and insecure housing are factors. Another aspect of homelessness that affects children involves the number of people who have minor children for whom their situation prevents them from taking an active parental role. Where relatives care for such children there is the potential for them to slide into dysfunctional mobility if the relatives are not properly supported.

Spiritual Homelessness

The female field researcher believed that the issue of 'Koori homesickness' needed to be more fully addressed. Such feelings added to the already depressed emotional state that Aboriginal homeless people find themselves in. The separation from family and community connections that these individuals experience can have serious effects on their mental health. This explains why people from elsewhere are known to congregate together. The two basic points of introduction for Koori people are where a person is from and which 'mob' they belong to. Therefore people collect in a suburb like Redfern, to be near people known to them.

Conclusion

The discussion above illustrates the pathways people follow into homelessness. Often they are drawn to inner city Sydney by positive factors, because of a desire to better themselves through education or improved employment opportunities, or because of an ambition to live in a more exciting place. Often people leave their home communities for negative reasons such as the lack of opportunities and services, or the levels of violence and social upheaval being experienced there. Once in Sydney they can find their housing situation tenuous for a number of reasons. Sometimes a lack of pre-planning is involved or racism on the part of the rental market. And when congregating in Redfern where problems such as drug and alcohol abuse are severe, people can be drawn into these lifestyles. Once engaged, people can find it very difficult to extricate themselves from them. And a host of physical and mental ailments ensue. As people spend longer abusing alcohol or drugs and living rough with untreated physical and mental illnesses it becomes more and more difficult to find a way out of their predicament. Mental illness can drive people into homelessness as it severely destabilises families and lives. Domestic and family violence can also be a factor that directly brings most often women and children into homelessness. Unsupported prison release is another factor. The above discussion highlights the kinds of homelessness that are hidden from view, and the numbers of people who experience overcrowding and dysfunctional mobility, as well as sub-standard housing conditions, and who are generally not included when the homeless population is being counted.

Pathways Out of Homelessness

All of the interviewees had been eager to find a solution to their homeless situation and none identified as voluntarily dwelling in public places. However, some of the respondents said that they may still choose to spend time socialising in the public place dwelling group with whom they affiliate, even if they were to obtain stable accommodation.

The interview data was generally less revealing about potential pathways out of homelessness. Respondents were not as forthcoming or knowledgeable about how others of their acquaintance had accessed and/or maintained stable housing. And the research team did not have the capacity to investigate whether the examples provided had truly remained in secure accommodation. The majority of interviewees that did respond to this question believed that people had received help through the NSW Department of Housing but provided no further details. But certain conclusions can be drawn from the interviews and the pathways into homelessness that were identified. These can be considered in light of what previous research has revealed about successful strategies for dealing with Aboriginal homelessness. The case studies regarding young people reveal the importance of intervening early in situations where mental illness, unstable custodial arrangements or family violence are factors. These are serious concerns considering the level at which they are occurring in Aboriginal communities throughout Australia. With regard to mental illness and the effects of long-term alcohol and drug abuse, the previous discussion shows that intensive case management and ongoing support is vital to keeping people affected by these problems in stable accommodation. It also reveals the social cost inherent in having people spend long

periods of time as public place dwellers. A strategy to divert people from this course would be highly beneficial to the individuals themselves, but would also reduce the need to outlay lifelong support resources. A potential barrier to people moving out of homelessness characterised by substance abuse was created when people had to wait for rehabilitation accommodation after undergoing a detoxification program. This demonstrates that gaps between service providers can have a simple but powerful effect.

Another factor that was found to have influenced the homeless state of both the male Aboriginal researcher and a prominent local Aboriginal figure was the involvement of charismatic, commanding religious figures. Priests who provided not only practical support, but also spiritual and moral guidance helped both men out of homelessness. These figures and the religions they championed served as powerful influences in these men's lives. In some way such priests may have modelled some of the effective aspects of intensive case management, such as close attention to people's lives and making an effort to understand the things that have brought them into their current situation. This provides a channel and a focus that may be missing from a secular life.

Recommendations Regarding Service Provision

The need for appropriate Patrols and Outreach Services

Recommendation No. 1.1: Trained and properly resourced Aboriginal outreach workers

More trained Aboriginal counsellors or outreach workers are needed to maintain regular contact with the homeless, advise them and accompany them to service providers. A reliable source of recurrent funding must be identified. Also training and supervision must be provided.

Recommendation No. 1.2: Investigate feasibility of Night Patrol

The feasibility of an Aboriginal Night Patrol must be investigated. A number of difficult issues must be resolved. For example, it must be ascertained whether or not the patrol would only serve homeless people or also address other problems on the Block (a difficult agenda). It would also require one or more strong Elders or older people for leadership. The training, resourcing and support of someone who has already been carrying out this kind of work should be considered. Funds for vehicles, fuel and staff, as well as administration support must be located, either through the Crime Prevention Division within the NSW Attorney General's Department and local government, or from the NSW Department of Transport if the patrol became apart of a 'transport strategy'.

Recommendation No. 1.3: Develop a Transport Strategy and Service

Funds should be provided to improve existing transport services for homeless persons at risk, to train existing staff and employ Aboriginal ones, or to have such an organisation auspice a distinctly Aboriginal service. Additional aspects of a transport service that need to be considered include the transport of furniture to newly established accommodation, transporting people to funerals and monitoring the activities of juvenile street gangs.

The need for Diversionary Strategies

Recommendation No. 2.1: Aboriginal Sobering-up centre

While no specific mention of sobering up centres for Aboriginal people have appeared during this study, the research team believes a strategy for establishing such a facility for Aboriginal clients would be useful and could be linked to a night patrol or transport service. This could complement a managed Aboriginal Wet Centre in the vicinity of the Block.

The need for appropriate Alcohol & Drug Strategies

Recommendation No. 3.1: Inner city Sydney Aboriginal Drug and Alcohol Residential Rehabilitation Service

All existing Aboriginal drug and alcohol residential rehabilitation services are located outside the metropolitan area. The establishment of an inner Sydney Aboriginal service that can act as a 'halfway house' for people moving into these facilities must be investigated. People who have engaged in a detoxification process must be placed in a longer-term program or accommodation immediately without return to the streets where they will re-engage in substance abuse.

Recommendation No. 3.2: Additional funds to train and improve existing services

While the program profiling exercise did identify a number of short-term drug and alcohol facilities in operation in the relevant area of Sydney, none of these facilities appeared to have strategies for dealing with Aboriginal clients or encouraging them to utilise their services. Additional training could be provided to staff from existing services regarding culturally appropriate treatment of Aboriginal clients. Incentives for employing Aboriginal staff with the relevant training could be introduced. Such steps may serve to improve the situation for the Aboriginal homeless in the study area with drug and alcohol problems until Recommendation 3.1 is realised.

Recommendation No. 3.3: Link with the redevelopment of the Block

Any drug or alcohol rehabilitation facilities should consider the planned redevelopment of the Block. The implications of the role and powers of the new Redfern Waterloo Authority must be fully considered.

The need for appropriate Accommodation Options (Crisis or Emergency, Medium Term & Long Term)

Recommendation No. 4.1: Crisis Accommodation

The study area urgently requires culturally appropriate crisis accommodation facilities for all types of Aboriginal homeless people: men, women, families, youths and childless couples. The feasibility (or non-feasibility) of mixing these types of people should be closely investigated to establish how many facilities are actually required. In the meantime resources should be provided to some of the existing services to provide improved assistance to Aboriginal people.

Recommendation No. 4.2: Medium and Long Term Accommodation

Solid links must be provided for people moving between crisis accommodation and successful medium and long term accommodation options. More medium term options for women are required. Again, existing services could be funded to provide a more culturally appropriate service to Aboriginal clients.

Recommendation No. 4.3: Review of current AHO programs

The current programs that the Aboriginal Housing Office has operating need to be evaluated to consider how they might assist with the issues of hidden homelessness or the situation of the insecurely housed.

Recommendation No. 4.4: Transgender, gay and lesbian, sex worker services

Assistance must be provided to these groups of Aboriginal homeless people. The existing services may be resourced to improve or enhance their services to Aboriginal clients.

The need for appropriate Dedicated Service Centres and Gathering Places

Recommendation No. 5.1: Establishment of an Aboriginal Drop-in Centre

Two Aboriginal drop-in centres, one specifically for women, are required as a high priority. They must provide showers, laundry facilities, counselling, and relaxation facilities. They must also provide postal facilities and lockers. There is a need for a sensitive space to be created, both physical, social and mental, where relatively free of external pressure, homeless people can absorb information, obtain counsel, reflect on their circumstances, formulate goals and then seek assistance to find a pathway out of their predicament.

Recommendation No. 5.2: Establishment of Wet Areas

The establishment of wet areas must be further researched and considered. These efforts should be seen as part of a wider set of solutions to the Aboriginal homelessness crisis occurring in the study area.

The need for appropriate Physical Design of Public Places

Recommendation No. 6.1: Ensuring public place dwellers have access to basic public amenities

Despite the NSW State Government's 'Homeless Persons Protocol', and some significant efforts to adhere to it, the City of Sydney Council does not appear to have considered designing public places with the homeless and their needs in mind. A number of interviews revealed that through removing access to public toilets, the Council was attempting to reduce the use of certain city parks by homeless groups. Such an approach could be reconsidered; however the issues of safety and hygiene need to be investigated in parallel.

The need for better access to Phone-in Services

Recommendation No. 7.1: Link between phone-in services and outreach workers

Outreach workers must be trained to provide assistance with the relevant phone services that are available. Consider providing an Aboriginal Drop-in Centre with a freecall number to allow it to provide over-the-phone assistance.

The need for Skills and Training for Field and Outreach Workers

Recommendation No. 8.1: Develop and run training program for workers dealing with Aboriginal homeless people.

A program must be developed to train outreach and other workers who deal regularly with street dwellers. It should include the following topics: first aid, public place dweller lifestyle (street group identities and territories), and Aboriginal cultural awareness and sensitivity. Supplying such a program to non-Aboriginal workers would also improve their understanding of the circumstances people find themselves in and the concept of spiritual homelessness. Staff that manage accommodation facilities and drop-in centres require specialist training also. Having these programs run by the AMS should be investigated. One key aim of training would be to strengthen the cultural identity of Aboriginal fieldworkers and help them gain the necessary self-confidence and cultural skills to carry out their work. An allowance should be made for ongoing training and improvement of skills. Linkages should be pursued with the organisations listed in Chapter 3 that provide training to people working with gender issues and gay and lesbian homeless youth, as well as sex workers. An investigation of which organisation or education agency can develop such a training scheme must be made.

The need for Partnerships & Holistic Approaches

Recommendation No. 9.1: Coordination of Aboriginal homeless services

What is apparent is that a lead Indigenous agency or body that might drive any holistic approaches to the issue of Aboriginal homelessness in the study area is missing. This study has revealed a need for a Regional Plan for Inner-City Homelessness, approved by the NSW Department of Aboriginal Affairs, which links all State-based services with relevant Aboriginal services. Both the Commonwealth Department of Families and Community Services and the Local Government (City of Sydney) must be partners. An Indigenous coordination centre or team, founded in the community-controlled groups from the area, would be desirable. The Advisory and Reference Committees formed as a part of this study should be maintained and grow to include service providers and more government agencies. The Reference Committee could steer the directives of the overarching group. Its membership must be boosted to include representatives from each relevant Aboriginal organisation in the area to ensure ownership is shared. Further, a role of the overarching *Partnerships* committee would be to ensure that work is not duplicated. It should also consider the methods and means by which to resource smaller organisations to form partnerships with other agencies. A number of charitable organisations operate a range of programs that seek to address the various issues involved in the homeless experience. These organisations and the coordinated effort required to take a holistic approach could serve as useful models for addressing Aboriginal homelessness in the study area. However, more programs are needed with an Aboriginal focus and understanding of the spectrum of disadvantage they occupy. Also the NSW Government, through its *Partnerships Against Homelessness* initiative, has demonstrated its understanding of the importance of a whole-of-government approach. It should play a key role on the overarching committee.

Recommendation No. 9.2: Inventory of relevant services

It is essential that an inventory of services relevant to the Aboriginal homeless population of inner city Sydney is maintained and made available to workers who come in contact with Aboriginal homeless people. Such an inventory would be an essential tool for a Steering Committee attempting to make sensible planning decisions.

Categories with no Strategies

For a number of service response categories, the research team has not devised any strategies. It would be useful to consider a strategy or philosophy of Client Interaction as the themes of trust and cultural inappropriateness arose continually when the people interviewed discussed why the Aboriginal homeless did not access the many services available in the area. With regard to education strategies for non-Indigenous people, the City of Sydney's Social Planning Coordinator, described a great deal of conflict and disharmony existing between non-Indigenous people and the Indigenous homeless population of the study area. This suggests that developing these kinds of strategies could prove useful in reducing such tension.

Note Regarding Mental Illness Strategies

Given the number of homeless people suffering from a mental illness, as asserted by the research staff and a number of service providers, the research team was unable to document a clear regard for what this means in terms of people's ability to help themselves. There may be a need for this issue to be assigned a specific response category. People suffering with mental illness require ongoing support to help them maintain stable accommodation, and this fact requires attention and related funding.

Researchers Evaluate Effectiveness of Research Approach

The female researcher reported that the survey was positively received by everyone she encountered. The male researcher also recounted that awareness of the survey had been widespread. However, he did report that certain people had been very reluctant to be questioned about issues and episodes from their past lives as these were painful and elicited a range of strong emotions, particularly anger and resentment. He also noted that a number of people avoided being involved in the study, such as sex workers and transgender people. Further, he believed that there were many Indigenous public place dwellers who would avoid being counted or interviewed because they had lost faith in the Aboriginal organisations that were meant to assist them, believing that they only served people from certain families. The comment was also made that people under the age of 18 were not interviewed, despite the fact that they form a significant proportion of the homeless population.

The female researcher described the study area as accurately encompassing the key parts of metropolitan Sydney where Aboriginal homelessness occurs. However, she believed that it was difficult to count the numbers of homeless people in the area because of the shifting nature of the population. This researcher also emphasised that even the number of the area's Aboriginal residents was not known because they were reluctant to give information as part of the Census. With regards to the people who would fall into the insecurely housed category, the researcher stated that the statistics do not reflect the actual numbers of people without appropriate and secure housing.

Summary of impacts of existing services (effects and non effects)

The research team discovered that Aboriginal homeless people do not use the mainstream accommodation services, such as those run by the major charitable organisations, to a great extent. They access day services such as health clinics and meals, and to an extent use overnight accommodation facilities, but they do not participate in their longer-term accommodation and rehabilitation services or programs. The field researchers revealed a number of instances where the practices of government departments form barriers to people exiting their homeless situations. For example, Department of Housing requirements regarding responses to offers of accommodation being submitted within seven days do not take account of how homeless people live and the difficulties they encounter with receiving and responding to official correspondence.

Summary of the recommended Strategy to alleviate Aboriginal homelessness

This study recommends that a coordination team be assembled to ensure that holistic approaches, relying heavily on partnerships between existing service providers and agencies, are enacted to assist the Aboriginal homeless population of inner city Sydney. This coordination team should comprise of an overarching Partnerships Committee that includes all the relevant State and Commonwealth government agencies, and a Steering Committee comprised of the relevant Aboriginal organisations operating in the area, as well as other mainstream services. The Steering Committee should be led by the Aboriginal agencies to found it in the concerns of the local community. This coordination team should supervise the creation of a number of culturally appropriate services, such as a range of accommodation options and a number of drop-in centres. Such facilities could serve as the bases from which the other elements of a homelessness strategy could operate. These other elements include a trained team of outreach workers, and in-house case management and counselling staff. It must be ensured that when people move between steps in the overall process, for example when they move from crisis accommodation into a drug rehabilitation program, they are not forced to return to the streets. Services for women and children escaping family violence must be improved, as should those targeting transgender individuals, sex workers, and gay and lesbian people. The effects of mental illness must be given more expert attention. A solution for the short to medium term may be to fund mainstream organisations to improve their services to the Aboriginal homeless.

CHAPTER 1: INTRODUCTION

NSW Partnership Against Homelessness Initiative

The Inner-City Sydney Aboriginal Homeless Research Project was commissioned by the New South Wales Government's Aboriginal Housing Office (AHO) as a part of the Partnership Against Homelessness initiative, which was established in 1999 to "co-ordinate and improve a wide range of housing and support services for homeless people in" that state (NSW, Dept of Housing, 2002A). The Partnership involves eleven State Government agencies and aims to:

- (i) assist homeless people to access relevant services;
- (ii) co-ordinate support services or get agencies working together;
- (iii) improve access to temporary or crisis accommodation;
- (iv) assist the move from crisis or temporary accommodation to long term accommodation.

Its members are as follows:

- "Department of Housing (including the Office of Community Housing) [Lead Agency]
- Aboriginal Housing Office
- Department of Community Services
- NSW Health
- Department of Ageing, Disability and Home Care
- Department of Fair Trading
- Department for Women
- Department of Corrective Services
- Department of Juvenile Justice
- The Premier's Department
- The Cabinet Office." (NSW Aboriginal Housing Office, 2004, p. 1.)

Study Aims

The broad aim of this study, as outlined in the project's briefing document, was to examine the specific needs of homeless Aboriginal men and women in the inner city of Sydney, so as to assist agencies in developing appropriate strategies. (NSW Aboriginal Housing Office, 2004, p. 1.) The following passage refers to the diverse nature of Aboriginal homelessness in inner city Sydney and reflects the project's direction with regards to investigating its many facets.

"One of the precursors to this proposed research is the recognition that there is poor understanding of the different ways in which Aboriginal homelessness may be experienced and expressed in the inner-city and that there are myths around Aboriginal homelessness. There are misunderstandings about Aboriginal persons' use of public spaces as well as about what constitutes suitable and appropriate accommodation for Aboriginal persons and families. Just counting those Aboriginal persons who appear to be living on the streets and who are using homeless services is inadequate. Such persons may not perceive themselves to be homeless and in fact may be using public space and services as a supplement to the accommodation they we have. On the other hand, there may be Aboriginal persons and families who are known by the community to be homeless but who are not visible because they are sleeping at family or friends' places, in refuges or in some form of inadequate accommodation. In other words there may be many kinds of Aboriginal inner-city homelessness. It is not possible to understand the extent of inner-city Aboriginal homelessness until there is an understanding of the different ways in which Aboriginal homelessness may be expressed, including the cultural dimensions of Aboriginal homelessness." (NSW Aboriginal Housing Office, 2004, p. 1.)

The detailed aims of this study were as follows:

- (1) To investigate types of inner-city Aboriginal homelessness;
- (2) To map pathways for Aboriginal persons/families/groups in the inner-city into, within and out of homelessness;
- (3) To provide strategies to address immediate and on-going accommodation, support or other needs expressed by participants;
- (4) To identify effects of government policies on Aboriginal persons experiencing homelessness in the inner-city;
- (5) To train Aboriginal researchers so as to build research capacity; and
- (6) To inform the Partnership Against Homelessness to support the implementation of targeted projects to address the needs of homeless men and women and to inform the homeless service system generally. (NSW Aboriginal Housing Office, 2004, p. 2.)

Although the research work documented in this report aimed to increase understanding of Aboriginal homelessness in the inner city Sydney study area, there was no requirement in the research contract to quantify it. Nevertheless, the findings do include a brief profile of various identifiable homeless groups, including the size of their membership, as encountered during the research process.

The Key Research Questions were defined as follows:

- (1) What is already known about inner-city Aboriginal homelessness?
- (2) What factors/matters are perceived as being associated with homelessness by inner-city Aboriginal communities and individuals?
- (3) How do individuals/families/groups become homeless?
- (4) What factors/matters are associated with ongoing homelessness?
- (5) What restraints and barriers are there to moving out of homelessness?
- (6) How do individuals/families/groups move out of homelessness? (NSW Aboriginal Housing Office, 2004, p. 2.)

Working Definition of Study Area and Study Target Groups

The brief for this study proscribed that the inner city Sydney research area would include, but not necessarily be confined to, communities and public spaces in Kings Cross, Woolloomooloo, Redfern, Waterloo, and Surry Hills. During the course of research it was decided that Darlinghurst, the Sydney CBD, Taylor Square, Central Railway, Newtown, Broadway and Glebe also be included in the study area's range. [Refer to Figure 1 on the following page for a map of the study area.]

The initial target groupings that were defined at the outset of the research (May 2004) were based on the previous experience of the research team, and were as follows:

1. Redfern
 - (a) The Block environs;
 - (b) The top of Eveleigh Street (near Murawina Children's Centre) (fires maintained at night);
 - (c) Mac Silva Centre on Wellington Road, Waterloo.
2. Woolloomooloo
Tom Uren Place at Cathedral Street, under the viaduct in a park (Wullamulla Reserve).
3. Kings Cross (but transitory)
 - (a) Kings Cross Fountain, Fitzroy Gardens;
 - (b) St Canices Catholic Church Roslyn St in Elizabeth Bay (a most popular place for Kings Cross mob);
 - (c) Opposite Police Station near Judge Street.
4. Surry Hills
 - (a) Frog Hollow: a depressed park between Riley and Crown Streets;
 - (b) Campbell House in Campbell Street run by Mission Australia;
 - (c) The Haymarket Centre in Albion Street (a SAAP service).
5. Central Railway
 - (a) Belmore Park, adjacent to Central Railway Station bounded by Castlereagh Street, Eddy Avenue, Pitt Street, Hay Street (N.B. in Pitt Street a free food service shop run by a charity);
 - (b) North end of Prince Alfred Park on corner of Eddy Avenue and Elizabeth Street at entrance to Railway Street;
 - (c) Devonshire Street pedestrian tunnel (Aboriginal buskers there) connects through to George Street;
 - (d) Some people may sleep in Prince Alfred Park.

These target groups were partly defined through preliminary investigations made in 2002 by the research leader, Paul Memmott. He collated the following information, which compliments the above. In 2002 there was an Aboriginal group that had been identified as 'problematic'. It moved between Taylor Square and Kings Cross Fountain, and impacted on the local community's amenity through its anti-social behaviour. The Kings Cross Police Commander had reported that they were "the No. 1 issue" for his area (p.c. Mandi Moore, CoS, 23/9/02). Also, the former CEO of the AHO also referred to a number of Indigenous Queenslanders in Kings Cross begging and making threats of violence (p.c. James Christian, AHO, 24/9/02).

The Senior Project Coordinator for Homelessness within the City of Sydney Council provided the following perceptions in 2002 of the Kings Cross group (p.c. F.R., CoS, to P.M. 26/9/02, 1/10/02). She identified them as the Fitzroy Gardens

group of Koories; and believed they were socially separate from the Woolloomooloo itinerants (see below). There were three or four members with alcohol-related brain damage in this group. On 23/9/02 assistance for nine street people in this group was requested and or accepted, although follow-up appointments did not occur in all cases because the individuals did not attend an arranged interview. This group could include as many as approximately 20 people. An older woman known as 'Mumma', who was originally from Darwin and slept rough, was the leader of the Fitzroy Gardens group. She acted as the group's Elder.

Further details were recorded by P.M. in 2002 concerning the Aboriginal homeless population concentrated in Woolloomooloo. With regards to this suburb, the nearby Mathew Talbot Hostel, run by the Society of St Vincent de Paul, attracted many predominantly homeless men who would also frequent public places. (Note: the Matthew Talbot Hostel does not specifically target Koori men, and is one of the biggest SAAP services in Sydney.) Of the few female homeless people in Woolloomooloo, the majority appeared to be Indigenous women. There was no immediately obvious Indigenous group living homeless in Woolloomooloo, although at times a number of Indigenous people were present in the suburb (but not in a long-term and clearly observable homeless grouping as in the Fitzroy Gardens).

Around late 2002, the Independent Community Living Association's Outreach Service team (refer to Appendix 2) conducted a survey of potentially homeless Indigenous people in Woolloomooloo, in order to discover the most appropriate ways to offer assistance to these individuals. The survey was done in conjunction with a local Aboriginal liaison officer. They interviewed about ten people and the responses indicated that not all were homeless. Most had come from different areas of Sydney or NSW to Woolloomooloo, and reported that they did not need assistance from another Aboriginal person. They were happy to receive any required assistance from any of the Outreach Team's workers.

Allan Raisin of the NSW Department of Community Services also provided some information to P.M. in late 2002. He was aware not only of the Fitzroy Gardens street group but of what appeared to be a second homeless Aboriginal group frequenting Bourke Street Park. These people had at times been aggressive and seemed 'impenetrable' in terms of getting services to them. Raisin was unsure whether any position had been reached amongst service providers regarding what to do about them. (p.c. A.R., NSW DoCS, 26/9/02.) A small Indigenous group had also been reported to gather next to the Town Hall, in Sydney Square, during mid-September 2002.

Project Methodology

Literature analysis

The Paul Memmott and Associates (PMA) team has extensive research experience working with groups of Indigenous homeless and public place dwelling people, analysing their problems and developing strategic responses to their needs. Some key projects have been:

- River Campers Survey, Alice Springs 1990.
- Social Behaviour Project, Alice Springs 1991-93.
- Cope Street Squatters Study, Redfern 1994.
- Long Grassers Study, Darwin and Palmerston 2000-01.
- National Analysis of Strategies to Respond to Indigenous Itinerants and Public Place Dwellers, 2002.
- Categories of Indigenous homeless people and good practice responses to their needs, 2003.

An important outcome of these studies, in particular the final two listed, has been the compilation of a large body of published and unpublished literature on Indigenous homelessness, which is stored in the Aboriginal Environments Research Centre archive (The AERC is the University of Qld and closely associated with PMA). This collection has been drawn upon for the literature analysis contained in the current report, and is included in its bibliography.

General approach to data collection

The research was required to be qualitative, incorporating aspects of participatory action research and narrative data gathering. The process was also reflexive allowing for changes to be incorporated as work proceeded and as new insights emerged into how best to gather and analyse the information being received.

The methods that were used sought to produce interviews and narratives that provided extensive and in-depth information about the circumstances prior to, during and possibly immediately following homelessness as experienced by a variety of Aboriginal individuals, families or groups in inner city Sydney. Data collection and analysis aimed to allow the variety of factors and cultural concerns shared amongst homeless persons and uniquely associated with Aboriginal homelessness to emerge. These included socio-historical, political, cultural, policy and racism factors. They also included personal and immediate matters such as physical and mental health, violence, alcohol and other drugs, unemployment and the effects of institutionalisation, and involvement with the criminal justice system.

The Research Team

The locally based researchers were employed in a part-time capacity to engage with the relevant communities and participants over a period of six months, thereby giving them the opportunity to adequately follow-up and map participant experiences. Two Aboriginal research assistants were employed as field workers, Mr Richard Green of the Daruk language group and Ms Pam Ingram of the Wiradjuri language group. Both were long-term residents of inner city Sydney and familiar with its Aboriginal community. Both had much personal experience of street life in Redfern and had experienced homelessness to some extent in their lives. Because of this they were able to both communicate and empathise with others in such circumstances. Their team leader was Ms Angela Pitts, a part-time social planning consultant to the Aboriginal Housing Company in Redfern who was also carrying out doctoral research at the University of Sydney.

Project Steering Committee

The project brief required that a Steering Committee be formed comprising representatives of Aboriginal community controlled agencies familiar with inner city Sydney, consumers and other key stakeholders, such as non-government organisations and local government authorities. This Committee's task was to monitor the research process. The organisations included in its membership would ensure that the researchers were meeting the requirements of the research brief, and that they were supported and mentored where necessary and appropriate. The Partnership Against Homelessness, as the project's auspicing body, was to be represented on the committee. (NSW Aboriginal Housing Office, 2004, p. 5.)

As the project evolved, the Aboriginal Housing Office established two committees. The first was called the Project Steering Committee comprising representatives of a range of Aboriginal, non-government and local authority agencies providing services to homeless people in Sydney. The second was called the Reference Group and comprised Aboriginal representatives from both government and NGO agencies. The operation of these committees is outlined late in this chapter.

Interviewing homeless persons

It was originally envisaged that homeless individuals would be sought out and interviewed in the field for a maximum of one hour (for example, at public places, squats and relative's houses). It was also envisaged that the first interview would be open-ended and take a narrative approach, allowing homeless people to tell their story in their own way. This would involve clients being invited to reveal their life stories: where they came from, how their life circumstances had changed and resulted in their current lifestyle, and what were the associated issues and constraints of homelessness as they perceived them. Such details were to form the basis of the analysis of pathways into homelessness.

However, upon first contact with the research team, only a few interviewees were prepared to open up expansively in this manner. The second interview was to take up where the first interview had ended, and would be semi-structured and aimed at eliciting material on the following subjects:

- gaps in life history (of importance to the study);
- elaboration of client's needs;
- previous attempts at obtaining services and/or finding a solution to lifestyle problems, and related outcomes;
- interviewee's perceptions of whether they were homeless and why;
- proposals for changing one's lifestyle;
- specific matters that would impact upon government policy.

Final follow-up interviews (if such occurred) aimed to: (a) elicit further information about the subject of the earlier interview(s), but which were not obtained for various reasons, and (b) provide an update on life circumstances and any recent attempts to change them, noting efforts at utilising any available services or agencies. Once a client had undertaken the first interview, every effort was to be made to follow through with a second and third interview, but due to the very nature of Indigenous homeless people's mobile lifestyles, it was not expected that the team would be highly successful in these efforts. Reasonable and achievable targets for this project were considered to encompass 40 first interviews 20 second interviews and 8 third interviews. This represented an overall target of 68 interview hours. It was anticipated that a fair amount of 'dead' time was likely to be spent in trying to locate interviewees and track them as they moved around their 'beats' or known territories. An allowance was made for fieldwork involving only 50% productive time, in the sense of obtaining information from homeless individuals.

A number of changes occurred in this approach, as the field methodology was adapted to the circumstances that were revealed to the researchers over time. One such change involved the refinement of the targeted subject groups, a second

involved the development of group profiles as well as one-on-one interviews, and the third the recognition of how difficult it was to gain follow-up interviews.

The final definition of the study area and target groups

The methodological progression of fieldwork gradually led from the identification of homeless individuals for one-on-one interviewing to understanding the social profiles of a number of distinct Aboriginal homeless groups subsisting in the inner city Sydney area at the time of the survey. For all their apparent cohesion, the membership and territories of these groups were found to be nonetheless dynamic. At the end of fieldwork it was possible to describe the existence and social characteristics of the following six groups:

1. Redfern/Waterloo dwellers (Group A);
2. Newton dwellers (Group B);
3. Central Railway Station dwellers (Group C);
4. City/Town Hall dwellers (Group D);
5. Kings Cross/Darlinghurst dwellers (Group E);
6. Broadway/Glebe dwellers (Group F).

A written profile was composed for each of these groups, and they are all included at the beginning of Chapter 4. A map showing the physical relationship between the general territorial ranges of each group accompanies these descriptions.

Extent of interviewing

A total of 53 homeless persons were interviewed using either of two the questionnaires designed for use during this project (refer Appendix 1). The field team was able to effectively target six for follow-up interviews. Five of the interviewees agreed to have their interview sessions recorded on cassette tape.

In addition to these one-on-one structured interviews, informal interviewing occurred to aid the development of the profiles of the homeless groups, addressing such issues as group identity, territory ('beat'), accessed services and perceived lifestyle issues. The total number of hours spent conducting these informal interviews was estimated to be 65. This figure can be broken down into two categories of fieldwork: either two researchers were in the field together (for example, Pam Ingram and Angie Pitts, or Richard Green and Angie Pitts), or one researcher was in the field alone (either A.P., P.I. or R.G.). The time spent in the former mode was 22 hours, while the time spent in the latter was 43.

Referral

The project brief required that field researchers respond directly to the requests and apparent needs of the Aboriginal homeless people interviewed, in regards to accommodation and support, by referring them to services or agencies in a manner guided and informed by the Project Advisory Committee. To achieve this goal, interviewees were invited by the field researchers to complete an Agency Referral Form if the workers believed there was a relevant service that could be made available to them or that they desired access to. This form was to be forwarded through the Aboriginal Housing Office to the particular agency for action. Such a method of assisting the homeless people contacted through project work aimed to allow for attempts at referring and/or assisting participants with immediate accommodation and other matters to be evaluated at a later time.

Progressive and summative evaluation of research (Stages 1 to 4)

The research team was asked to conduct progressive and summative evaluation of its project work. Progressive evaluation was to be reflexive, in keeping with the qualitative and action oriented character of the research. At regular intervals the team was to assess what knowledge and information had been gathered and whether the experience indicated a need for change in this or any other aspect of the approach to research. For example, the team was to consider whether the narrative method, or the referral and support provision system was working effectively. This ongoing evaluation and process of reflection was to be carried out in consultation with the Steering Committee. The following are summaries of the four progressive evaluation reports provided during the course of the project.

First Summative Evaluation Report for Stage 1 (May – June 2004)

- The formal establishment of the Field Team by Col James and Angie Pitts occurred in Sydney.
- AHO furnished all team members with a letter of introduction ("To whom it may concern").

- A letter requesting support was sent by PMA to stakeholders and other known agencies dealing with homeless Indigenous people, requesting details of known Indigenous homeless people (whereabouts/identity) in inner city Sydney, and stressing a broad interpretation of 'homelessness'.
- Ethics requirements were negotiated with AHO.
- A detailed field methodology was prepared by the Team Leader (P.M.).
- A one-day workshop occurred in Sydney of the wider Project Steering Committee (made up of a cross section of Aboriginal community representatives, government SAAP service providers and relevant government agencies) to elicit and describe all existing available services provided by government and non-government agencies ('stakeholders') for Indigenous homeless people in inner city Sydney, as well as any relevant government policies.
- Consultation commenced with the stakeholders, including collection of unpublished documents and/or interviews. Preparation commenced of the profiles of the current services being offered by stakeholders to Indigenous homeless people in inner city Sydney.
- Retrieval, sorting and analysis of the body of Indigenous homelessness literature stored in the Aboriginal Environments Research Centre (AERC) commenced.
- A meeting and briefing of the Field Team occurred concerning the field methodology.
- Reconnaissance of study area and first contacts with known homeless Indigenous people and public place dwelling groups. Pilot testing of field methods and initial interviews occurred.
- First Summative Evaluation Report was written up and submitted to AHO.

The composition of the Project Steering Committee, as established by the AHO was as follows:

NSW Department of Housing - Manager, Product Strategy & Development Service Development, Housing Systems	Ms Elena Katrakis
Department of Community Services – Manager, Supported Accommodation Assistance Program	Mr Allan Raisin
Department of Juvenile Justice, Manager, Strategic Policy & Planning	Ms Megan Wilson
Department of Women	Ms Philippa Hall
Mathew Talbot Hostel	Mr Bernard Cronin
Aboriginal Children's Service	Ms Yvonne Weldon
Aboriginal Medical Service	Mr Brad Freeburn
City of Sydney Council, Senior Project Coordinator	Ms Felicity Reynolds
City of Sydney Council, Community Programs and Services	Ms Kay Mundine
City of Sydney Council, Social Planning Coordinator, Community Programs and Services	Mr Daniel Thorpe
Mission Australia	Mr Meffian Kaiwai
Salvation Army	Capt. Paul Moulds
St Vincent de Paul	Ms Sue Chant
Centrelink, Customer Service Centre	Ms Donna Craig
Redfern Police	Sgt. Georgie Israel
Paul Memmott & Associates (PMA), (also AERC, UQ)	Dr Paul Memmott
IB Fell Housing Research Centre, USyd - Director	Mr Colin James
Aboriginal Housing Office - Executive Director, Community Housing & Services	Mr Ross Hampton
Aboriginal Housing Office – Chairperson, Community Housing & Services	Mrs Ann Weldon
Aboriginal Housing Office - Special Projects Officer	Mr Nathan Moran
Aboriginal Housing Office - Strategic Planning & New Initiatives	Ms Julie Morgan

Second Summative Evaluation Report for Stage 2 (July 2004)

- Intensive fieldwork period No. 1:
 - After completing a period of interviewing, the Aboriginal research assistants submitted their interview findings to Angie Pitts for checking. She then encouraged completeness and clarity in the way the interviewer recorded the responses.
 - The wording of the interview questions was changed twice on the basis of advice from interviewers and interviewees.
 - The interviews, once received by PMA were typed and returned electronically to Angela Pitts for distribution to the two field workers. These transcriptions contained further questions, comments, and requests for clarification or more detail. Some of these queries were followed up in the second round interviews.
- Senior Research Officer with PMA, Catherine Chambers, began editing and expanding the first draft of the literature review.
- PMA personnel continued with ongoing literature analysis and the write-up of draft findings on metropolitan Indigenous homelessness in general and in relation to inner city Sydney in particular.

- A workshop was held by PMA with interviewers Pam Ingram and Richard Green in Sydney on 11 August to review progress and develop the analytic categories for the report. Contents of interview findings were examined and discussed and the following outcomes were decided. The second interview candidates selected were to be re-interviewed by P.I. (accompanied by A.P.). R.G. continued doing first interviews and making contact with more difficult interviewees (eg loners/recluse individuals).
- On the basis of the street knowledge the researchers had gained in June, a set of ten homeless groups were defined in the study area as a preliminary estimate: (1) Redfern/Block, (2) Redfern/Post Office, (3) Waterloo, (4) Central Station, (5) Darlinghurst/William Street, (6) Kings Cross, (7) Woolloomooloo, (8) Paddington, (9) Surrey Hills, (10) Newtown. (Note that this early classification was later refined to include six groups.) The decision was made to attempt to profile each group, including details about its social identity and lifestyle, and which service centres its members used. Interviews of individuals would then be linked to the relevant group, the team aiming to get some from each group.
- Several interviewees were identified as having obtained accommodation since their first interview. These were to be re-interviewed to form part of a 'pathways out' analysis.
- P.I. and R.G. requested that they attend the first meeting of the Project Reference Group planned for the morning of 23 August to outline a number of particular recurring problems that they had noted and some preliminary suggestions for types of services that were required.
- Ms Catherine Chambers wrote up the profiles of service providers.

The Service Provider Organisations that were finally profiled (see Chapter 3 and Appendix 2) were as follows:

- 1) Aboriginal Children's Service
- 2) Aboriginal Hostels Limited (AHL)
- 3) Aboriginal Housing Company
- 4) Aboriginal Medical Service Co-op Ltd (AMS)
- 5) Anglicare
- 6) Barnardos Australia
- 7) Centrelink Redfern - NSW Government
- 8) City of Sydney Council
- 9) CRASH (Construction Industry Relief and Assistance for Sydney's Homeless)
- 10) Crossroads Christian Ministry
- 11) The Gender Centre Inc.
- 12) The Haymarket Foundation
- 13) Hillsong Church
- 14) Homelessness Action Team Support and Outreach Service (HATSOS)
- 15) Independent Community Living Association Inc (ICLA)
- 16) Kirketon Road Centre (South Eastern Sydney Area Health Service)
- 17) Mission Australia
- 18) Mudgin-Gal Aboriginal Corporation
- 19) NSW Aboriginal Housing Office –Sydney Regional Committee - NSW Government
- 20) NSW Department of Community Services - Supported Accommodation Assistance Program (SAAP)
- 21) NSW Government – Partnerships Against Homelessness
- 22) NSW Police
- 23) NSW Youth Drug Court
- 24) Oolong Aboriginal Corporation
- 25) Redfern Waterloo Partnership Project (RWPP) - Redfern Waterloo Street Team
- 26) REPIDU - Resource and Education Program for Injecting Drug Users
- 27) Salvation Army
- 28) Sex Workers Outreach Project (SWOP)
- 29) Shelter NSW
- 30) Society of St Vincent de Paul
- 31) St Canice's Catholic Church
- 32) The Station
- 33) Sydney Medically Supervised Injecting Centre (MSIC)
- 34) Twenty 10 Association Incorporated
- 35) The Wesley Mission
- 36) Wayside Chapel
- 37) Women's and Girls' Emergency Centre Inc
- 38) Women's Refuge Resource Centre
- 39) Youth Accommodation Association
- 40) Youth Off the Streets

Third Summative Evaluation Report for Stage 3 (August - September 2004)

- The second period of intensive fieldwork occurred in August and September, with one-on-one interviewing continuing. Second round interviewing commenced where interviewees were locatable and if they were prepared to undertake them.
- The fieldworkers and A.P. conducted further informal discussions with each of the groups of homeless people to establish group profiles.
- All interview findings were written up. Referral sheets were sent to the AHO for distribution to service providers.
- The first meeting of the project's Aboriginal Reference Group was held on 23 August. Reference Group members discussed the project methodology and explored how service providers and stakeholders might relate to and engage with the project. Ross Hampton (AHO) provided a welcome, introductions, brief background summary to the project and to the Partnerships Against Homelessness, and identification of the project Reference Group. Paul Memmott (Project Consultant) provided an overview of project methodology and preliminary identification of homeless groups and study locations. Open discussion and suggestions concerning project methodology followed. Useful profiling information was presented to the Committee by the three fieldworkers. A range of possible strategies and programmes were elicited in response to the profiled needs.

The composition of the Project Reference Group as invited for this meeting was as follows:

Aboriginal Children's Service	Ms Yvonne Weldon
Aboriginal Medical Service	Brad Freeburn
Department of Aboriginal Affairs - Manager ACDP	Ms Sue Lindsay
Aboriginal Hostels Limited - Regional Manager	Mr Greg Hazel
Sydney Regional Aboriginal Housing Committee of AHO, Member	Mr John Delaney
Sydney Regional Aboriginal Housing Committee of AHO, Member	Ms Dorothy Shipley
Sydney Regional Aboriginal Housing Committee of AHO, Member	Mr Trevor Christian
ATSIC Regional Council, Chairperson	Ms Marcia Ella-Duncan
Aboriginal Housing Office - Executive Director, Community Housing & Services	Mr Ross Hampton
Aboriginal Housing Office - Chairperson, Community Housing & Services	Mrs Ann Weldon
Aboriginal Housing Office - Special Projects Officer	Mr Nathan Moran
Aboriginal Housing Office - Strategic Planning & New Initiatives	Ms Julie Morgan
Paul Memmott & Associates (Aboriginal Environments Research Centre)	Dr Paul Memmott

Fourth Summative Evaluation Report for Stage 4 (October - November 2004)

- The Aboriginal field researchers reflected on their field experiences and their perception of the issues before preparing individual reports (see Chapter 4).
- The second meeting of the Steering Committee occurred on 1 November with the research team in Sydney. This meeting refined different needs definitions, provided a profile of the groups of Indigenous homeless people, identified service gaps, and developed strategic ideas for addressing these gaps.
- Preparation of draft final report.
- The draft final report (long version) was finalised for the AHO for perusal and comment, and for distribution to members of the Steering and Reference Committee.

Expected Outcomes

During and by the end of the research it was expected that the following outcomes would be generated:

- (1) "A better understanding of what causes inner city Aboriginal homelessness will have been gained by the NSW Aboriginal Housing Office, the associated Government Agencies of the Partnerships Against Homelessness and the relevant Aboriginal Communities.
- (2) Social maps of pathways into, within and out of inner city Aboriginal homelessness will have been identified for the above mentioned groups.
- (3) Strategies to address inner-city Aboriginal homelessness will have emerged out of the qualitative material but also out of the action research experience of the researchers' addressing requests and expressed need of participants. These strategies will inform the direction of Partnership Against Homelessness projects by better incorporating the role of the relevant Aboriginal Communities within the projects.
- (4) An understanding of the impact of the implementation of government and agency policies and programs upon the pathways into, within and out of inner-city Aboriginal homelessness will have emerged through the meaningful consultation between the research team and key Aboriginal individuals and organizations.
- (5) Successful strategies and programs addressing inner-city Aboriginal homelessness will have been identified by all

- parties; similarly those strategic and programs that are not achieving the required outcomes will also be identified.
- (6) Research capacity of Aboriginal researchers will have been built upon and strengthened. This maybe evidenced through completion of appropriate training and subsequent acknowledgement of achieved outcomes." (NSW Aboriginal Housing Office, 2004, p. 3-4.)

CHAPTER 2: LITERATURE ANALYSIS FINDINGS¹

Introduction

A perusal of the homelessness literature clearly demonstrates the difficulties involved in conceptualising both non-Indigenous homelessness and Indigenous homelessness (Memmott et al 2003A). The most visible Indigenous homeless people are small groups who live in public places throughout Australian towns and cities; socialising, sheltering, drinking, arguing and fighting in public. This is despite the existence of a range of Indigenous housing options and the advent of formal Town Camps in many regional centres throughout the late 20th century (especially post 1970). Although these people are often categorised as homeless, a number see themselves as being both 'placed' and 'homed', and prefer instead to refer to themselves as 'parkies', 'goomies', 'long grassers', 'ditchies' or 'river campers'. They are public place dwellers who identify particular public or semi-public places as their 'home' environment, usually conforming to a 'beat' of such places where they camp and socialise. In certain contexts the current authors believe 'public place dweller' should be the nomenclature preferred over such words as homeless or itinerant, because the latter terms have specific, and sometimes narrowly construed, meanings that do not always assist the tasks of analysis and strategic thinking.

The way Indigenous homelessness is defined or categorised influences the types of response strategies that are implemented by Indigenous organisations, and government and non-government agencies to address this phenomenon (Memmott et al 2002). The types of services that 'parkies' or 'long grassers' may want or need are not necessarily concerned with housing or accommodation issues. The first part of this chapter examines the definitions and constructs of Indigenous homelessness found in the literature, while the second develops a more useful set of response categories based on the complex range of circumstances and needs of the homeless and public place dwellers. Each category of Indigenous homelessness involves a particular set of needs—such as accommodation, health, transport, security of identity, and alcohol counseling—which in turn informs the design of relevant service responses. The third part of this chapter is to match particular sets of service responses with particular needs categories of homelessness. (Memmott et al 2003A, B.)

Categories of Indigenous Homelessness

In this part of the analysis three different states of Indigenous homelessness are examined in a broad manner. To generate the first two broad categories of homelessness a distinction is made between those without a house and those with a house. The first broad category of public place dwelling therefore covers people without a house; however temporary this situation might be. The second category involves the state of having a house, however temporary the tenure, but being at risk of losing that house or its amenity. (This can be termed hidden homelessness.) The third broad category is spiritual homelessness. The derivation of these categories was originally based on previous classifications in the literature but then amended and expanded through an analysis of available empirical studies of public place dwelling and homeless peoples in Alice Springs, Halls Creek (W.A.), Redfern, Cairns, Mt Isa, Townsville, Darwin and Adelaide. (Memmott et al 2003B.)

(Note that a summary description of these categories is to be found in Table 2.1 following.)

Public Place Dwellers

Public place dwellers live in a mix of public or semi-public places (as well as some private places that are entered illegally at night to gain temporary shelter) such as: parks, churches, verandahs, car parks, car sales yards, beaches, drains, river banks, vacant lots, dilapidated buildings, and structures on the edges of small towns. These people can be divided into four sub-categories, the first three being voluntary states and the fourth being involuntary. They will be described in turn.

(1) Public place dwellers: short-term, intermittent and voluntary

Short-term public place dwellers are often staying in conventional accommodation—for example, a relative's house—and may have their own residence in a rural or remote settlement or an outer suburb of a large city. When they socialise in public urban places, they may decide to camp out overnight, usually with other more permanent public place dwellers, despite the availability of their conventional accommodation. Such individuals often come to town to have a good time socialising and drinking, but intend to eventually return home (wherever that might be). They do not necessarily have any strong sense of attachment to the public places that they frequent. (Memmott et al 2003:27.)

¹ Note: The contents of this chapter have been adapted from the recent literature analyses on Indigenous homelessness conducted by the authors for the Australian Housing and Urban Research Institute, AHURI (Memmott et al 2003A,B).

Many people in this sub-category may simply be diurnal visitors. For example, when the survey of public place dwellers was carried out at Cope Street in Redfern during 1994, all of the group had overnight accommodation and only gathered there during the day (although core members had formerly squatted on the site). There was a daily pattern of site usage wherein no-one occupied the site in the early mornings, but by the middle of the day a sizeable group had congregated there, of whom only about six were 'hard-core' local drinkers. The group's numbers swelled to a maximum of 30 when visitors joined them, for example people travelling by train from Mt Druitt and Campbelltown when using the nearby Aboriginal Medical Service. "We like to look after our visitors; make them feel good; let them mix in with us; have a drink with us". The busiest day was 'pension day' when a large drinking session was followed by card games. From time to time there were itinerants from all over Australia; "national visitors to Redfern" as one person put it. (Memmott 1994:62,63.)

During 1990, the Alice Springs river camps experienced an influx of Aboriginal visitors from the town camps, rented town houses, hostels and bush communities. These visitors were both day-trippers and those staying for a week or more. During the day the riverbed became a thriving social venue. Kinsmen from all social niches were to be found mixing together. The researcher met some publicly respected Aboriginal leaders and citizens in the riverbed and many of their relatives. A by-product of this pattern of daytime movement and visitation was that the discrete domiciliary social structure and camp territoriality prevalent in the early morning become relatively invisible as the day progressed. Various individuals would attend drinking parties, become intoxicated, and end up sleeping under bushes. Thus the social pattern became even more complex and confused. What the public may have seen from the riverbank were not the campers per se, but an aggregate of people who may have come from all quarters of town, and from various walks of life. In some cases the long-term river campers were being visited by their relatives who came either from bush communities or other parts of town where they resided in conventional housing. The survey identified various sub-groups who had come from alcohol-free or 'dry' bush communities for a 'drinking holiday' planned to last a few months. These visits were also sometimes intended to coincide with attendance at the Easter football carnival, at a medical facility for treatment of a child or other relative, or at a meeting (eg an education meeting). (Memmott 1990:41.)

Also, in Darwin a group of 'long grassers' was identified during 2001, which resided in camps and public places for an indeterminate period of time but which intended to return to their home communities. Such visitors were found to reside in or attach themselves to Town Camps, rental house residents, hostels and public place dwelling groups as well as moving between all of these. (Memmott & Fantin 2001:60-62.)

In Cairns there was a component of the part-time 'parkie' population who had homes in the suburbs but spent some of their time in the parks and sometimes even camped out overnight. They had often been full-time 'parkies' in the past. (Dillon & Savage 1994:6, Qld, DATSIP 2003B:5.) According to recent data on Mt Isa's riverbank dwellers, only 20% were there because they had no other accommodation options, and the remaining 80% had residential addresses either in Mt Isa or a neighbouring community (Qld, DATSIP 2003C:4). In Brisbane short-term public place dwellers include people who occupy boarding houses or hostels overnight and join large social groups during the day.

Public place dwelling groups are thus likely to comprise a core of permanent public place dwellers and some short-term visitors who become temporarily attached.

(2) *Public place-dwellers: medium-term, voluntary*

These public place dwellers reside continually in public places (including overnight), acknowledge that they have another place of residence in a home community or outer suburb, but are uncertain if and when they will return to it. For example, most 'long grassers' surveyed in Darwin (2001) had been merely visitors at the beginning of their stays, but for a significant proportion their intentions of returning to their home community had eventually changed and they had become semi-permanent dwellers in Darwin's public places (Memmott & Fantin 2001:49,61-62).

(3) *Public place-dwellers: long-term (chronically homeless), voluntary*

This sub-category comprises those who live a permanent public place dwelling lifestyle, have cut off their ties with home communities long ago, and who accept that their lifestyle will remain consistent. They have a sense of belonging to a local place and to the shifting community of public place dwellers with whom they socialise. They have come to regard a beat of public places as their 'home'. The people in this sub-category are equivalent to the chronically homeless as defined in the mainstream literature (Coleman 2000B:4,56,169) who are defined not just by the application of a fixed time criterion but also by evidence that acceptance of, or adaptation to homelessness has occurred. Long-term or chronic homelessness becomes established when homelessness ceases to be a crisis event, and becomes an accepted way of life. This group may see recognition of their rights to public space and access to storage and ablution facilities as higher priorities than conventional accommodation. Their failed efforts in the public housing sector will have been left many years behind them. It is unclear whether it is possible for such individuals to readily reconcile with their home community and/or family due to the operation of a range of emotional barriers. (Memmott et al 2003A:18,27.)

In a similar vein, Chamberlain and Johnson consider the notion of the 'homeless career' (2000B). Such a term "draws attention to the fact that people go through various stages before they develop a self-identity as a homeless person" (Snow & Anderson 1993:273 cited in Chamberlain and Johnson 2000B:1-2). The paper further states that it is often "difficult to help people who have made the transition to chronic homelessness, because they no longer express a strong disposition to change their lifestyle..." (Chamberlain & Johnson 2000B:3). Approaches, which fail to recognise that these public place dwellers do not want to be readily reintegrated into the mainstream, or even into their original home communities, can have little real success in improving their quality of life (Memcott et al 2003A:18,26).

Thus, in 1990, the Alice Springs River camper groups ranged in size from 2 to 30 and were typically composed of a core set of relatively permanent campers (perhaps only a few individuals) who were identified with the campsite, together with a range of relatives or extended kin, some of whom were short-term (perhaps only diurnal) visitors. It was found that one camp leader had experienced 50 years of intermittent camping in various parts of Charles Creek; and one particular camp had been in regular intermittent use for 30 years by several generations of campers.

Again 'long grasser' groups in Darwin were often found to comprise an inner core of permanent public place dwellers to which a number of visitors who were temporarily attached. The core group of permanent public place dwellers might number only two, three or four people whilst the number of attached visitors could swell the group's membership to ten, fifteen or twenty. (Memcott et al 2003A:22.)

In Townsville the view was put forward that the community had to accept that some homeless people were happy with their outdoor lifestyle, especially those with more traditional backgrounds who chose to sleep rough, and that certain patterns of mobility represent a way of life and are not necessarily an expression of a problem (Qld, DATSIP 2003D:11).

(4) Public place-dwellers: reluctant, necessitated by circumstances

The two main sub-groups of this category are: (a) those who wish to return home but need to remain in an urban area to access service or support for a hospitalised relative or friend; and (b) those who wish to return home but who have no immediate transport option, no funds for travel and/or the capacity to organise their travel. In the latter case these individuals may be waiting until their next welfare payment can be arranged. They may well have recently been discharged from hospital or released from prison. They may not even be drinkers but nevertheless find security with their kinspeople in public places. Keys Young (1998:iv) defined this category as involving a "lack of access to any stable shelter, accommodation or housing - literally having 'nowhere to go' - which is regarded as the worst form of homelessness."

Thus in Alice Springs many of the campers came into town for a variety of reasons (hospital, shopping, etc) with every intention of returning home, but got involved in the river campers' drinking, missed their return lift and became stranded (the longest delays of this type that were recorded were one couple waiting a month and another four months for a lift back to their home communities (Memcott 1990:50).

A report on the Cairns 'parkies' states that care needs to be exercised in assuming people are "satisfied with their lifestyle and/or are making an informed choice". With little money and many complex problems (eg substance abuse) people have few choices available to them. "Research has shown that after a period of time those who are homeless will come to accept their situation as the norm and often justify it as being one of choice." (Qld, DATSIP 2003B:6,7.)

In Adelaide, Allwood and Rogers established that Indigenous street youth slept rough in the relatively short-term, but this behaviour was clearly done out of necessity rather than choice. All study participants had connections with people sleeping rough. Those young people who had slept rough or in squats usually did so with peers (friends or cousins) though a small number had slept in parklands with homeless parents. (Allwood & Rogers 2001:27-28,67.)

The At-Risk-of-Homelessness / Hidden Homelessness Category

Under this second broad category heading are grouped four sub-categories of people who, although housed in some manner, are at risk of losing their accommodation, or at least of losing the amenity or functionality of their accommodation. The people in this category are sometimes not properly considered when the issue of homelessness arises, in other words their situation is hidden from the policy makers who may affect change in their lives.

(1) Insecurely Housed

In this sub-category are people who, although residing in some sort of housing, nevertheless live under the threat of losing this accommodation because they lack security of tenure. Such insecurity may arise from tenants having inadequate income to pay rent, their violation of or inability to conform with tenancy agreements, the impact of family

violence, and the effect of other public place dwellers visiting and behaving in an unruly manner unacceptable to the neighbourhood. Keys Young (1998:iv) included in this sub-category “individuals escaping an unsafe or unstable home for their own safety or survival” noting that this form of homelessness affects large numbers of Indigenous people, especially women and young people.

Insecurity within Town Camp environments was a theme of the Alice Springs study described earlier. A number of interviewees had accommodation options in Town Camps and in fact many indicated that they withdrew to them during the brief periods of wet weather. In addition they used the Town Camps for showering and clothes washing when required. Some even rented a tin shed in one of these camps. In a number of cases people had moved away from the Town Camp due to excessive fighting and arguments, but it proved difficult to assess the extent to which these interviewees were involved in the conflict, perhaps even playing a causal role. A few admitted to being evicted. However from those who were genuine, it can be concluded that in certain Town Camps people at times experienced a lack of relative safety in a social sense, due to the absence of strong leadership and internal social controls. Nine interviewees in different groups said they left a Town Camp (and also one from a remote bush community) because of excessive fighting, disputes, harassment, jealousy or takeovers by foreign tribal groups. Another reason given for withdrawing from a Town Camp was to avoid relatives constantly 'humbugging' for money. (Memcott 1990:50,51.)

Research conducted by Jordan (1995) in Adelaide found that the most common reason for Aboriginal youth leaving home was arguments with parents or other family members, followed by: parental alcohol problems; sexual, physical and verbal abuse; other problems in relation to parents; desire for freedom; and being evicted from home. These reasons matched those of non-Indigenous youth but Jordan distinguished a distinctive sense of powerlessness and despair among study participants. The researcher also noted that Indigenous youth were more likely to come from stressed or difficult home backgrounds, retain lower levels of educational achievement and be worse off with regards to other indicators of disadvantage. (Cited in Allwood & Rogers 2001:15,16.)

Memcott and Fantin's 2001 study of Darwin's Indigenous itinerant population revealed that those mobile persons who temporarily left the 'long grass' lifestyle and stayed in rental houses with family members could have a significant impact on the viability of such tenancies. The factors negatively influencing tenancy stability upon the arrival of such itinerant persons in the household included: the increased strain placed on a residence's water and waste facilities and the potential health hazards, the perceptions of landlords and management agencies (not necessarily accurate) about crowding, and the increased risk of alcohol-related violence and its impact on the neighbourhood's quality of life and on a property's physical condition (2001:11,67).

Those Indigenous people who use boarding house accommodation may also fall within this category. Boarding houses are rapidly closing across Australia due to more stringent application of building regulations (fire) and the rapid development of inner city areas such as New Farm and South Brisbane in Brisbane, which traditionally supported many such establishments. It has been estimated that boarding houses were closing at the rate of two per month in Brisbane at the time of writing. (p.c. Luke Bell, Brisbane City Council, 3/7/03; Michael Hutchinson, ATSI Housing, Qld Department of Housing, 1/8/03.)

(2) Housed in Sub-standard Conditions

Those persons whose housing is sub-standard in terms of architectural design and construction also live at risk of homelessness because of possibly unsafe or unhealthy facilities. The difficulty with this category is whether a definition of 'sub-standard' can be applied cross-culturally in Indigenous Australia or whether such a definition needs to be shaped by local cultural standards. What one cultural group defines as unhealthy may be totally acceptable to another. For example, in the 1960s and 70s many Aboriginal town camps across Australia were dismantled by local councils who deemed them unhealthy, yet these town camps provided a freedom of cultural expression and cultural maintenance that newly constructed and supposedly 'healthy' government housing failed to deliver and were rejected by tenants for failing to do so (see Memcott 1996, Long 2002). A further consideration is the impact of housing on the psychological as well as the physiological health of the occupants. Although a person, or people, may occupy a house that has no negative impacts on physiological health, certain features of its design may contribute to psychological health problems. For example, a house that makes it difficult, or impossible, for occupants to enact customary avoidance behaviour, may contribute to the occupants experiencing stress and trauma. (See Reser 1979, Fantin 2003).

Another illustration of differing desires and concerns regarding what might be considered satisfactory housing, involves a number of cases recorded in Alice Springs, where, during mid-winter, some families were prepared to leave a Town Camp house if they could not afford electricity (and hence electric heaters), and camp in the riverbed where there was a plentiful supply of firewood (Memcott 1990:51).

(3) Housed in Crowded Conditions

Contained in this sub-category are persons whose housing is crowded. However, crowding must be defined not by density measures alone but using methods of measuring stress levels. As early as 1987/88, the National Youth Coalition for Housing (NYCH) identified the potential of crowding to contribute to a sense of homelessness, and Olive in her study at Rockhampton identified how this was particularly relevant to Indigenous people (1992:2,3). By the late 1990s, Keys Young had identified crowding as a distinct type of Indigenous homelessness (1998:iv).

In 1991 Memmott published a cross-cultural model of crowding, which pertained to North American, European and east Asian groups and which was drawn from an analysis of the environmental psychology literature (Memmott 1991:255-258). This model demonstrates that states of crowding involve high-density settings producing various environmental stimuli, some of which induce stress amongst the setting participants according to their relevant values. The presence of unacceptable stimuli may be perceived as a loss of control. Alternatively a coping mechanism, if one is available, may be used to alleviate such stress. It was found that the values employed to evaluate the state of any particular setting, to determine which stimuli are present, and to select an appropriate coping mechanism, vary across cultures. This model was accompanied by a review of the limited research published on 'crowding' among Indigenous Australians. Memmott found that the degree to which cultural change in communities with differing contact histories had influenced norms of crowding and privacy, was not known. He asserted that "it certainly cannot be assumed that high household densities regarded as 'crowded' by non-Aboriginal standards are necessarily perceived as being stressful by Aboriginal groups" (Memmott 1991:262).

Further research has occurred during the 1990s on the spatial behaviour of Australian Indigenous households, particularly relating to household composition. Among these groups, the occupants of houses do not necessarily belong to one family unit. Contrasting with the national trend toward an increased proportion of single person and childless couple households, Indigenous households tend to be larger and more complex, often being made up of a number of family units or sub-groups. In these large households, one is likely to find each bedroom occupied by a family unit, possibly including a couple with infants, a single parent with a child, a group of single men or single women, or a grandparent with several infants or teenagers, as well as conventional nuclear families. These larger households are explained partly by the fact that many Indigenous people today maintain certain practices from their traditional cultures, where households were often comprised of a number of sub-units based on kinship norms. Such a sub-unit would translate into a 'family unit' in mainstream Australian society. When several customary family units occupy a single house, each residing in a bedroom or other room of the house, these situations may not necessarily constitute a state of crowding as each room may house a normal family unit whose members prefer to be close to one another for company. However the presence of these individual family units in a small house may well be perceived as crowding, partly because of the kinship relations involved. In some cases multiple Indigenous families are residing together because of a shortage of housing and are experiencing crowding. Yet in other cases they may choose to reside in large household groupings, in keeping with their traditions and are not necessarily under stress.

Thus Indigenous household sizes of 6 to 12 people are common, and much larger households can be regularly encountered (up to 20 members). A single Indigenous house may be doing the job of three or more houses as we might conceive their use in mainstream society. This situation exacerbates the instability of tenancy arrangements, thereby increasing the occupants' risk of becoming homeless. In fact, according to the most commonly used mainstream definitions they are already so. The 'cultural definitions' which Chamberlain (1999) and the ABS espouse, are founded on the principle that homelessness must be delineated in relation to distance from meeting a commonly held community standard. It should be recognised however that the needs of many Indigenous Australians will not be met by applying the standards of the broader community. In the case of crowding, definitive models for Indigenous groups have yet to be researched and tested.

Nevertheless, the links between crowding and homelessness are clearly embedded in the Indigenous literature. For example, in Townsville it was reported that Indigenous homelessness was related to overcrowding and associated social problems, and was in large measure, due to a shortage of affordable housing (Qld, DATSIP 2003D:14).

(4) Dysfunctionally Mobile Persons

Dysfunctionally mobile persons live in a state of continual or intermittent mobility, which includes temporary residence in such places as crisis accommodation. It can be the result of personal and/or social problems (eg violence, alcohol and substance abuse), lack of safety or security in a social sense, personality or 'identity crisis', and lack of emotional support and security. Such people may be moving either continually or intermittently between both public places and private residences, whether the latter are temporary or crisis accommodation, or the homes of relatives or friends.

In the 1996 and 2001 Census, the Australian Bureau of Statistics employed a 'cultural definition' of homelessness which included the category of 'Secondary Homelessness' comprising of those "who move frequently from one form of

temporary shelter to another" (Memmott et al 2003A:14,15). Olive (1992, drawing on the NYCH definition referred to above) also identified "very high mobility between places of abode" as a circumstance contributing to Indigenous homelessness. Keys Young (1998:iv) defined "relocation and transient homelessness, which results in temporary, intermittent and often cyclical patterns of homelessness due to transient and mobile lifestyles, but also to the necessity of a larger proportion of the Indigenous population (relative to the non-Indigenous population) having to travel to obtain services."

Aboriginal societies and communities are characterised by high frequencies of residential mobility both between and within settlements (Memmott and Moran 2001). However, the current authors would argue that it does not necessarily follow that such mobile individuals should be construed as being homeless in the Indigenous context, but rather that there is a need to introduce an additional dimension of dysfunctionality. Recent research into Indigenous youth has identified two general categories of mobility: firstly that which is an "expression of individual autonomy" and reflects enduring social and cultural practices and values, and secondly that which is problematic and expressive of instability and lack of support (Henry & Daly 2001, Victoria 2002:49-51). Victoria cites a number of authors who attest to the vital part played by such movement through extended family networks in Indigenous social and economic arrangements (Young & Doohan 1989, Henry & Daly 2001, Musharbash 2001). Such mobility represents the fulfillment of their kinship obligations as well as their connection to country or particular places. She reveals that young people, single men and, to a lesser extent, women, are often the most mobile groups. Young people were found to value "the opportunities offered by mobility between kin" (Victoria 2002:121). Victoria goes on to identify the second category of problematically mobile young people and warns of the dangers of only providing housing to such highly mobile Indigenous youth without additional complementary support:

Differentiating 'normal' youth mobility from those 'doing the rounds' reveals hidden homelessness and vulnerability in young people. These young people are considered to be in need [of] much support. For many the provision of housing to this group may even exacerbate the dire situation the young person is experiencing, because without significant housing and non-housing support the tenancy will inevitably fail. (Victoria 2002: 121.)

It is essential to grasp the nature of these opposing concepts of mobility, particularly in terms of certain categories of Indigenous homelessness. While it is true that social obligations precipitating high rates of mobility can serve to mask the numbers of people in the Indigenous population who are without accommodation, such a phenomenon is not necessarily injurious to the health or safety of all such persons. High residential mobility rates in themselves are not necessarily expressions of negative circumstances. Victoria goes on to emphasize the role of senior carers in Aboriginal households who provide vital support for younger kin.

In Adelaide it was found that young people's homelessness was preceded by lengthy histories of high mobility, multiple caregivers and abusive relationships (Allwood & Rogers 2001:3-4.) Interviews with young study participants established that they used different types of accommodation: with parents and extended family, foster care, secure care (detention), SAAP shelter, sleeping rough with friends, and independent living. With all of these there was a degree to which arrangements were insecure; ten young people were highly mobile at the time of the survey. It was apparent that while extended family members fulfilled a cultural obligation of providing shelter, they were not always able to provide the necessary structure, supervision, or practical and emotional support, and at times could also inflict harm (Allwood & Rogers 2001:25,68).

Spiritually Homeless

What are the spiritual and psychological dimensions of Indigenous homelessness? To answer this question we must first briefly turn to the question of what is 'home'.

In the traditionally oriented Aboriginal context, it can be argued that 'home' is 'country' (Strehlow 1947, Wallace 1979:144), or more specifically one's traditional estate that is part of a wider cultural landscape (Memmott & Long 2002), and that contains a range of sacred sites and other places of cultural and emotional significance to which oneself and various other kinspeople have attachments. Within this country there are various campsites, each with their particular resources, and to which are attached memories of past habitation and events. Traditional shelter, humpies, sheds, outstations, and even conventional housing may be regarded as mere artefacts for interim shelter in this more emotionally and culturally charged landscape containing Dreamings and sacred energies, spirits and powers. The Dreamings in turn provide identity and contribute to a sense of human self.

To be homeless in this context then means to be without country; to have no such set of intimate connections, to have an incomplete identity and only a set of unanswered questions about who were one's ancestors and what was the meaning of their country. This is a form of spiritual and psychological homelessness. Unfortunately it is the fate of many individuals and families who were removed from their traditional countries and wider circle of kin by government agencies (through

dispossession, removal policies and stolen children) throughout a large part of the last century (and for many coastal or near coastal groups during parts of the nineteenth century as well). The more temporally distant is the connection to country in terms of generations, the more inaccessible seem to be the answers about self-identity and 'home' (country), which in turn may have a stressful impact on an individual's sense of spiritual health.

Keys Young (1998) introduced this Indigenous-specific concept to the discussion of homelessness, and related it directly to post-contact dispossession. Berry et al (2001:34-43) elaborated on the concept with the further related notions of separation from traditional lands, and from family and kinship networks, as well as an erosion of Aboriginal identity. The existence of forms of 'spiritual homelessness' was widely endorsed at a recent National Indigenous Homelessness Forum in Melbourne (March 2003). Government policies that in the long-term aim to maintain, protect and/or help restore traditional connection to country, for example, through Land Rights, Native Title or Cultural Heritage legislation, will contribute in part to countering spiritual homelessness, albeit not necessarily for those who are already deeply entrenched in such crisis. Another pathway along which Aboriginal people experiencing this form of homelessness can find respite is through involvement with a strong religious leader (refer to Chapter 6 discussion of Pathways Out of Homelessness for more detail on this point).

In summary, spiritual forms of homelessness may derive from: (a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one's understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused or lost.

Summary of Categories of Indigenous Homelessness

This process of categorising the Indigenous homelessness population has produced three broad non-exclusive categories: (i) public place dwellers, (ii) at-risk-of-homelessness persons, and (iii) spiritually homeless persons. Public place dwellers can be further sorted into four sub-categories based on: (a) the duration of public place dwelling, and (b) the degree of motivation behind such a lifestyle (voluntary versus involuntary). The at-risk-of-homelessness or hidden homelessness category can be further sorted into four sub-categories. Three of these stem from the circumstances of the tenants' lifestyle: either insecure socio-economic situation, household crowding, or dysfunctional residential mobility; while the fourth stems from the standards of architectural design and construction applied to the housing. Substandard housing impacts on the health and safety of the householders, and renders them effectively homeless.

Table 2.1: Categories of Indigenous 'Homeless' People

Note: These are not mutually exclusive categories.

<p>1. PUBLIC PLACE DWELLERS.</p>	<p>Living in a mix of public or semi-public places (as well as some private places, which are entered illegally at night to gain overnight shelter) eg parks, churches, verandahs, carpark, car sales yards (under cars), beaches, drains, riverbanks, vacant lots, dilapidated buildings.</p>
<p>1.1 Public place dwellers – voluntary, short-term intermittent.</p>	<p>These people are often staying in conventional accommodation (eg a relative's house) and may have their own residence in a rural or remote settlement. When they socialise in public urban places, they may or may not decide to camp out overnight, usually with others, despite the availability of accommodation.</p>
<p>1.2 Public place dwellers – voluntary, medium-term.</p>	<p>Residing continually in public places (including overnight); acknowledge they have another place of residence in a home community but uncertain if and when they will return.</p>
<p>1.3 Public place-dwellers – voluntary, long-term (chronic homeless).</p>	<p>Residing continually in public places (including overnight); it is unclear whether it is possible for such individuals to readily reconcile with their home community/family due to a range of emotional barriers; they have come to regard a beat of public places as their 'home'.</p>
<p>1.4 Public place-dwellers - Reluctant and by necessity.</p>	<p>Residing continually in public places, and who</p> <ul style="list-style-type: none"> (a) Wish to return home but need to remain in urban area due to a service need or to support a hospitalized relative or similar; or (b) Wish to return home but no funds for travel and/or capacity to organize travel.
<p>2.0 THOSE AT RISK OF HOMELESSNESS (HIDDEN HOMELESSNESS)</p>	<p>At risk of losing house or of losing the amenity of house.</p>
<p>2.1 Insecurely housed people. [Olive 1992, ABS 1999A.]</p>	<p>Residing in adequate housing but under threat of losing it; lack of secure tenure; possibly due to circumstances of poverty.</p>
<p>2.2 People in sub-standard housing. [Olive 1992.]</p>	<p>Persons whose housing is of a sub-standard architectural quality, possibly unsafe or unhealthy housing [<u>but</u> the standards need to be defined – the issue of cultural standards.]</p>
<p>2.3 People experiencing crowded housing. [Olive 1992: 2,3, Keys Young 1998:iv, Memmott 1991:258-261.]</p>	<p>Persons whose housing is crowded [but crowding should be defined as involving considerable stress (and not ascertained by density measures alone).]</p>
<p>2.4 Dysfunctionally mobile persons. [Olive 1992, Keys Young 1998, ABS 1999A, Berry et al 2001.]</p>	<p>In a state of continual or intermittent residential mobility including temporary residence (eg crisis accommodation) that is a result of personal and/or social problems (eg violence, alcohol and substance abuse, lack of safety or security in a social sense, personality or 'identity crisis', lack of emotional support and security).</p>
<p>3.0 SPIRITUALLY HOMELESS PEOPLE. [Berry et al 2001:34-43, Keys Young 1998.]</p>	<p>A state arising from: (a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one's understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused</p>

Practice Responses to Indigenous Public Place Dwelling and Homelessness

This section of the chapter contains a summary of the findings from a survey of the various responses to Indigenous public place dwelling and homelessness across Australia that was conducted during 2002. The authors (Memmott, Long & Chambers 2002) employ the term 'response types' to refer to a broad range of initiatives including philosophies, policies, programs, services, strategies, methodologies, legislations and activities that are aimed at addressing the needs of Indigenous people who are homeless and/or residing in public places. The various responses identified from the 2002 analysis can be described under the following 15 category headings.

These findings have been adapted from research conducted for the Australian Housing and Urban Research Institute and the Commonwealth Department of Families and Community Services (Memmott et al 2002:63-68, 2003:33-38). It fits within a broader programme of work being embarked upon by Memmott since 1990, which has involved surveys of public place dwelling Indigenous persons for local organisations in such centres as Alice Springs, Darwin, Redfern, Halls Creek (WA) and Darwin. Based on these and other empirical findings (Memmott et al 2003B), the culturally-specific needs and categories of Indigenous public place dwelling and homeless people have been analysed and matched to the response categories as outlined below see Table 2.2.

(1) Legislative Approaches

Experience in a number of urban centres demonstrates that the law-and-order approach using reactive policing and supported by various forms of legislation, may be only partly successful and even totally unsuccessful, in eliminating Indigenous public place dwelling. It is likely to result in temporary or local displacement, whilst overall cycles of incarceration, alcohol treatment and public place dwelling continue, and it also runs the risk of breaching anti-discrimination legislation. As a general principle any movement of Indigenous people from their occupied public spaces due to conflicting public needs, should be carried out through a process of negotiation no matter how protracted, and be accompanied by a set of alternate accommodation and servicing options acceptable to all parties.

(2) Patrols and Outreach Services

Within this broad category, largely initiated by Aboriginal organisations, are Night Patrols, Wardens and Outreach Workers, although the precise nature of their services varies. The functions of night patrols and warden schemes over the last 20 years have included intervention in situations of substance abuse (especially alcohol) and violence, mediation and dispute resolution between people in conflict, and the removal of disruptive or potentially violent persons from public or private social environments. Outreach workers tend to take a stronger 'case file' approach, attempting to establish linkages to relevant service agencies in response to clients' needs.

(3) Diversionary Strategies

This widespread, short-term, reactive strategy involves taking people who are intoxicated, and possibly aggressive or otherwise at-risk, and placing them in managed accommodation until they can become sober, sleep and have a meal. It aims to keep at-risk, intoxicated individuals out of the watch-house in line with the Royal Commission into Aboriginal Deaths in Custody recommendations, and is usually performed by the Police or an Aboriginal Patrol, or both, or by a charity. The 'managed accommodation' to which they are taken may be a relative's house, a Sobering-Up Shelter, a Refuge or other such facility. A variety of complementary strategies can be incorporated: follow-up 'shaming' sessions between offenders and aggrieved members of the community; the use of a 'detox' centre and a residential alcohol treatment centre; and a Day Centre for recreational or entertainment facilities.

(4) Addressing anti-social behaviour

Aboriginal Owners may take exception to the anti-social behaviour of certain public place dwellers (intoxication, begging, violence, etc) regarding it as 'shaming' their own people and their law and custom, and may be adamant about asserting their authority in an effort to prevent it. In the few places where this has been tried, an effective approach has emerged and has primarily involved the establishment of models of appropriate versus anti-social behaviours (in terms of Aboriginal value systems) for public place dwellers, and territorial rules concerning where particular individuals or groups should dwell. In these examples public place dwelling people acknowledged their respect for Aboriginal Law and Native Title.

(5) Philosophies of client interaction

Professional philosophies of client interaction emphasise the empowerment of clients. One approach involves guiding families and individuals in finding their own solutions, not ones imposed on them, through a long-term personal and amiable relationship using a combination of Aboriginal and non-Aboriginal staff. Others extend this to include a healing

therapy that encourages self-exploration of the causal factors underlying public place dwelling. A number emphasise the community development philosophy whereby participation in addressing their problems fosters qualities of group cohesion, leadership, problem-solving capacity and self-esteem. Ownership of the process is more likely to result in real lifestyle changes than in entrenched welfare dependency. A further example includes the services that some church refuges provide, which bring people into contact with religious concepts of the self and the conduct of a meaningful life, as well under the influence of charismatic mentor figures.

(6) Alcohol strategies

In addressing the needs of public place dwellers, whether it be their health, the impact of alcohol violence on other group members, or the impact of intermittent anti-social intoxicated behaviour on the general public, there is clearly a need to formulate a strategic response to their prevalent heavy-drinking lifestyle. Multiple strategies include: patrols or outreach services; meals; sobering-up shelters; women's refuges; detox centres; legislative supports (including licensing restrictions and restricted public zones of consumption); approved gathering and camping places; rehabilitation programs (including counseling, education, group therapy, co-dependants support, excursions and activities); residential options; and support.

(7) Regional strategies

Regional approaches examine Indigenous migration and residential mobility patterns in order to understand why people leave their home communities, or what prevents them from returning. Regional strategies necessitate a common set of values between the regional centre's service providers and the communities of the outlying parts of the region, so as to facilitate shared decision-making in addressing clients' needs. This in turn may be accompanied by a regional education programme concerning urban lifestyles and values, and what might be expected of Indigenous people when visiting large cities, both in terms of mainstream and Aboriginal laws and behavioural values. The migration of Indigenous people to urban centres generates serious political questions concerning the quality of lifestyle in remote and rural Aboriginal communities, as well as the distribution and licensing of alcohol outlets throughout such a region. This response category has seldom been implemented.

(8) Accommodation options

Accommodation responses are relatively common, being readily funded through SAAP. A standard accommodation approach involves a threefold progression: (i) emergency or crisis accommodation for use over one night or a few, (ii) medium-term accommodation (or transitional housing), for use until (iii) conventional rental housing becomes available. Management services are required to assist people into all of these categories of accommodation and provide ongoing support. A knowledge of the sociospatial structure, cultural identity and lifestyle of Indigenous public place dwelling groups is a prerequisite to ensure effective transitions between each accommodation stage, otherwise clients may revert to public place dwelling. More challenging responses (in terms of public policy and governance), involve recognizing the right of public place dwellers to their outdoor lifestyle and providing forms of managed and serviced camps. Urban planning should ensure suitable land is set aside for such accommodation when development opportunities arise, so as to minimize local political difficulties.

(9) Dedicated service centres and gathering places

Providing meals to homeless people at their gathering places in parks and other public places has been carried out in the past largely by charitable organisations such as St Vincent de Paul, Mission Australia and the Salvation Army. A service provider can take advantage of such a concentrated gathering of clients to establish a working relationship with them and provide proactive outreach services. A more ambitious approach (only attempted in a few instances) involves the provision of a dedicated building, at which a range of services can be offered whilst public place dwellers gather and socialise nearby. The proposed location of a dedicated service centre for Indigenous homeless groups requires careful consideration in terms of the territorial constraints imposed by both the groups themselves and local urban stakeholders. Such service centres could also serve as address points for people in their correspondence with government agencies (benefits and housing allocation) and provide lockers where the homeless can store and protect valuable possessions.

(10) The physical design of public spaces

Recognizing that Indigenous people either have a right to dwell in public places, or at least should be provided with modest comforts until such time as they are able to attain a more conventional type of accommodation, a few local authorities have bravely provided physical improvements or embellishments to public places. Examples include groves of casuarinas in parklands to provide a soft under-bed of pine needles on which Aboriginal and other homeless people can sleep, storage shelves for public place dwellers, and a design for a park bench that can be transformed into a nocturnal

shelter.

(11) Public education strategies

The customary practice of camping without any shelter, in mild tropical climates, contributes to the ease with which Indigenous people can 'fall' into an itinerant lifestyle in regional centres. Externally-oriented living is but one of a number of cross-cultural differences that can lead to misconceptions amongst non-Aboriginal people about Aboriginal public behaviour. To offset such value differences, cross-cultural awareness programs are recommended (although have seldom been tried) to inform people on culturally-specific lifestyle choices and define appropriate urban behaviour guidelines. Another potential role of a public educational campaign is to reduce the level of unrealistic fear through better information on the circumstances, history and background of Aboriginal public place dwellers.

(12) Phone-in services

No phone-in services were identified in the National Survey that were specifically for Indigenous homeless persons, although some State Housing Departments and Councils have a free-call number for Indigenous housing clients in general. In NSW there was a service for homeless persons which attracted about 6% of Indigenous callers (HATSOS - refer to Appendix 2 profiles). Although many Indigenous public place dwellers may not be initially inclined to avail themselves of such a service, an outreach worker equipped with a mobile phone may be able to facilitate such a service on behalf of a person 'on the street'.

(13) Skills and training for field and outreach workers

Despite the potentially demanding behavioural and communication difficulties of working with Indigenous public place dwellers who may be suffering from substance abuse problems, identity crisis and poor physical health, there appears to be few available training options for professional or para-professional field and outreach workers. Exceptions include the Swinburne/Ngwala Willumbong Aboriginal and Drug Worker training courses in Victoria, and the Indigenous nursing and health science courses offered by the University of Sydney. Equally lacking are educational texts, information kits or videos relevant to Indigenous homelessness and public place dwelling.

(14) Partnerships

In recent years political support has been gained to develop partnerships to deliver inter-related services to Indigenous public place dwellers, whether such partnerships involve Indigenous community agencies, government departments, private sector groups or combinations of these entities. In reviewing such partnerships, an important quality is a sense of ownership of and responsibility for such partnerships. This should desirably remain with local Indigenous groups or agencies. The benefits of such partnerships can be improved information exchange, protocols for cooperation between organisations, and culturally appropriate staff training.

(15) Holistic Approaches

A holistic approach to Indigenous homelessness addresses both the immediate problems, as well as other underlying issues and causal factors, which may not be necessarily identified by the clients themselves. It involves reactive and proactive components that, are both short-term and long-term in their duration and draw on most of the response categories outlined above. Holistic approaches optimally require funding pooled from a number of agencies and a coordinator to ensure the integration of parallel strategies or components. The most ambitious holistic approach in Australia to date is that currently being attempted in Darwin and draws on the recommendations contained in the Memmott and Fantin report on 'long grassers' (2001).

Conclusion on Response Categories

The foregoing represents a summary of the 15 categories of responses to Indigenous homelessness, developed as a part of the Memmott et al (2002) analysis, which in turn described in detail some 73 response types (programs, activities, philosophies, etc). These 15 response categories can be subdivided into reactive (No.s 1-3), proactive (No.s 4-9) and holistic approaches (No.s 14-15). Collectively these responses address a wide range of needs that reflect the complex circumstances of Indigenous public place dwellers and homeless people. Which combination of responses are relevant to a particular place or group will vary across the continent depending on the local environmental and socioeconomic context and the history of contact between Indigenous and non-Indigenous people.

One of the problems of categorisation is that when applying certain definitions of 'homelessness' the composition of Indigenous groups dwelling in public spaces may be oversimplified and thus their needs may be at best, misunderstood

and minimally serviced, or at worst, overlooked and not addressed. Thus, the policy definitions and categories of 'homeless' people directly influence the perception of the needs of this group. Whereas government policy statements frequently recognise in general terms the multi-dimensional nature of homelessness, the majority adopt a limited or narrow definition of homelessness related to housing and accommodation when outlining response strategies. Although there is a growing recognition of the need to ally these two responses with policy areas such as health, welfare and the justice system; previously unrelated policy areas such as education, regional and urban planning and native title are also significant in addressing the full spectrum of need present in the lives of homeless Indigenous Australians.

Implications for the Current Study

Based on this literature analysis, two different types of structured interview were devised, one for public place dwelling individuals and one for insecurely housed individuals. These interview questionnaires are included in full in Appendix 1. Field workers were briefed on the various sub-categories of homelessness at the outset of the project, including spiritual homelessness, so they could be alert during interviewing to the presence and influence of these issues.

In order to assess the current state of service provision for homeless Aboriginal people in inner city Sydney, the profiles of the 36 identified service providers contained in Appendix 2 were then analysed in terms of the above 15 response categories. The outcomes of this analysis are contained in Chapter 3.

Table 2.2: Analysis of the Response Strategies in relation to the different categories of Indigenous Homeless and Public Place Dwelling People

Response Strategies	Homeless and Public Place Dwelling Categories								
	1.0 Public Place Dwellers				2.0 At Risk Categories				3.0
	1.1 Public Place dwellers-Short term	1.2 Public place dwellers-Medium	1.3 Public place dwellers-Long term	1.4 Reluctant public place dwellers	2.1 Insecurely housed	2.2 Substandard housed	2.3 Crowded housed	2.4 Dysfunctional Mobile	3.0 Spiritually homeless
1. Legislative and Policy Approaches [Only in conjunction with other strategies]	√	√	√	√					
2. Patrols & Outreach Services (Night Patrols, Aboriginal Wardens)	√	√	√	√			√	√	
3. Diversionary Strategies (Detox Centres, Sobering Up Shelters)	√	√	√	√				√	
4. Addressing Anti-Social Behaviour	√	√	√	√					
5. Philosophies of Client Interaction (Community Development Approach, Healing Framework)	√	√	√	√	√	√	√	√	√
6. Alcohol Strategies	√	√	√	√				√	√
7. Regional Strategies	√	√	√	√	√	√	√	√	√
8. Accommodation Options									
8.1 Emergency or crisis accommodation (1-3 nights) (Women's refuges, safe houses, sobering up shelters or hostels plus management support)	√	√	√	√	√	√	√	√	√
8.2 Medium-term transitional housing (1-6 months) (hostels, boarding houses, large extended family housing, hospital hostel, managed town camp, plus management support)					√	√	√		
8.3 Long-term housing with management support (houses, extended family houses, managed and serviced camps, flats and units, special housing for aged, men & women)					√	√	√		
9. Service Centres & Gathering Places (Food Provision, Day Centre, Dedicated Space)	√	√	√	√					
10. The Physical Design of Public Spaces (Storage Shelves, Park Shelter, etc)	√	√	√	√					
11. Public Education Strategies	√	√	√	√					√
12. Phone in Information Services	√	√	√	√	√	√	√	√	√
13. Skills & Training for Outreach Workers (Effective Use of Field Staff, Staff Training & Development, Information Sharing and Exchange)	√	√	√	√				√	
14. Partnerships	√	√	√	√	√	√	√	√	√
15. Holistic Approaches	√	√	√	√	√	√	√	√	√

CHAPTER 3: PROFILES OF SERVICE PROVIDERS

Chapter Aims and Methods

As a part of this study a number of profiles were compiled of service agencies and their programs that were considered relevant to the Aboriginal homeless population of inner city Sydney. The full profiles are contained in Appendix 2. They have been summarised in this chapter under the headings of practice response categories. These categories, and their derivation were introduced in Chapter 2 of this report. They represent a distillation of research into how government agencies across the country have responded to the issues emerging out of Indigenous homelessness, which has been conducted by Memmott and various AERC associates since 2001. These different types categorise a broad range of initiatives—including philosophies, policies, programs, services and strategies—aimed at addressing the needs of Indigenous people who are homeless and/or residing in public places. The aims of the following categorisation are to describe what programs exist in the study area, to readily illustrate where service provision gaps exist, and to draw conclusions that will inform the strategy discussion contained in Chapter 6: *Strategies and Recommendations*.

The profiles of service agencies were prepared using the notes recorded during a series of workshops that were held with relevant service providers, a number of interviews conducted with representatives of these service groups, any reports or brochures that could be located, and web-based material such as websites and online fact sheets. [Refer to Chapter 1 for a brief discussion of the workshops and interviews.] The headings under which information was collected were as follows:

- Contact Details
- Background Information
- Population Service by Organisation
- Management and Administration Structure
- Organisation Ideology
- Services Provided
- Main Concerns & Issues for Aboriginal Homeless
- Issues that can be tackled by this Organisation
- Sources of Information

Draft copies of the majority of profiles were forwarded to the relevant contact persons who were asked to comment on the accuracy of the information where necessary. Where comments were made under the two headings specifically relevant to the situation of the Aboriginal homeless of the study area, they have been paraphrased and incorporated into the discussion concluding this chapter. [Note: A small number of profiles have not been forwarded to the relevant agencies. These were Numbers 10 to 13, 24, 28, 31, 32 and 34 as listed in Appendix 2.]

Listing of the Organisations Profiled According to Response Categories

The body of this chapter is organised around the following 15 response categories:

1. Legislative (Policy) and Police approaches.
2. Patrols and Outreach Services.
3. Diversionary Strategies.
4. Addressing Anti-social Behaviour.
5. Philosophies of Client Interaction.
6. Alcohol and Drug Strategies.
7. Regional Strategies.
8. Accommodation Strategies.
9. Dedicated Service Centres and Gathering Places.
10. Physical Design of Public Places.
11. Education Strategies for Non-Indigenous People.
12. Phone-in Services.
13. Skills and Training for Field and Outreach Workers.
14. Partnerships.
15. Holistic Approaches.

For each of these response categories, the relevant homelessness services or programmes identified will be summarized, drawing from the material compiled in Appendix 2. Some comment is provided on their relevance to the Aboriginal homeless people of the study area. [Refer to the map contained in Figure 2 for an indication of where the identified service organisations are located in relation to the group territories discussed in Chapter 4.]

3.1 Legislative (Policy) and Police Approaches

From the information it could locate on the internet, the research team were unable to elaborate on what relevant legislation is enforced on a regular basis by the local Police units.

- *NSW Police – Kings Cross, Redfern & Surry Hills Local Area Commands*
- *City of Sydney Homeless Persons Protocol [see also 3.3, 3.5, 3.13 & 3.15]*

3.2 Patrols and Outreach Services

Of the 18 outreach services listed below, two specifically targeted drug users: the REPIDU Vehicle and Pedestrian Units and Home Service Unit, and the Kirketon Road Clinic mobile outreach service. The latter employed an Aboriginal Health Education Officer and had recently established the *Itha Mari* (Barkindji word meaning: 'in the right direction') Aboriginal Health and Healing Group. Only one of the services listed was run by an Aboriginal organisation (AMS). And only the Redfern/Waterloo Street Team stated clearly that it employed Aboriginal street workers. The remainder did not specify if they had evolved methods or used techniques with the Aboriginal people that they encounter, or in fact how many they do meet in their work areas. The last two services on the list provide services to people with gender issues and sex workers and related people in that industry respectively.

Missionbeat (Mission Australia) [see also 3.3 & 3.15]

Vans patrol the inner Sydney streets for homeless and/or substance affected people and transport them to the services that will satisfy their immediate needs for food, safe accommodation and clothing. Staff also encourage engagement with other intervention support services such as health clinics or Intoxicated Persons Units thereby diverting people from involvement with the police. The service responds to calls from the public or police and operates from 7am to 11pm seven days a week.

Mathew Talbot Hostel Outreach & Streetreach Programs (St Vincent de Paul) [see also 3.5, 3.8.1, 3.8.2 & 3.8.3, 3.15]

The hostel runs this program, which allows staff to meet homeless people in their own territory – on the streets. The team visits the areas around Philip Cook, Wynyard and Hyde Parks; the Town Hall; Martin Place; the State Library and Woolloomooloo. The program has developed an informal partnership with HATSOS and the City of Sydney Council.

Vincentian Village (St Vincent de Paul) [see also 3.5, 3.8.1 & 3.9]

The Village runs outreach services from Ashfield.

Oasis Youth Support Network Outreach Service (Salvation Army) [see also 3.8.1, 3.8.2, 3.8.3, 3.9 & 3.15]

This service, which has Salvation Army workers directly contacting people on the streets, operates in Kings Cross and Darlinghurst for the 12 to 25 year old age group. These street workers provide advice on such matters as health. This service is linked to a drop-in centre in Crown Street, Surry Hills.

City of Sydney Street Outreach Service (Provided by Independent Community Living Association for the City of Sydney Council)

This service is run by the Independent Community Living Association and provides outreach assistance to people who are homeless and sleeping rough in the City of Sydney local government area. The team is made up of professional workers who make patrols, offering homeless people assistance to access housing, health services and other community services. The team liaises closely with local health and social service providers and works 7 days a week, between 8:00am to 10:00pm on weekdays and from 2:00pm to 10:00pm on weekends. It also responds to referrals. The Independent Community Living Association is a non-government association, providing a range of services to people with psychiatric and other disabilities in the community.

Aboriginal Medical Service Outreach Service [see also 3.5 & 3.9]

The AMS has an Outreach Worker who contacts prisoners before their release and offers them assistance in planning their return to open society. The organisation has a referral service that also assists homeless people.

Redfern/Waterloo Street Team [see also 3.14 & 3.15]

The Street Team represents a partnership between relevant agencies that are seeking to improve the availability of services to young people and children. It provides advice and support in all matters including safe accommodation, problems at school and liaising with the Police, as well as recreational and sporting activities. The children and young people the staff encounter frequent public places and may be at risk or involved in risk taking activities. There are some Aboriginal street workers with a range of skills to meet the needs within the area. The RWST operates seven days a week.

Redfern/Waterloo Intensive Family Support Service (Barnardos, funded through RWPP) [see also 3.14]

This model of service delivery targets vulnerable families using assertive outreach, intensive home visiting support, community outreach, and interagency partnerships and the use of brokerage funds. Barnardos is Australia's leading children's charity and provides services that aim to successfully prevent and reverse the effects of abuse, neglect and homelessness on children and young people.

Homelessness Action Team Support and Outreach Service (HATSOS) (NSW Dept of Housing) [see also 3.9, 3.12 & 3.14]

The HATSOS provides a specialised street outreach service for the homeless people who are sleeping rough in the inner city suburbs of Sydney, which is linked to relevant support professionals. The Outreach Team is available from 7am to 7pm on Monday to Fridays (except on public holidays). Team members talk with homeless people about what they need and then assist them to locate a relevant service like temporary accommodation or meals. The Support Team is available from 9am to 5pm on Monday to Fridays (except on public holidays). It works with people who have already come into contact with the Outreach Team, assisting them with day-to-day living skills, connecting them with community support networks, helping to establish long-term accommodation, and supporting arrangements with health and welfare agencies.

Health Outreach Team (HOT) Project (Youth Accommodation Association [see also 3.8.2, 3.8.3 & 3.12]

YAA is the peak body representing the interests of homeless young people and youth accommodation services in NSW. HOT provides education and resources to young people and workers to increase their awareness and ability to respond effectively to HIV, Hepatitis C and sexual and IDU (Intravenous Drug Use) health issues. Services can request a HOT program for clients or staff.

Streetwalk Outreach Service (Youth Off the Streets) [see also 3.4, 3.6, 3.8.1 & 3.14]

Youth Off The Streets is a registered charity working with chronically homeless and drug addicted young people. Its food van service operates 365 days of the year to provide meals to the homeless and at risk young people living on the streets of Sydney. Apart from food, they provide crisis accommodation and counselling. The organisation established *Streetwalk* in 2002 the personnel from which physically walk targeted streets in Sydney's City and Metro areas each evening between 10 pm and 3 am providing assistance to homeless young people who are disconnected from their families or in crisis.

REPIDU Vehicle and Pedestrian Units and Home Service Unit [see also 3.6 & 3.13]

As well as its Vehicle and Pedestrian Units, this organisation has a Home Visit Service. It provides referral to a network of existing agencies that offer advice and additional harm reduction services.

Wayside Chapel Crisis Centre and Outreach & Shepherd of the Streets & Hands on Health Clinic [see also 3.9 & 3.12]

The Wayside Chapel is a non-denominational Christian organisation committed to assisting needy people in central Sydney. The Shepherd program involves a team of youth workers and volunteers that support youth at risk by patrolling the streets most afternoons and nights of the week until around 3am. This centre and mobile outreach service provides a hands-on drug free health service to those who would normally have difficulty accessing such care for financial and other reasons.

Kirketon Road Clinic mobile outreach service (South Eastern Sydney Area Health Service) [see also 3.5, 3.6 & 3.13]

This service provides health education, a needle syringe program and assessment and referral to drug treatment for hard to reach inner Sydney populations.

The Station Outreach Service [see also 3.9]

The Station is a drop-in centre or Dedicated Place where a range of assistance can be obtained. Housing Support is provided via an outreach service operating in the city-eastern suburbs and the inner-west of Sydney. Clients are given access to the Department of Housing, medium-term accommodation, community tenancy schemes, boarding house accommodation, crisis services and residency within the private market.

Hillsong Street Teams (Hillsong Foundation) [see also 3.8.2 and 3.9]

These are teams of volunteers who visit local refuges and homeless areas to build relationships and offer pathways to transformation.

The Gender Centre Inc [see also 3.8.2, 3.9 & 3.13]

The Gender Centre provides a wide range of services to people with gender issues, as well as their partners, families and friends in NSW. It also serve as an education, support, training and referral/resource centre to other organisations and service providers. The Centre employs an outreach worker who visits people on the streets, in jail, hospital or confined to a home, and who provides support, education and referrals to a broad range of drug and alcohol services.

Sex Workers Outreach Project (SWOP) [see also 3.9 & 3.12]

The SWOP aims to minimise the transmission of STD's and HIV/AIDS in the NSW sex industry, as well as providing a range of health, safety, support and information services for sex workers, management, clients and partners of sex industry workers. It runs an Information and Support Centre in Chippendale.

3.3 Diversionary Strategies

There are ten diversionary services listed below. The charitable organisations, such as Mission Australia and St Vincent de Paul, run a number of such services, which are linked to the others it provides (refer to 3.15 Holistic Approaches). This project's field research and service provider interviews have revealed that Aboriginal people do access a number of these services, however only one of the organisations have stated clearly that they deal with their Aboriginal clients in a manner different to their non-Indigenous ones. None appear to have informed their work with research into the way Aboriginal sobering-up centres in other communities operate.

Rawson Centre Intoxicated Persons Unit (Mission Australia) [see also 3.2, 3.6 & 3.8.1]

The Rawson Centre is a 12-bed Intoxicated Persons Unit where men over 18 years of age can stay overnight. Specialist staff assist clients in seeking longer term accommodation and rehabilitation programs. It provides an alternative to men being arrested and kept in a police cell. People access this service via Missionbeat or through referral from agencies such as the police or government departments.

Catherine and William Booth Houses (Salvation Army) [see also 3.6]

These houses are statewide residential rehabilitation services for women and men. Catherine Booth House has been recently opened and now provides a completely segregated residential service for women. The Salvation Army calls these places Recovery Service Centres or RSCs.

City of Sydney Homeless Persons Protocol [see also 3.1, 3.5, 3.13 & 3.15]

This protocol requires that the police are called if a homeless person poses a risk to themselves or others. They in turn are required to take the person to a relative or carer as the first priority, failing this, to an Intoxicated Persons facility.

The Haymarket Foundation [see also 3.6 & 3.9]

The Foundation provides a Proclaimed Place to which intoxicated persons can be taken by the Police under NSW state legislation at its Albion Street Lodge.

- *NSW Youth Drug & Alcohol Court [see also 3.6 & 3.15]*
- *Missionbeat (Mission Australia) [see also 3.2]*
- *Campbell House Intoxicated Persons Unit (Mission Australia) [see also 3.5, 3.6, 3.8.1 & 3.9]*
- *A Woman's Place (Mission Australia) [see also 3.6, 3.8.1 & 3.9]*
- *Mathew Talbot Hostel Intoxicated Persons Unit (St Vincent de Paul) [see also 3.6 & 3.8.1]*
- *Concord House Program (for young addicted men) (St Vincent de Paul) [see also 3.6]*

3.4 Addressing Anti-Social Behaviour

The three services listed here only target young people. The last two programs or centres do not cater for the specific cultural needs of Aboriginal homeless youth, however, the first listed does target such young people. The last two are of little relevance to the Aboriginal homeless youth of the study area, as they would require stays distant from family.

Foundation House (Youth Off the Streets) [see also 3.2, 3.6, 3.8.1 & 3.14]

This facility in Canyon Leigh combines the treatment of early adolescent offenders who have specific behavioural problems.

Mirvac House Treatment Program for sexual behaviour (Youth Off the Streets) [see also 3.2, 3.6, 3.8.1 & 3.14]

Located in Sutton Forest, this is a residential treatment program for male adolescents who have sexual behaviour problems.

Lois House and Debra Benson House (Youth Off the Streets) [see also 3.2, 3.6, 3.8.1 & 3.14]

These houses in Marulan target homeless teenage girls and are run on the same principals as the YotS boys' farms.

3.5 Philosophies of Client Interaction

There are eleven services listed below. Three are run by Aboriginal organisations. Five more have initiated strategic approaches to dealing with the needs of Indigenous clients, although apart from its cultural program St Vincent de Paul does not specify of what this consists. Campbell House and The Crossing program employ a general philosophy of client interaction that could be adapted to include the Aboriginal homeless.

Campbell House including Intoxicated Persons Unit & other proposed facilities (Mission Australia) [see also 3.3, 3.6, 3.8.1 & 3.9]

Currently this service is not specific to Indigenous clients but it has potential to extend its approach to embrace Indigenous public place dwellers.

Cultural Program (St Vincent de Paul)

The St Vincent de Paul organisation has a strategic approach to engaging with homeless Aboriginal people, which involves a cultural programme run by an archaeologist and an Aboriginal representative. Aboriginal men are taken to the Botanical Gardens to talk about a range of cultural matters.

City of Sydney Homeless Persons Protocol [see also 3.1, 3.3, 3.13 & 3.15]

The key principal of this protocol is that everyone has a right to use public places and people should not be moved on just for occupying them. Implicit in this policy is the idea that people may sleep in public places.

Aboriginal Children's Service

This organisation's service includes a family violence worker, family and court support mechanisms, referral, and fostering of children with Aboriginal families (not exclusively so however).

Aboriginal Medical Service [see also 3.2 & 3.9]

Apart from GP consultations the Service offers pregnancy and women's health care; immunisations; hearing tests; diabetes and heart disease screening, monitoring and care; quit smoking counselling; aged care assessments; podiatry; ear, nose and throat care; children's health care; sexual assault counselling; and cultural awareness. There is also a dental clinic on the premises, as well as a mental health service, an eye clinic, and a drug and alcohol unit.

Kirketon Road Clinic (South Eastern Sydney Area Health Service) [see also 3.2 & 3.6]

The clinic employs an Aboriginal health education officer to explore and address any specific needs with respect to HIV prevention, sexual health and illicit drug use that its Aboriginal clients have. The officer is also involved in community education efforts to sensitise mainstream HIV and drug services to Aboriginal-specific needs, and Aboriginal-specific services to needs with respect to the needs listed above.

The Crossing (Mission Australia) [see also 3.8.3 & 3.14]

The Crossing is a long term, intensive case management service for young people aged 16 to 25, who are homeless or at risk of homelessness, finding it difficult to access other support services, or those with complex issues, multiple needs and/or challenging behaviours. It works in partnership with the young person and other agencies to identify and address relevant issues, helping them with such things as accommodation, mental health issues, material aid, and family issues. The service has set up two houses to provide accommodation for its clients.

Rough Edges Program run out of St John's Church in Darlinghurst (Anglicare) [see also 3.6, 3.9 & 3.15]

St John's enacts a philosophy of taking the whole person's needs seriously, and has strategies and resources for tackling issues related to substance abuse, financial assistance and accommodation referral that its Aboriginal clients face. Sometimes the program has the ability to assist directly with these things, while through partnerships with and referrals to other service providers it can help with those outside its capacities.

- *Mudgin – Gal Drop-in Centre [see also 3.9]*
- *Mathew Talbot Hostel Outreach Program (St Vincent de Paul) [see also 3.2, 3.8.1, 3.8.2 & 3.8.3, 3.15]*
- *Vincentian Village (St Vincent de Paul) [see also 3.2, 3.8.1, 3.9]*

3.6 Alcohol & Drug Strategies

There are 18 services listed below. One is run by an Aboriginal organisation (Oolong House), while a further one specifically targets Aboriginal alcoholics. The research team was unable to determine that any of the remaining programs

had enunciated strategies or approaches for dealing with Aboriginal clients, except with the programs run by St John's. It was also unable to determine in most cases how many Aboriginal homeless people accessed the services.

Concord House Program (for young addicted men) (St Vincent de Paul) [see also 3.3]

This program is for young men involved with drugs and alcohol. It offers accommodation, as well as anger management, living skills, conflict resolution, relationship restoration and parenting programs.

St John's Church in Darlinghurst (Anglicare) [see also 3.5, 3.9 & 3.15]

This church provides drug and alcohol counselling and referral services as a part of its Rough Edges street ministry program.

The Wesley Mission Rehabilitation Program

This is for homeless men and women aged 18 years and over who are recovering from addictive behaviours and have associated underlying issues that need attention. These people are able to stay for a period of up to 2 years. [see also 3.15]

Dunlea Adolescent Program for Substance Abuse (Youth Off the Streets) [see also 3.2, 3.4, 3.8.1 & 3.14]

This substance abuse program in Merrylands is a residential 2 to 4 week program for young people aged 13 to 18 years.

McIntosh House Semi Independent Living Program (Youth Off the Streets) [see also 3.2, 3.4, 3.8.1 & 3.14]

This program is a semi-independent living and mentoring program for previously drug addicted, abused and/or severely disadvantaged adolescent males and females aged from 16 years.

REPIDU - Resource and Education Program for Injecting Drug Users [see also 3.2]

REPIDU is a facility of Drug and Alcohol Services run by the Central Sydney Area Health Service (CSAHS). Its Redfern Centre provides referral to drug treatment, support and other health services, as well as information and health education on safer injecting and sexual practices. It supplies injecting equipment, safe needle disposal containers and safe sex resources, along with a range of disposal services for consumers and the wider community. The Centre responds to calls from the statewide toll free Needle Clean-up Hotline. It provides crisis intervention for accidental overdose and other drug-related health problems. Education and training are also provided to organisations that have contact with people who inject drugs.

Sydney Medically Supervised Injecting Centre (MSIC)

As well as providing a space for safe injecting drug use, the MSIC provides its clients with access to primary health carers, referral to methadone maintenance programs, detoxification and treatment, and other services such as accommodation.

NSW Youth Drug & Alcohol Court [see also 3.3 & 3.15]

This court program combines intensive judicial supervision, drug treatment and case management of young offenders with drug and/or alcohol use problems. In addition to court services, program interventions are delivered by or through the Department of Juvenile Justice, NSW Health, the Department of Community Services and the Department of Education and Training.

Kirketon Road Clinic (South Eastern Sydney Area Health Service) [see also 3.2 & 3.5]

The Centre operates two outlets or service locations in Kings Cross. The first provides a comprehensive medical, counselling and social welfare service including methadone access and needle syringe programs. The second is a satellite of the first and provides a needle syringe service, health and social welfare advice, and assessment and referral to drug treatment and other relevant services. It is located at the centre of where sex work and drug sales are undertaken in Kings Cross.

The Haymarket Foundation [see also 3.3, 3.8.1 & 3.9]

The Foundation's Bourke St Project provides a residential drug and alcohol rehabilitation program, which employs a coordinator and one welfare worker.

Foster House Detox Program (Salvation Army) [see also 3.8.1]

This facility features a Detox Centre that was opened in March 2004 and provides a 10-bed medicated program for men that replaces the Campbell House program (refer Mission Australia profile).

Aboriginal Alcoholics (Crossroads Aboriginal Ministry)

This group is run out of Redfern.

Oolong House (Oolong Aboriginal Corporation)

Oolong House is a 15-bed residential alcohol and other drug rehabilitation centre for Aboriginal males over 18 years of age. It is located in Nowra on the south coast of NSW. The program provides a 13-week residential program, while providing other services including group therapy, one-to-one counselling, stress and anger management, communication skills and the use of AA and NA meetings.

- *Rawson Centre Intoxicated Persons Unit (Mission Australia) [see also 3.3 & 3.8.1]*
- *Campbell House Intoxicated Persons Unit (Mission Australia) [see also 3.3, 3.5, 3.8.1 & 3.9]*
- *A Woman's Place (Mission Australia) [see also 3.3, 3.8.1 & 3.9]*
- *Mathew Talbot Hostel Intoxicated Persons Unit (St Vincent de Paul) [see also 3.3 & 3.8.1]*
- *Catherine and William Booth Houses (Salvation Army) [see also 3.3]*

3.7 Regional Strategies

The research team was unable to locate any programs that fell into this service response category.

3.8 Accommodation Options (Crisis or Emergency, Medium Term & Long Term)

An apparently wide range of accommodation options, covering all timeframes, is listed below. Twenty crisis or emergency services are listed, however only three was run by an Aboriginal organisation (Aboriginal Hostels). Nineteen medium-term services were identified, and again only one was run by an Aboriginal organisation. And 13 long-term services are listed, two with an Aboriginal focus: the NSW Aboriginal Housing Office and the Pemulwuy Reconstruction Project being coordinated by the Aboriginal Housing Company.

3.8.1 Crisis or Emergency

Campbell House including Intoxicated Persons Unit (Mission Australia) [see also 3.3, 3.5, 3.6 & 3.9]

Campbell House is a 57-bed refuge for men aged over 18 years, which includes an Intoxicated Persons Unit. Meals, and laundry and relaxation facilities are provided. A crisis team with mental health skills visits regularly, and visitors can access a dental service that provides referrals related to such issues as mental illness and gambling addiction. There is a proposal to upgrade this accommodation facility to include self-contained residential units where intensive case management can occur, and where clients can be linked to education and living skills programs. It is intended that other facilities, such as an internet cafe, will make the environment more like a University campus. [Note: Upgrade of this facility was underway as of early 2005 so it was closed and clients diverted to St Vincent's Hospital.]

A Woman's Place (Mission Australia) [see also 3.3, 3.6 & 3.9]

The facility provides 19 beds to women over 18 years of age who are escaping domestic violence, recently released from prison or refugees. The centre is open 24 hours a day, 7 days a week and provides meals and individualised case management from trained female staff. There are six Intoxicated Persons Unit (IPU) beds in which women can stay for eight hours or until sober. Assistance is provided with budgeting and other living skills, conflict resolution, grievance procedures, communication and social skills. When necessary women are referred to specialised services.

Mathew Talbot Hostel including the Intoxicated Persons Unit (St Vincent de Paul) [see also 3.2, 3.5, 3.6, 3.8.2 & 3.8.3, 3.15]

The Mathew Talbot Hostel in Woolloomooloo offers 200 beds to the homeless men of inner Sydney as well as serving over 1,000 meals daily. Few Aboriginal men use the hostel beds but they consume some 17% of the meals served and access the facility's medical service. The latter service receives regular visits from a doctor, eye specialist, psychiatrist and paediatrician. There is also a hospital out patient service.

Vincentian Village Refuge (St Vincent de Paul) [see also 3.5 & 3.9]

The refuge provides crisis accommodation (for 7 families and 9 single women on-site, and 2 for families off-site), case management, counselling, advocacy referral and outreach support. With regards to accommodation, priority is given to single fathers with children and two parent families. There are two outreach units linked to this service and located at Ashfield [?]. The Village staff also assist with seeking employment, counselling and accessing psychiatric services as necessary. Single women were once only allowed a three-month stay, however, this has been extended to six months and longer due to the difficulty in finding suitable medium to long-term accommodation for them. Many of the women exhibit risk taking behaviours that there are no specifically trained staff to deal with due to budget constraints.

Oasis Youth Support Network Crown Street Hostel (Salvation Army) [see also 3.2, 3.8.2, 3.8.3, 3.9 & 3.15]

Thirteen beds are provided at this hostel for those 21 years of age and under. Assessments and referrals are carried out, however only one or two Aboriginal youths sleep in the hostel.

Edward Eagar Lodge (The Wesley Mission) [see also 3.8.2, 3.8.3, 3.9 & 3.15]

This facility is located in the relevant area of Sydney and provides crisis accommodation for homeless men aged over 18 years for up to 3 months. The Lodge also features a day centre open from Monday to Friday.

Don Bosco House (Youth Off the Streets) [see also 3.2, 3.4, 3.6 & 3.14]

Don Bosco House in Marrickville provides crisis and short-term accommodation for homeless adolescents aged 15 to 18 years old.

SAAP [see also 3.8.2 & 3.15]

The Supported Accommodation Assistance Program (SAAP) provides operational funds to non-government organisations to help people who are homeless or at risk of homelessness. The kinds of services provided to clients by SAAP, in descending order by which they are utilised, include: general support, temporary accommodation, counselling, access to financial and employment services, and access to specialist services.

Foster House Complex (Salvation Army) [see also 3.6]

This facility provides crisis accommodation to homeless men.

Fairfax House (Mission Australia)

This facility provides short-term crisis accommodation to families with children.

Albion Street Lodge (The Haymarket Foundation) [see also 3.2 & 3.9]

The Albion Street Lodge provides overnight crisis accommodation for substance abusers.

St Canice's Catholic Church [see also 3.9]

The church runs an overnight shelter for a maximum of 25 homeless people in its hall. It only operates on Thursday nights. The shelter has planning approval from the City of Sydney Council for a one-year trial period.

- *Homeless Brokerage Service (Provided by the YMCA for the City of Sydney Council) [see also 3.2, 3.12 & 3.15]*
- *Mac Silva Centre (Aboriginal Hostels Limited) [see also 3.8.2]*
- *Chicka Dixon Hostel (Aboriginal Hostels Limited)*
- *Marrickville Hostel (Aboriginal Hostels Limited)*
- *Charles Chambers Court aged care facility (Mission Australia)*
- *Rawson Centre Intoxicated Persons Unit (Mission Australia) [see also 3.3 & 3.6]*
- *Missionholme 2-bed crisis aged care facility (Mission Australia) [see also 3.8.2 & 3.8.3]*
- *Samaritan House Women's Shelter (Salvation Army).*

3.8.2 Medium Term

Charles Chambers Court aged care facility (Mission Australia) [see also 3.8.1 & 3.8.3]

Charles Chambers Court is a fully accredited aged care facility. It provides personalised high quality accommodation and personal care for 70 homeless and frail/aged people each year. The nature of the service this facility offers is very similar to that of Missionholme in Redfern (see description above).

Drummoyne Lodge (Mission Australia) [see also 3.8.3]

This facility provides medium to long-term semi-independent accommodation for homeless and disadvantaged Sydney young people aged 18 to 24 who are referred by government departments, family, friends and other youth services. To become a resident, the person has to demonstrate a strong desire to improve their situation. Through affordable housing and case management, the young person is able to get back on track with employment, tertiary study, family relationships and achieving independence.

Women in Supported Housing (Mission Australia)

WISH provides a safe, affordable and supportive environment for single women who are aged 18 and over, not accompanied by children, and who are homeless or at risk of becoming so. It is a network of medium-term housing for women who have high, complex needs, which can include escaping domestic violence, relationship breakdown, eviction, unemployment, mental illness or other disability, and drug addiction or gambling. There are four full-time caseworkers, a team leader and manager, and the service operates from Monday to Friday between 8am and 5pm. There is also an after hours service. The staff provide referrals to relevant specialist agencies.

The Gateway – Men's Supported Housing Program (Mission Australia)

The MSHP is similar to WISH (above), providing medium-term accommodation to men and incorporating case management, living skills and referrals to outside agencies.

Mathew Talbot Hostel Outreach Program – Charles O'Neill House Program (St Vincent de Paul) [see also 3.2, 3.8.1 & 3.8.3, 3.15]

As a part of the hostel's Outreach Program, there are currently 11 houses providing 61 beds to men requiring medium to long-term accommodation in shared residency circumstances. Prior to being moved into such a situation, each individual is assessed. Once relocated these people are assigned a caseworker that works closely with them to develop a plan by which to improve their lives. The Charles O'Neill House Program is also run out of the hostel. Its philosophy is to work with men as individuals and provide them with life skills education. Accommodation is provided in a house in Surry Hills for approximately 50 men in three lots over the course of a year. The Life Skills Education Programme consists of humanities classes, but also those in relaxation. In the later stages of the programme men attend classes at TAFE and Sydney Community College. A dedicated art room has been set aside.

Vincentian Village Refuge (St Vincent de Paul) [see also 3.2, 3.5, 3.8.1 & 3.9]

Single women are allowed to stay up to six months at the Village because of difficulties in finding them medium to long-term accommodation.

Oasis Youth Support Network (Salvation Army) [see also 3.2, 3.8.1, 3.8.3, 3.9 & 3.15]

The organisation also provides a range of accommodation services to meet medium to long-term requirements, aiming to create a supportive environment where young people can achieve the skills necessary for independence.

Noreen Towers Community (The Wesley Mission) [see also 3.15]

This service provides transitional accommodation and programmed support for homeless families for periods from 6 to 9 months.

Mac Silva Centre & Tony Mundine Hostel (Aboriginal Hostels Limited) [see also 3.8.1]

AHL is a company that provides funds to approved organisations to operate hostels that provide temporary accommodation for their local ATSI community. It has various categories it uses to distinguish its accommodation facilities. The Mac Silva Centre is described as a homeless hostel where youths and adults are assisted to live independently within the community. And the Tony Mundine Hostel is a place that facilitates access to tertiary education and training by providing accommodation and related facilities to meet their accommodation needs.

Erskineville Youth Housing in Erskineville (Youth Accommodation Association) [see also 3.2, 3.8.3 & 3.12]

This facility provides medium to long-term, semi-supported accommodation for young people aged 16 to 18 years.

Lillians in Erskineville (Youth Accommodation Association) [see also 3.2, 3.8.3 & 3.12]

This facility provides female only medium to long-term accommodation for 14 to 18 year olds.

Theba Young Women's Support Service (Youth Accommodation Association) [see also 3.2 & 3.12]

This facility provides medium-term independent accommodation and support for young women aged 18 to 25 years.

Come In Centre in Paddington (Youth Accommodation Association) [see also 3.2 & 3.12]

This centre provides medium-term and semi-independent housing.

CRASH (Construction Industry Relief and Assistance for Sydney's Homeless) [see also 3.8.1]

CRASH is a charitable research project associated with the University of Sydney and the I B Fell Housing Research Centre. It engages the private sector property industry and facilitates their support of homeless people with medium-term shelter in vacant buildings throughout the city of Sydney. It may also provide employment opportunities through caretaking and labouring to renovate the selected buildings. The potential benefits to building owners include reduced insurance for occupied buildings, reduced 24hr security costs, rate relief and improved standing in the eyes of the community.

The Gender Centre Inc Residential Service [see also 3.2, 3.9 & 3.13]

The Centre provides semi-supported share accommodation for up to 11 residents aged 16 and over. Clients can stay up to twelve months and are supported to move towards independent living. During their stay they are also encouraged to consider a range of options available to meet their needs. Those who find themselves in Centre housing are offered case management services.

Twenty 10 Association Accommodation [see also 3.13 & 3.14]

The Association is a non-profit, welfare, charitable, and benevolent organisation whose objectives are to provide for the relief of poverty, distress, homelessness, destitution, suffering and misfortune experienced by young lesbians and gay men. Twenty 10 currently provides medium term accommodation under the DoCS Supported Accommodation Assistance

Program (SAAP). This is available for young GLBT under the age of 25. They currently house 15 people each night under this program. Allocation of vacancies is based on need.

Hillsong Mercy Program (Hillsong Foundation) [see also 3.2 and 3.9]

This program exists to see young women aged 16 to 28 years reach their full potential through participation in the Hillsong Foundation's residential based program. Each young woman participates in class time, life-skills training, recreation and counselling based on Christian principles.

- SAAP [see also 3.8.1 & 3.15]
- Missionholme aged care hostel (Mission Australia) [see also 3.8.1 & 3.8.3]

3.8.3 Long Term

Missionholme nursing home (Mission Australia) [see also 3.8.1 & 3.8.2]

Missionholme provides 73 long-term beds to its nursing home clients, while also offering 39 in its hostel and another 2 crisis places. It recognises that a growing number of frail aged people, who have complex health, personal and hygiene needs, including dementia and other mental issues, are living on Sydney streets. Its Assessment Team liaises with related homeless support agencies to ensure people are referred to the centre.

Mathew Talbot Hostel Outreach Program – Homereach Program (St Vincent de Paul) [see also 3.2, 3.8.1 & 3.8.2, 3.15]

The hostel runs this program for men who have moved into long-term accommodation and it is usually funded by the NSW Department of Housing. It assists clients in establishing a stable tenancy and permanent connection through practical support and case management that facilitates community participation and social engagement.

Vincentian Village Aged Care Hostel (St Vincent de Paul) [see also 3.2, 3.5, 3.8.1, 3.8.2 & 3.9]

The aged care hostel has 30 beds located in single rooms with bathrooms. The level of care it provides is termed low; meals are provided, as well as activity programs and personal care where required. This facility is not specifically for homeless people but could accommodate them if necessary.

The Wesley Mission Supported Accommodation [see also 3.15]

This organisation runs supported accommodation in 25 suburbs throughout metropolitan Sydney for homeless men, and women (over the age of 18 years) and families. People can stay for up to 2 years.

Pemulwuy Reconstruction Project (Aboriginal Housing Company)

This project involves the redevelopment or reconstruction of The Block in Redfern, including much needed housing and related infrastructure such as public space and amenities. The project's vision is to restore a strong and healthy Indigenous community to this suburb in which tradition, cultural values and spirituality are emphasised. Construction on the first stage of this project was scheduled to begin in 2005.

NSW Aboriginal Housing Office – Sydney Regional Committee.

The AHO was established to ensure that the Aboriginal people of NSW had access to a diverse range of affordable and quality housing that was safe and culturally appropriate. Its remit is also to involve those people in the policies and processes by which this housing is procured, as well as to oversee the work of the registered Aboriginal housing organisations. The body must ensure that those most in need are serviced as efficiently as possible.

Shelter NSW [see also 3.13]

This arm of Shelter promotes the interests in affordable housing of low-income and disadvantaged members of the NSW population. Its role is to promote a coordinated response within the community sector to the housing issues impacting on access by these people, lobby government and community-sector organisations, increase public awareness of the relevant issues, and conduct and disseminate research.

- Oasis Youth Support Network (Salvation Army) [see also 3.2, 3.8.1, 3.8.2, 3.9 & 3.15]
- Erskineville Youth Housing in Erskineville (Youth Accommodation Association) [see also 3.2, 3.8.2 & 3.12]
- Lillians in Erskineville (Youth Accommodation Association) [see also 3.2, 3.8.2 & 3.12]
- Charles Chambers Court aged care facility (Mission Australia) [see also 3.8.1 & 3.8.2]
- Drummoyne Lodge facility for 18 to 25 year olds (Mission Australia) [see also 3.8.2]
- The Crossing (Mission Australia) [see also 3.5 & 3.14]

3.9 Dedicated Service Centres and Gathering Places

There are 20 centres listed below. Four of these are specifically for women, one being run by an Aboriginal organisation and targeted at Aboriginal homeless women and another also targeting girls. One further centre focuses its services on young people. The other centres provide services and utilise strategies of client interaction that would be readily translated to use with Indigenous clients. The researchers made the comment that a centre where Aboriginal homeless people could find out about the Indigenous-specific services available to them would be greatly valuable (refer to Chapter 4 concluding comments). Two of the services address the needs of transgender individuals as well as gays and lesbians, while a further one assists on sex workers.

Lou's Place (Mission Australia)

Located in Kings Cross, this is a converted terrace house where women and children can seek daytime refuge; where immediate needs for food and clothing are met and strategies for increasing personal resources are introduced. Trained staff assist the women who have problems with such issues as mental illness or addiction. Legal and medical services can also be accessed by clients.

Vincentian Village (St Vincent de Paul) Day Centre [see also 3.5]

The Village's day centre has no age or gender restrictions and is open daily between 10.30am and 3pm. Street people are given lunch and dinner at a nominal cost (with soup & bread free). They can use laundry and shower facilities, and can obtain clean clothing. Men mainly use this service and there is a need to establish a 'women only' area. Welfare workers support them with medical care, housing assistance, court appearances, prison visits, mental health and addiction issues, and dealings with government agencies. The Village also provides computers, televisions, musical instruments, a reading group and friendly company. Tertiary education courses are provided by a visiting Professor from the Australian Catholic University.

Oasis Youth Support Network Centre (Salvation Army) [see also 3.2, 3.8.1, 3.8.2, 3.8.3 & 3.15]

Young people can visit this Drop In Centre in Crown, which provides such things as meals; medical, mental health and legal services; storage; laundry facilities; and showers. The visitors can be referred to relevant services to meet their needs. The aim is also to improve opportunities for youth through the provision of recreation and entertainment facilities. The Centre features an Internet Cafe and there are plans to start running a mobile version from a coffee can.

Wayside Chapel Crisis Centre & Hands on Health Clinic & Nomad Coffee Shop/Drop-in Centre [see also 3.2 & 3.12]

The crisis centre is both a drop and phone in facility that operates between 7am and 11pm. There is also a Bath House for those needing personal hygiene facilities and they refer many people to other agencies in Sydney. The Nomad coffee shop and drop in centre is open from 9 am to 11pm. The Coffee Shop offers meal deals through the generous assistance of local shops, delis and bakeries. The meals are not free but are extremely affordable to those of lesser means. People can come in for a chat and watch TV.

St John's Church in Darlinghurst – counselling and referral services (Anglicare) [see also 3.5, 3.6 & 3.15]

This centre serves the street community of Kings Cross and Darlinghurst, a diverse mix of young and old, those living in supported accommodation and those on the street, and those with mental health or dependency issues. Rough Edges at night is a drop in centre where patrons have an opportunity to socialise, have a meal and access information about other services. It also provides community assistance for people who need emergency financial help, food or prescription vouchers and support in developing skills to cope with lifestyle changes or management. It provides a legal counselling and referral service, art and computer clubs and a Community Assistance and Partnership Programme. Further welfare services are provided from Surry Hills for families and young people in crisis.

The Haymarket Foundation Clinic [see also 3.3, 3.6 & 3.8.1]

The Clinic provides primary health care and welfare services, employing two doctors, two clinical nurse specialists, and three welfare workers.

The Station [see also 3.2]

The Station is a drop-in centre or Dedicated Place. It provides a variety of information and assistance on the following topics: Mental health issues, Tenancy advice (eg How to connect utilities & acquisition of furniture, Advocacy, Referral to other services, and Living skills advice (eg Budgeting, cooking etc). The Station also provides forty lockers for homeless people, which are highly sought after. The basic needs of its clientele are also provided for, with such things as laundry facilities and showers. They serve a free breakfast and lunch.

The Gender Centre Inc [see also 3.2, 3.8.2 & 3.13]

The Gender Centre provides counselling to residents, clients and partners, families and friends of people with gender issues. It also provides education, support and referrals to a range of specialist counselling. The Centre organises social

and support groups and outings. Referrals for medical HIV/AIDS, education, training, employment, legal, welfare, housing and other community services are also available to residents and clients living in the community.

Sex Workers Outreach Program (SWOP) Information Centre [see also 3.2 & 3.12]

SWOP runs an Information and Support Service for people working in the sex industry at its Centre in Chippendale. Information and referrals on the following matters are provided to visitors: health, employment & safety, legal, education resources, support & wellbeing and financial.

Women's and Girls' Emergency Centre Inc

The Centre serves all women in need of assistance with housing and other issues such as domestic violence and sexual abuse. It caters for lesbian, bisexual and transgender women. The drop-in Centre is a safe and friendly place to have a shower, something to eat and a sleep. People can also collect mail and watch television. They can also talk about their problems with trained staff. The Centre also provides assistance with housing.

St Canice's Kitchen (St Canice's Catholic Church) [see also 3.8.1]

The church runs a kitchen where homeless people can have a free meal. It is located near Kings Cross.

Hillsong Emerge Centre (Hillsong Foundation) [see also 3.2 and 3.8.2]

This Centre seeks to help people break out of a welfare/victim mindset and connect to their value and potential. While it is not clear what services they provide at these centres they do see a number of Aboriginal homeless people from the area.

- *Edward Eagar Lodge Day Centre (The Wesley Mission) [see also 3.8.1 & 3.15]*
- *Aboriginal Medical Service office in Redfern [see also 3.2 & 3.5]*
- *HATSOS offices [see also 3.2, 3.12 & 3.14]*
- *Redfern Drop-in Centre (St Vincent de Paul)*
- *Campbell House including Intoxicated Persons Unit & other proposed facilities (Mission Australia) [see also 3.3, 3.5, 3.6 & 3.8.1]*
- *A Woman's Place (Mission Australia) [see also 3.3, 3.6 & 3.8.1]*
- *Mathew Talbot Hostel (St Vincent de Paul) [3.5, 3.8.1, 3.8.2 & 3.8.3]*
- *Mudgin – Gal Drop-in Centre [see also 3.5]*

3.10 The Physical Design of Public Places

The research team was unable to locate any programs that fell into this service response category. However the provision of culturally appropriate housing and improved quality public space, which forms part of the AHC's Pemulwuy Reconstruction Project will decrease the number of people living in substandard conditions and increase the general amenity of The Block.

3.11 Education Strategies for Non-Indigenous People

The research team was unable to locate any programs that fell into this service response category.

3.12 Phone-in Services

There are six phone-in services listed below. None are specifically targeted at Aboriginal people or run by an Aboriginal organisation. One focuses its services toward women escaping domestic violence.

City of Sydney Homeless Persons Information Centre (HPIC)

The HPIC is operated directly by the City of Sydney and is jointly funded by it and the NSW Departments of Community Services and Housing. It is a telephone-based service that assists homeless people and agencies working with homeless people by providing: immediate advice and information, referral to crisis accommodation and referral to support services. The HPIC can make referrals for individuals and couples over 18 years of age, and family groups.

Youth Emergency Accommodation Line & Online Accommodation Listing (Youth Accommodation Association) [see also 3.2, 3.8.2 & 3.8.3]

This telephone line provides a recorded listing of vacancies in crisis refuges throughout NSW. It is updated daily by 9.30 am. An online, regularly updated list of vacancies in medium and long-term youth accommodation services is also provided.

Women's Refuge Resource Centre [see also 3.1.3 & 3.14]

The WRRC provides information online and through a phone service to people needing information about refuges throughout NSW.

- *Wayside Chapel Crisis Centre – Phone-in Service [see also 3.2 & 3.9]*
- *Homelessness Action Team Support and Outreach Service (HATSOS) Freecall number (NSW Dept of Housing) [see also 3.2, 3.9 & 3.14]*
- *Sex Workers Outreach Program (SWOP) [see also 3.2 & 3.9]*

3.13 Skills and Training for Field and Outreach Workers

The research team were able to identify eight programs that fall under this category heading. None were specific to Indigenous people.

Women's Refuge Resource Centre [see also 3.12 & 3.14]

The WRRC provides training to workers in the women's refuge and domestic violence field.

The Gender Centre Inc [see also 3.2, 3.8.2 & 3.13]

The Centre provides training, support and workshops to employers, service providers, students and other people interested in gender issues. Its Resource Development program also produces a range of print resources on HIV/AIDS, medical and other information relevant to people with gender issues and their service providers. Such things as information packages, fact sheets and other printed materials, including a free, quality bi-monthly magazine 'Polare' and specialised advertising supplement are provided.

Kirketon Road Centre (South Eastern Sydney Area Health Service) [see also 3.2, 3.5 & 3.6]

The KRC conducts regular education and training sessions for a variety of organisations on request. It also conducts a Needle Syringe Program and Outreach Training courses. These courses provide training in harm minimisation, basic drug information, blood borne virus transmission, developing outreach skills, occupational health and safety, overdose intervention and child protection issues.

REPIDU - Resource and Education Program for Injecting Drug Users [see also 3.2 & 3.6]

The REPIDU provides education and training to organisations that have contact with people who inject drugs.

Shelter NSW [see also 3.8.3]

Shelter NSW runs day training courses on housing issues and policy around NSW.

Society of St Vincent de Paul [see also 3.15]

The Mathew Talbot Hostel has recently received a State Government grant to enable it to extend its services and collaborate with other inner city homeless services. One objective of the new strategy involves providing further training to staff and volunteers regarding case management.

Twenty 10 Association [see also 3.8.2 & 3.14]

Ready or Not is a training program run by Twenty 10 that works with young people who may be gay, lesbian or questioning their sexuality.

- *City of Sydney Homeless Persons Protocol [see also 3.1, 3.3, 3.5 & 3.15]*

3.14 Partnerships

The research team has listed seven programs or organisations that actively facilitate partnerships in their work with the homeless. Of particular interest is the Redfern/Waterloo Partnerships Project, which represents a government-sponsored effort to respond to the vital issues of these suburbs with high Indigenous populations. Also of great importance is the NSW Government's *Partnerships Against Homelessness*. However what are apparently lacking are the methods and means to resource smaller organisations to form partnerships with other agencies. Of further note is the recent agreement between the three big charities working in the study area—Mission Australia, St Vincent de Paul and the Salvation Army—to not duplicate services to homeless people by sectoring the work (p.c. Kay Elson in late December 2004.)

Mathew Talbot Hostel Streetreach Program (St Vincent de Paul) [see also 3.5, 3.8.1, 3.8.2 & 3.8.3, 3.15]

Streetreach has formed an informal partnership with HATSOS. The hostel has recently received a State Government grant to enable it to extend its services and collaborate with other inner city homeless services. Some objectives of this new strategy involves performing needs assessments of current clients to devise appropriate case management strategies, providing a range of living skills and recreational courses, providing more intensive case management, and offering further training to staff and volunteers regarding case management. The hostel has also recently formed partnerships with Darlinghurst Community Health Centre and Long Bay Gaol, TAFE, Sydney Community College and Sydney Grammar.

The Redfern/Waterloo Partnerships Project (RWPP) [see also 3.2 & 3.15]

The lead agency for the RWPP is the NSW Department of Community Services and the project is funded by the Premiers Department. The Partnership includes the City of Sydney Council and community groups, and it is meant to serve as a framework through which the NSW Government can respond to the needs of the Redfern and Waterloo communities with a whole of government, whole of community approach to initiatives. Apart from the Street Team, two further initiatives that are to come out of the Partnerships project include a Youth Intervention and Development Program and an Intensive Family Intervention and Support Service (being run by Barnardos – see also below & 3.2). [Note: The NSW Government's newly announced Redfern Waterloo Authority (RWA) was meant to be operational by early 2005. Apparently, its role will involve planning and infrastructure, while responsibility for the provision of social and community services will stay with the RWPP. (Redfern Legal Centre, 2004.)]

NSW Government's Partnerships Against Homelessness [see also 3.2, 3.9 & 3.12]

The HATSOS is run by the NSW Department of Housing, on behalf of the NSW Government's Partnership Against Homelessness, with support from City of Sydney Council, the Department of Community Services, Premiers Department and NSW Health. This partnership involves a large number of State government departments. It aims to help homeless people access the services relevant to their situation, to coordinate support services, improve access to temporary or crisis accommodation, and to assist the move into long-term accommodation. Its current initiatives include: the Department of Housing's Homelessness Action Team, the trial of two different supported housing arrangements in Inner West Sydney and Newcastle, development of a service to be known as the 'Homeless Out-of-Hours Service', and work involving the Office of Community Housing, the Aboriginal community and the Aboriginal Housing Office (metro Sydney and regional NSW) to develop more easily accessed crisis and transitional accommodation.

Women's Refuge Resource Centre [see also 3.12 & 3.13]

The WRRC provides administrative support and policy development for the network of refuges throughout NSW, as well as resources and information for the broader community about issues relating to domestic violence.

Twenty 10 Association [see also 3.8.2 & 3.13]

Twenty10 is keen to work with other organisations to improve the services available to disadvantaged young GLBT people. One examples of the collaborative work it does involved its working with ACON (Aids Council of NSW) to develop a young women's group to look at sexuality and health amongst young lesbians.

- *Redfern/Waterloo Intensive Family Support Service (Barnardos, funded through RWPP) [see also 3.2]*
- *The Crossing (Mission Australia) [see also 3.5 & 3.8.3]*

3.15 Holistic Approaches

The research team have identified 15 programs that take a holistic approach to the issue of homelessness and operate for people residing in the study area. Each makes varying efforts to address both the immediate problems of homelessness as well as its underlying causes. Many of the groups that work with the homeless, particularly the charitable organisations whose work touches upon the full scope of people's lives, appear to recognise the value of taking this approach. Those groups that have a more limited remit still recognise that other issues are involved and must be addressed before change can occur. What appears to be lacking is an Indigenous focus or a lead Indigenous agency that might drive such an approach.

Mission Australia

Mission Australia is a non-denominational Christian charitable organisation, which runs a number of programs that assist the homeless of inner Sydney. These include an outreach and patrol service (Missionbeat), crisis to long-term accommodation facilities for all age groups (eg Campbell House, Rawson Centre & Charles Chambers Court), and Intoxicated Persons Units, as well as drop-in centres (eg Lou's Place) and intensive case management services (The Crossing). Being run under the umbrella of one organisation would maximize the potential for these services to operate collaboratively. However there appears to be no Indigenous focus to any of its operations. It may serve as a useful model for how a range of services can operate cooperatively.

Mathew Talbot Hostel Outreach & Recreation Programs, Charles O'Neill House Program, Homereach (St Vincent de Paul) [see also 3.2, 3.5, 3.6, 3.8.1, 3.8.2 & 3.8.3, 3.9, 3.14]

SAAP provides funding for the hostel's Recreation Program, which allows clients to participate in creative, vocational, sporting and social activities. As well as being offered general and specialist art activities, clients can receive one-to-one coaching in literacy, basic computing and resume preparation. Regular outings to places of cultural and geographical interest, as well as sporting events are popular with the men. The aim of all these activities is to build self-confidence and self-esteem, which often motivates people to re-connect with the broader community.

Vincentian Village (St Vincent de Paul) [see also 3.2, 3.5, 3.8.1, 3.8.2, 3.8.3, 3.9]

There are three relevant components to the service the Village provides: care and support for street people, family and single women's refuge, and aged care hostel.

Oasis Youth Support Network Reconnect Program, Court & Prison Support, Education & Employment Services (Salvation Army) [see also 3.2, 3.8.1, 3.8.2, 3.8.3 & 3.9]

The Reconnect Project aims to assist where there is a risk of a young person leaving home. In terms of court and prison, Salvation Army chaplains visit children's courts and youth detention centres to offer support. The Network co-manages a unique legal service called 'Shop Front' which employs three solicitors to provide legal representation for homeless and disadvantaged youth. In terms of education, the goal is provide young homeless people with a chance to improve their literacy and numeracy, as well as other work-related skills. The organisation runs a school for years 7 to 11 with 2.5 teachers employed. Currently it is attended by 19 youths of whom 9 are Aboriginal. There is also an Aboriginal teacher who provides a few hours tuition a week. Connections are then made into mainstream education. The organisation also runs work training programs specifically designed for young people including 'This Way Up' furniture factories and cafés. It runs outdoor adventure projects that help long-term unemployed young people build skills, overcome fears, and broaden their perceptions of what they can achieve.

Wesley Mission Homeless Persons Services [see also 3.6, 3.8.1, 3.8.2, 3.8.3 & 3.9]

Along with its outreach and accommodation facilities, the Mission also provides counselling for gambling problems and personal finance issues.

City of Sydney Homeless Persons Services including Brokerage Service [see also 3.1, 3.2, 3, 3.3.5, 3.8.1, 3.12, 3.13]

The Brokerage service assists people who are homeless to secure long-term accommodation, and where necessary, connection with other support services to enable them to live independently. To achieve this goal, it provides short-term accommodation, food, transport and other support to homeless people, and those who do not require supervised accommodation. It is provided by the YWCA of Sydney under contract to the City of Sydney. It assists clients from across metropolitan Sydney, with a focus on the central Sydney area. Brokers assess the needs of the client in a face-to-face interview and negotiate an assistance package with them. Clients may receive free accommodation and support services for up to 14 days in one year. The service is available to single men and women, couples, and family groups, and may assist up to 160 people per month. The hours of service are 9:00am to 10:00pm every day.

Centrelink [see also 3.14]

Providing referrals to other relevant agencies is one of the tasks performed by Centrelink for the homeless who contact it seeking assistance. It attempts to take a holistic approach by dealing with families rather than individuals only. It is possible to arrange weekly payments instead of fortnightly, however staff are concerned about bringing a person into later hardship by forwarding advance payments. Centrelink offers an early payment in situations where people or families are attempting to return to a home community. There are a number of restrictions on these payments and they favour people who are returning for a funeral or schooling. There is difficulty in getting young Aboriginal men to apply for unemployment assistance. They are intimidated or otherwise reluctant. Centrelink staff regularly visit Aboriginal organisations to discuss this issue and attempt to break down the barrier.

Education Programs - Key College & Aspire Program (Youth Off the Streets) [see also 3.2, 3.4, 3.6 & 3.8.1]

Key College in Surry Hills is one of the organisation's accredited high schools, for young people aged 13 to 17 years, offering a flexible curriculum with a focus on literacy and numeracy that responds to the specific needs, interests and talents of young people who have become disconnected from mainstream education. Aspire offers specialist counselling, creative programming and training to enable youths to remain in high school or to pursue other education and training pathways before they drop out of school and their situation becomes desperate.

Wayside Chapel Victims of Crime Programme

This program offers free professional counselling to all adult victims of crime including adult survivors of childhood sexual assault. There is a drop-in support group currently running for women survivors of child sexual assault.

St John's Church in Darlinghurst (Anglicare) [see also 3.5, 3.6 & 3.9]

This organisation's Rough Edges program assists homeless people in a number of ways, with general counselling and legal counselling and referral, and through its referral service for such things as accommodation, its drop-in centre, and the access it provides to computers and the internet. St John's is guided by a philosophy that recognises the multi-dimensional needs of people and the value of addressing a range of issues to ensure improvement in people's situation.

- *NSW Youth Drug & Alcohol Court [see also 3.3 & 3.15]*
- *SAAP [see also 3.8.1 & 3.8.2]*
- *The Redfern/Waterloo Partnerships Project (RWPP) [see also 3.2 & 3.14]*
- *Catherine and William Booth Houses (Salvation Army) [see also 3.3 & 3.6]*
- *Cultural Program (St Vincent de Paul) [see also 3.5]*

Discussion of Service Provision Gaps

The above exercise in categorising the identified Indigenous homelessness service responses that operated in the study area has revealed a number of gaps in service provision. Also a number of representatives from the relevant organisations and agencies made suggestions about where their experience had shown them that gaps existed. These are contained in the profiles in Appendix 2 and some pertaining specifically to the Aboriginal homeless population of inner city Sydney are discussed below.

Firstly a review of the previous listing reveals that a number of categories are greatly under-represented by program examples. Those that the research team were unable to identify examples for include: *3.7 Regional Strategies*, *3.10 Physical Design of Public Spaces* (this is despite the City of Sydney philosophy recognising people's right to occupy public places), and *3.11 Education Strategies for non-Indigenous People*. Daniel Thorpe, the City of Sydney's Social Planning Coordinator, described a great deal of conflict and disharmony existing between non-Indigenous people and the Indigenous homeless population of the study area. This suggests that the latter strategies could prove useful in reducing such tension.

While eight examples were identified for the category headed *3.13 Skills and Training for Outreach Workers*, none had any kind of Indigenous focus. While a number of examples were provided for *3.3 Diversionary Strategies*, none were specific to the Indigenous homeless or mentioned their involvement with them. Under the heading *3.4 Addressing Anti-Social Behaviour* only three examples could be listed. All targeted young people, and only one catered for the cultural needs of Aboriginal homeless youth. The research team could not locate any examples of cultural protocols such as those developed in Alice Springs by the Tangentyere Council (Sitting Down Good in Alice Springs) and Darwin (refer to the report Memmott & Fantin 2001), which were aimed at Aboriginal itinerant visitors.

Frequently the programs listed in categories that are well serviced by various organisations do not have Aboriginal staff, or staff trained in the culturally distinct experiences of the Aboriginal homeless. For example, few of those programs listed in *3.2 Patrols and Outreach Services* clearly recognise, in the information sources used by the research team to profile them, that a significant proportion of their potential clientele must be Indigenous, given what was reported by the field researchers regarding the number of Aboriginal homeless residing in their territories. Possibly they do employ methods and strategies that reflect the involvement they have with these people, but they are not delineated anywhere this research team has been able to locate. This issue could be considered under the category heading *3.5 Philosophies of Client Interaction*. The City of Sydney described a lack of Indigenous staff within local homelessness service providers, added to the difficulty in reaching Aboriginal people who were homeless.

Following are a series of discussions related to specific response categories, issues relating to which were repeatedly raised by the service providers whose informed opinions were canvassed and/or offered to the research team.

Alcohol and Drug Strategies (3.6)

The Aboriginal Housing Company identified drug and alcohol problems and the drug-related crime in the area as key issues. A cocktail of drugs, mostly amphetamine based, is widely used in the area, forming a lethal combination when mixed with alcohol. Another main concern is also for the homeless youth at risk of becoming addicts and/or being targeted to become drug dealers or runners. The benefits of the Pemulwuy Reconstruction redevelopment will include: (1) improved services and activities for youth, and decreased youth at risk, (2) greater coordination of drug and alcohol services and increased support, (3) decrease in criminal activity attributed to drug use, and (4) discouraging drugs and drug-dealers. (refer to Table 1: Direct and Indirect Benefits on p 8 of the AHC Community Social Plan 2001). However this scheme will not entail any direct provision of services.

These concerns about drugs and alcohol were further supported by the City of Sydney Homelessness Services representative, Daniel Thorpe, and Brad Freeburn from the Aboriginal Medical Service.

Accommodation Options (3.8)

Despite there being a number of programs listed under each accommodation sub-heading (crisis, medium and long-term) the interviews conducted with Aboriginal homeless people and some organisations reveal very few are consistently used by Aboriginal people. For example, Bernard Cronin, the Executive Manager of the Mathew Talbot Hostel, reports that the majority of Aboriginal people's involvement with this facility consists of their use of same-day services such as health clinics and meals. The Aboriginal men and women who gather at the end of a laneway adjacent to the Hostel to drink utilize these kinds of services but do not use the accommodation. However, the Hostel is having to develop strategies to reduce the use of these laneways as violence may occur there.

Campbell House, run by Mission Australia, also expressed concern that a very small proportion of the inner-Sydney Aboriginal homeless population is accessing this facility. The organisation has received funding from the Department of Family and Community Services to look at what barriers may be preventing Aboriginal men from doing so. It will consult with government and non-government agencies, especially those services involved with Aboriginal clients, and liaison will occur with the Aboriginal Housing Office to avoid duplication of existing research.

The research team's examination of the NSW Supported Accommodation Assistance Program and its discussions with Alan Raisin from DoCS revealed that while Indigenous people access SAAP in much higher numbers (in relative terms) than the general population, of major concern is the fact that SAAP services are less effective in supporting Indigenous homeless people to longer term resolutions of their housing problems. The 2004 National Evaluation of SAAP recognised that the 'key drivers of homelessness' must be addressed if this goal is to be achieved, and that these were often symptoms of deeper and more complex problems. They included domestic violence, lack of accommodation and relationship breakdown. It stated that SAAP had not been designed to solve the complexity and range of issues involved. Clear changes to its management structure over an extended period were needed. The Evaluation recognised that efforts must be continued to strengthen case management approaches and cross agency linkages by SAAP service providers. It also found that there was a continuing need to maintain flexibility of service delivery to meet the needs of diverse client groups including Indigenous youth, women and children.

These concerns about accommodation options were further supported by two other agencies working closely with the study area's Aboriginal homeless. Daniel Thorpe, the City of Sydney Social Planning Coordinator, stated that there was a definite lack of culturally specific accommodation, and health and support services, including crisis accommodation and medium to long-term housing within the Local Government Area. Deirdre Cheers, the Senior Manager of the Barnardos-run Redfern-Waterloo Intensive Family Support Service made a number of important comments about the level of accommodation and the difficulties Aboriginal homeless people could experience with a range of housing providers. She stated that Aboriginal couples without children had access to very little emergency accommodation. They were frequently forced to separate in order to find emergency accommodation, causing stress to adults who were already highly vulnerable and who found it difficult to cope or manage on their own. Cheers described how the Department of Housing would not directly house Aboriginal families that have accrued significant debt while in public housing and will only offer to pay bond for private rental. Aboriginal people receiving the Newstart allowance experience difficulty with private rental agencies as they are not considered to have a reliable income. Families presenting to DoCS as homeless often have their children placed in care, which as Cheers confirms is not in keeping with the current NSW Care and Protection legislation that requires families be kept together as a priority. She believed there was a serious lack of readily accessible information for Aboriginal people about housing rights. Problems were compounded when information was required over the telephone rather than face-to-face, when Aboriginal people often give up and remain homeless as a direct result. Cheers identified specific issues related to how the DoH deals with young people who have good independent living skills and therefore do not require support, just accommodation. Without a support plan they are refused housing. Aboriginal people report to Barnardos that they regularly encounter racism when dealing with both private housing providers and also the Department of Housing. In summary, Cheers calls for NSW to urgently adopt a "whole of government" approach to Aboriginal homelessness.

The representative from the Youth Drug and Alcohol Court stated that a lack of safe, appropriate stable accommodation was a frequent problem confronting YDAC participants, making its efforts less liable to success and less lasting. Many participants have lived away from home for years and may have exhausted accommodation options through their on going substance misuse and associated behaviour.

The Aboriginal Housing Company also stated that a key issue for the local homeless population was the lack of Aboriginal specific emergency accommodation and hostels considering the area's high transient population. Other related issues that it had identified included the lack of appropriate and affordable housing, and substandard buildings having a

negative effect on health. The benefits of its Pemulwuy Redevelopment Project would include a direct housing and social advantage for the Aboriginal community, with greater access to the Aboriginal services and facilities in Redfern, however no homeless refuge is planned as part of the scheme.

Yvonne Weldon from the Aboriginal Children's Service describes a range of accommodation issues, raising an important point about the insecurely housed category of homelessness. According to her and the investigations of the research team, many Aboriginal children are living in overcrowded or dysfunctional family situations, and many are being moved out of their families and into non-Indigenous care. There is a need for more emergency accommodation for single Aboriginal men and a refuge for women in the Redfern area. Strategies must be devised that deal with the 'hidden homelessness' situation where families are living in overcrowded conditions and tenancies are insecure. It is important to allow Aboriginal families to provide short-term accommodation in crisis situations thereby creating an interim link with mainstream accommodation providers. There also needs to be a strategy to get Aboriginal people involved in accommodation services rather than relying on mainstream services. This could be done through a partnership with a charitable organisation. This question of policy should be put to SAAP. More linkages need to be established between Aboriginal organisations and mainstream homelessness agencies.

Dedicated Service Centres and Gathering Places (3.9)

The field researchers commented on the importance of a drop-in centre or gathering place for homeless Aboriginal people to visit and collect information about services specifically targeted at their needs. This idea was supported by Brad Freeburn from the AMS. He said that Aboriginal country people would frequently arrive in Sydney at around 4:30pm on Friday afternoons with few resources and no accommodation plans, and seek help at the AMS offices in Redfern.

Partnerships (3.14)

Reviewing the programs listed above reveals that many organisations recognise the value of forming partnerships with other agencies and enact this through their case management approaches and philosophies. However there is a need for more training for staff in the extent to which this would operate with the Aboriginal homeless population. Many service providers reiterated the value of active collaboration between agencies. The NSW Government, through its *Partnerships Against Homelessness* initiative, has demonstrated its understanding of the importance of a whole-of-government approach, however it could take a greater role in stimulating partnership forming and more discussion between groups with regards to Indigenous homelessness. An essential partner that does not currently exist is an Aboriginal-run organisation whose remit is to assist the Koori homeless. In fact, given the extent of Aboriginal homelessness, there appears to be a lack of Koori-specific programs throughout the range of practice responses.

Holistic Approaches (3.15)

The City of Sydney and its Homelessness Services have demonstrated some best practice efforts at addressing the problem of Indigenous homelessness that should be investigated further. It has: (a) convened an Aboriginal Homelessness Workers Network to better coordinate the provision of services and accommodation options for local homeless people; (b) ensured that its parks staff work in cooperation with homeless people in managing the public domain, recognising the fact that people have a right to reside there; and (c) has developed a draft City of Sydney Homelessness Strategy. Its Brokerage Service recognises that a range of issues are operating in homeless people's lives and that they require close assistance to improve their situation.

A number of charitable organisations, such as Mission Australia, St Vincent de Paul and The Salvation Army, operate a range of programs that seek to address the various issues involved in the homeless experience. These organisations and the coordinated effort required to take a holistic approach could serve as useful models for addressing Aboriginal homelessness in the study area. However, more programs are needed with an Aboriginal focus and enacting and understanding of the spectrum of disadvantage they occupy.

Mental Illness

Given the number of homeless people suffering from a mental illness, as asserted by the research staff and a number of service providers, the research team was unable to document a clear regard for what this means in terms of people's ability to help themselves by completing such tasks as attending meetings and replying to correspondence. There may be a need for this issue to be assigned a specific response category. Brad Freeburn of the AMS concurs that mentally ill

people are treated poorly by the medical and government establishment. Not only can its trials lead a person into homelessness, but these difficulties can also keep them there.

CHAPTER 4: FINDINGS FROM INTERVIEWS AND FIELD RESEARCH

Chapter Aim

The principal aim of this chapter is to provide a portrait of the homeless Aboriginal people occupying the inner city Sydney study area. It is largely based upon the data collected during the interview process but also draws upon the knowledge of the two interviewers, gained prior to the beginning of this project and honed during its conduct. The first section describes the characteristics of each gathering of individuals that represents one of the inner Sydney city's distinguishable public place dwelling groups or mobs, and discusses how these have been delineated. Using a series of topic headings drawn from the interview questionnaires, the second section, examines what the interview data revealed about how people came to be homeless, why they have remained in this state for varying lengths of time, and how they may be assisted to break free of it. The final section enunciates the recurring themes apparent in these two discussions, using the thoughts and personal opinions held by the interviewers on all of the above issues. It serves as a summary of all the relevant factors that will receive consideration in Chapter 6: *Strategies and Recommendations*.

Profiles of Aboriginal Public Place Dwelling Groups Encountered in the Study

At the time of this study, there were approximately six distinct Aboriginal public place dwelling groups or mobs functioning in the inner city of Sydney, which occupied clearly demarked territories. The groups have been identified as the: Redfern/Waterloo, Newtown, Central Railway Station, City/Town Hall, Kings Cross/Darlinghurst, and Broadway/Glebe mobs. These groups quite frequently moved between areas, however, they largely operated within their set geographical boundaries. [Refer to Figure 3 map showing the six group territories featured on the following page.]

Geographically defined and independent from each other, these groups were self-sufficient in that they operated as a unit, more specifically as a family unit. They looked after and protected one another, looked after each other's possessions, and helped each group member find a safe place to sleep. When the researchers needed to locate someone within a group, very frequently at least one of its member knew where they were and whether they were in town or not. If someone in the group did not know of the sought after person's immediate whereabouts, they knew when they would return or where they would eventually be at a certain time of the day. As a homeless participant commenting on the 'feeling of family' within the group was quoted as saying "we ARE family".

Each group identified strongly with the society of its member and exhibited a political dynamic. Group members referred to each other as the Kings Cross or Redfern mob, for example. Some had proclaimed certain members to be elders who spoke for the group, and others were looked up to because of their knowledge of the streets and their longevity as rough sleepers in inner Sydney. Certain protocols had to be observed when entering or engaging a group. It was expected that alcohol, food and cigarettes be shared with everyone in the group. When sitting in a circle, people were not allowed to turn their back to anyone in the group.

The following group-by-group overview will look more specifically into their dynamics and the means of social identification operating within them. It will also describe the groups' social behaviour, as well as identifying their needs and resources.

Redfern/Waterloo Mob or Group A (Map Reference No.s 1, 2, 3, 4 & 5)

A total of 24 interviews were conducted with the Redfern or Waterloo mob: twelve on the Block, two at Chippendale/Darlington, one at the Post Office and one at the Aboriginal Medical Service, five in Waterloo and one in Redfern Park. A further two people came from the Tent Embassy camp at Victoria Park. One researcher (PI) estimated the population "living outside of houses on the Block" would number about twenty. The central part of the Aboriginal community of Redfern is known as the Block. It is a meeting place for Aboriginal people, including the homeless, from all over Sydney and Australia. "It is the first contact or first reference point for Aboriginal people nationwide to find family and friends, for the homeless transients to find shelter in the city, and for Aboriginal people to inquire about employment, medical and other services in Sydney."¹ All those interviewed had some connection with Redfern. One researcher (RG) reiterated that it is undoubtedly the "first port of call for any Black visiting Sydney". Another researcher recounted that in "times gone by, there was at least one Aboriginal person from each State in my lounge room in Eveleigh Street".

¹ Pitts, Angela (2001). *Community Social Plan: Pemulwuy Redevelopment Project, Redfern*, Redfern: AHC Ltd. (Online at www.ahc.org.au/splan)

The Block is an area surrounded by four boundary streets—Eveleigh, Vine, Louis and Caroline—which comprises an entire city block. The land is owned by the Aboriginal Housing Company (AHC). A two-stage proposal is currently underway to transform this site into a housing estate, comprising sixty-two new town house type units, which are to be culturally-appropriate for Aboriginal tenants. The first stage of construction is due to commence at the beginning of 2005. (Refer to the AHC profile contained in Appendix 2 and its summary in Chapter 3 for more detail on the Pemulwuy Redevelopment Project.)

The majority of the Redfern/Waterloo mob were found socialising at the Block. This mob also socialised at the suburb's Post Office, which is directly across the street from the Centrelink office. The membership, habits and territory of this group were fairly static, however some did enter Central and Hyde Parks to socialise with people from other homeless groups. In the recent past, when Father Ted Kennedy was Pastor, the Catholic Church on Redfern Street was a further place in which this group could socialise and get a free meal.

Many of the Redfern/Waterloo mob slept rough at the Block. Some had constructed temporary makeshift dwellings that usually lasted a few weeks before council regulations were enforced and they were dismantled. One interviewee had lived in an empty room at the rear of the Aboriginal Housing Company's building, but had to move when the organisation closed the room off after it became the scene of three rapes. The Redfern/Waterloo group could also be found sleeping rough throughout the inner city of Sydney. One researcher (RG) observed that nearly all these transients made their way to family and or squats around Newtown and Glebe.

The Redfern/Waterloo mob shared resources such as money, food and alcohol. An Aboriginal researcher (RG) observed, "if you don't share, you don't belong – there is no way you can stay there". He also wrote that, "Redfern has a great system of sharing amongst the whole transient population. Anyone will be made welcome if they are capable of sharing and being respectful where the community is concerned."

The key issues for the Block involved drug and alcohol consumption and drug-related crime in the area. The majority of this group or mob were found to be alcoholics and addicted to heroin. There was widespread use of a mostly amphetamine-based cocktail of drugs. As reported in the Aboriginal Housing Company's *Community Social Plan*:

"Alcoholism has always been common among Aboriginal transients in Redfern, however, as the problem has been left unchecked it has now escalated to a lethal combination of alcohol and other drugs. The use of a cocktail of drugs among the transient population is also becoming more prevalent, further putting locals and children at risk of violent and anti-social behaviour."²

Homeless youth in particular were being "targeted to become the next generation of drug dealers and/or drug users".³ It was reported that a large gathering of teenagers usually occupied the streets of the Redfern/Waterloo area, most living on the Block or in Waterloo housing commission estates. However there were a number who were homeless. In the words of RG: "they descend on Kings Cross and other nightspots to deal in illicit drugs and vice. Many are expert thieves and pickpockets ... [and] are finding themselves on the streets by the time they are 16 or younger" because their families cannot deal with them. This researcher also believed that too many adults had turned a 'blind eye' to the drug trade and related criminal activities, and that others were profiting while honest neighbours struggled to provide for their families. He avowed that the "whole dynamics of respect within the family [had] broken down to the point where the young [were] dictating the terms of the household. ... They were quiet often merciless in their deeds and lacking in any form of compassion for their fellow man. ... The teens [had] very little to occupy themselves [with in] the area and very quickly [found] themselves caught up with one crew or another. ... There [were] many who [lived around] the housing commissions without any family or hope in life, this [was] where one [could] witness the true caring nature of our own Koori people who although struggling themselves [would] find somewhere for some of these kids to call home even if it [was] only in the backyard of their properties."

At the time of the study, there had been an increasing amount of violence amongst the Block's homeless population. An Aboriginal homeless man was found murdered and another Aboriginal homeless man was charged with the crime. Rumours of rapes often circulated amongst the Aboriginal transient population.

Newtown Mob or Group B (Map Reference No. 6)

A total of eight interviews were carried out with members of this group. The majority of the Newtown mob were found to live in squats and empty terraces around the Newtown and Broadway area, usually sleeping in groups of two or more. One of the Newtown mob (PI-06) described the conditions in the squat where he lived, where he and his companions had "to sleep on milk crates or otherwise the rats bite them when they sleep at night. There [was] no electricity there so they

² *ibid*: page 55.

³ Pitts, Angela (2001). *Community Social Plan: Pemulwuy Redevelopment Project, Redfern*, Redfern: AHC Ltd. (online at www.ahc.org.au/splan)

used candles, and they [had] no water on in the squat, so they [could not] shower or bath there.” When the squats were disbursed the Newtown group could also be found sleeping in Belmore Park as well as the city parks.

The members of this group were usually found begging on King Street near the Newtown Square, and around Redfern railway station and its Post Office. They also socialised at the Square, the Post Office and on the Block. The Newtown mob was considered a very tight knit family unit, sharing all their resources, as well as exhausting their social security or pension allowances. In an interview an elder from the group mentioned that they looked out for younger homeless transients and made sure they had a safe place to sleep for the night.

Again, the majority of the Newtown mob was found to be alcoholics. One member of the group (PI-06) said he had been in and out of rehabilitation programs, however, did not feel he could "kick the habit" and had given up hope of doing so. During a period of two weeks he had collapsed three times after taking a cocktail of drugs. He recounted that he usually did not remember what he had consumed because of his advanced state of inebriation. He was quoted as saying, "I have been in two drug and alcohol rehabs, two psych centres and have been in hospital so many times I have lost count. I have been in every hospital in Sydney...I have many medical problems. They are sugar diabetes, schizophrenia, epileptic fits, anaemic, and I have pancreatitis and drink methylated spirits."

Central Railway Station Mob or Group C (Map Reference No.s 7 & 8)

A total of nine interviews were carried out with members of this group: five in Belmore Park, one at the railway station, and three in Surry Hills. Central Station is usually the first stop for transients arriving from outside of Sydney. It was observed that they came to look for Redfern, and then set out for the Block to find family and friends. It was also noted that the group at the station was composed of many Queenslanders.

The majority of the Central Railway mob slept rough at Belmore Park, some also sleeping in parks around Surry Hills and the City. They socialised and begged at both Belmore Park and the railway station. One interviewee (PI-04) busked and often played the didgeridoo at his favourite place in Central Station, as well as operating at Circular Quay where there were a large number of commuters, shoppers and tourists. The majority of the mob was found to be alcoholics, purchasing their alcohol from the local bottle shop or pub. With the money made from begging this group's members would buy cheap food from the local fast food cafes. Many would get a free meal from the Albion Street centre.

The members of this group would also be found socialising and begging in Newtown and Redfern, however one researcher (RG) observed that they strongly identified as the Central mob, pointedly distinct from the Redfern mob. He remarked that they were connected to the activities in Kings Cross and could be seen moving between various locations at night, resting at the end of it in the parkland around the Museum's railway station. RG also noted that there were "many vacant properties around Surry Hills and Taylor Square, which [were] exclusively Indigenous squats". Most of the people who used them were known in Redfern/Waterloo although they remained aloof from the community there.

Also of significance were the transvestites and transsexuals who worked along the Oxford strip that were approached by the male researcher but chose not to be interviewed, having lost all faith in the available services. These transients were almost all from north Queensland and sometimes sought assistance through local gay and lesbian organisations such as ACON. They also appeared to have their own network of support from the extended gay community. They had travelled to Sydney during the 2000 Olympics and stayed after its end.

City/Town Hall Mob or Group D (Map Reference No.s 9, 10 & 11)

A total of six interviews were carried out with members of this group, five in Hyde Park, and one at Circular Quay. The City/Town Hall mob was found mostly to sleep rough at the Town Hall steps off George Street and in Hyde Park. They also socialised at the latter. Some dwellers slept at the Belmore and Domain Parks, while others were found begging at Circular Quay, Hyde Park and the Town Hall. The majority were alcoholics and bought their supplies from the numerous pubs and bottle shops on Oxford Street. Cheap food was obtained from the fast food shops and cafes on this street, while a free meal was sometimes obtained from the Albion Street Centre. People also collected messages at this location.

It was observed that some of the City/Town Hall mob socialised with people from their hometown or region. One segment of this group was from Wallagga Lake on the South coast of New South Wales. One female researcher (AP) was invited to 'hang out' with this group one morning in Hyde Park. She recounts, "I arrived as they awoke. As they slowly sipped on their plastic bottles filled with Moselle wine, they shared stories of their hometown and reminisced [about] the beauty of where they were from. When I asked why they left, they tearfully remarked that all the elders were dying and they had lost so many family and friends." The rest of the day was spent chatting, arguing, drinking and dancing around to music from a portable radio. One of the participant observers commented that the one self-proclaimed elder was very aware of his 'brother' and concerned when he got upset and violent towards an outsider. Also in the group was an Aboriginal homeless woman who, while not drinking heavily, was able to monitor the tensions in the group and calm the

volatile situation. She generally had a calming effect on the group. Members of this group, when seated in a circle, were expected not to turn their backs to anyone else and to share their alcohol. Tensions arose when outside people tried to join but would not observe this last rule.

During one interview, a member of the City/Town Hall mob (PI-25) described their life as hanging around Hyde Park and drinking everyday. This person and their companion chose the park because of the grass, as it was uncomfortable to sit all day on anything but lawn. It also provided sun and therefore warmth during winter. Chief among the reasons however was that there was an accessible toilet nearby. Also the Police or security guards normally did not move them on. They were able to blend in with the others members of the public using the park.

Kings Cross/Darlinghurst Mob or Group E (Map Reference No.s 12, 13, 14, 15, 16 & 17)

A total of five interviews were carried out with members of this group, three at the Wayside Chapel, and two in Woolloomooloo. The Kings Cross/Darlinghurst mob was found to sleep at various places around the Kings Cross area, including Potts Point and Woolloomooloo. Some were found sleeping under concrete car parks near St Mary's Cathedral, while others lived in squats around the city. Still more live outdoors. RG described one such individual that he encountered in the parkland at Woolloomooloo. He described this person's dwelling: "With \$100,000 views he [was] adamant he [did not] wish to be recorded for fear of being moved on. [He had] a very cosy gonyah made out of the bush, concealed from the public eye, [where] he [had] secreted away clothing and spare blankets for warmth." RG went on to say that this man was obviously mentally disturbed but harmless. He had a poor standard of personal hygiene and cuts on his hands that he would not seek medical advice about. An extremely dilapidated physical appearance was a very common trait amongst members of this group.

RG described that: "[t]here [were] a consistent number who sleep in the park by the fountain outside the police station in the Cross, they [were] very clannish in their movements and [could] be found at any of the locations around Kings Cross and the Woolloomooloo dockside. They [were] all very well known by the families who lived in [DOH housing] in the area." This researcher noted that the number of Indigenous and non-Indigenous sex offenders in this group was of grave concern considering the number of young people that resided in the area.

These public place dwellers usually socialised and begged at Kings Cross and its railway station, Oxford Street and Taylor Square. They were not exclusively Aboriginal, being quite welcoming to certain 'white' people who shared their homelessness. The group displayed a very strong sense of family and was independent from the other homeless groups. They helped each other find a safe place to sleep, looked after each other, and guarded the possessions of others in the group. They usually slept in groups of two or more, sometimes with as many as four others. An interviewee (PI-14) was quoted as saying, "they experience a lot of violence as a group because people go down to where they camp and want to fight them, and it always ends up in a brawl because they all stick together."

The main meeting place for the Kings Cross/Darlinghurst mob was at the Wayside Chapel, where they obtained a meal and shower. Other food was obtained from fast food outlets and of low nutritional value. The Aboriginal people interviewed felt welcome and were not intimidated by the workers there. They also got messages passed on to them. There were a few homeless shelters serving the Kings Cross/Darlinghurst area, however the group rarely used these hostel facilities. One interviewee (PI-17) was quoted as saying that the workers at the Matthew Talbot Hostel were offhand with Aboriginal people and that his belongings were thrown out on one occasion. Some group members used other services at the Cross, such as the Kirketon Road clinic, but others did not trust the workers. One interviewee said that someone at that clinic had given her details to the Department of Housing and she was removed from the priority waiting list as a result of her heroin addiction.

The Kings Cross mob were mostly heroin users, however many used speed and cocaine. One researcher (RG) experienced difficulty in catching them in one spot for more than ten minutes. He observed that "they [were] experts at the sleight of hand and every couple of minutes someone [would] blame another for fleecing them, ending in moments of hysteria...these people [were] the most aloof and mistrusting of all." The majority of the Darlinghurst transient sex workers, who were found to be closely connected with those from Kings Cross, used speed and cocaine.

Broadway/Glebe Mob or Group F (Map Reference No.s 18 & 19)

A total of two interviews were carried out with members of this group. The Broadway/Glebe mob was found to sleep rough around the Broadway area or in squats around the Glebe area. They were found socialising and begging at Glebe Point Road, the Broadway Shopping Centre and at Central Railway Station. One researcher (RG) observed that "many shop fronts [could] be seen to be feeding" these homeless people.

The members of the Broadway/Glebe mob interviewed were alcoholics and had developed related mental illness problems. They mingled with other groups with medical conditions who gathered together to be near the Royal Prince Alfred Hospital psychiatric ward and rehabilitation clinic.

Table 4.1: Summary of public place dwelling groups identified in the study area. (Read in conjunction with map in Figure 3)

Group	Location		Individual Group Members Interviewed	Notes
	Where people were interviewed	Map Ref. No.s		
A. Redfern/Waterloo Mob (24)	The Block and Redfern AMS (12)	1	RG-02, 04, 06 & 17 and PI-09, 11, 13, 16, 18, 19, 20 & 21.	The Block is meeting place for Aboriginal people, including homeless, from all over Sydney & Australia. A 2-stage proposal currently underway to transform it into housing estate, which will be culturally-appropriate for Aboriginal tenants. Socialised at the Block, Post Office across from Centrelink. Some did enter Central & Hyde Parks to socialise with people from other homeless groups. Group shared resources such as money, food & alcohol. Key issues for group & area were substance abuse and drug-related crime. Majority of group found to be alcoholics & addicted to heroin. Homelessness among young people was vital issue for area.
	Redfern Post Office (1)	2	RG-11.	
	Waterloo (5)	3	RG-13, 15 & 16 and PI-03 & 12.	
	Chippendale/Darlington and Victoria Park Tent Embassy (4)	4	RG-01, 18, 22 & 23.	
	Redfern Park (1)	5	RG-10.	
B. Newtown Mob (8)	King Street (8)	6	RG-03, 05, 12, 14, 20, 24 & 25 and PI-06.	Majority found to live in squats & empty terraces around Newtown & Broadway. When squats disbursed they could be found sleeping in Belmore Park & city parks. Found begging on King Street near Newtown Square, & around Redfern railway station & Post Office. Very tight knit family unit, sharing all resources. Looked out for younger homeless transients & made sure they had safe place to sleep at night. Majority were alcoholics & many suffered related illnesses.
C. Central Railway Station Mob (9)	Surry Hills (3)	7	RG-09 & 28 and PI-07.	Central Station usually first stop for transients arriving from outside Sydney. They came to look for Redfern, & then set out for the Block to find family & friends. Group is composed of many Queenslanders. Slept rough at Belmore Park, some also sleeping in parks around Surry Hills & the city. Socialised & begged at both Belmore Park and railway station. Majority were found to be alcoholics. Many would get free meal from Albion Street centre. Found socialising & begging in Newtown & Redfern. Note transvestites & transsexuals working along Oxford strip. Almost all from north Queensland. Travelled to Sydney during 2000 Olympics & stayed.
	Central Station locales (6)	8	RG-27 and PI-01, 04, 05, 08 & 10	

Table 4.1: cont...

Group	Location		Individual Group Members Interviewed	Notes
	Where people were interviewed	Map Ref. No.s		
D. City/Town Hall Mob (6)	Hyde Park (5)	9	RG-07 and PI-22, 23, 24 & 25.	Found mostly sleeping rough at Town Hall steps off George St & in Hyde Park. Also socialised at latter. Some slept at Belmore & Domain Parks, while others begged at Circular Quay, Hyde Park & Town Hall. Majority alcoholics. Cheap food obtained from fast food shops, while free meal sometimes from Albion Street Centre. Also collected messages there. Some socialised with people from hometown or region. One segment was from Wallagga Lake on South coast of NSW. Why left - tearfully remarked that all elders were dying & they had lost so many family & friends. Chose park because of grass, sitting on concrete all day too uncomfortable. Also provided sun & warmth in winter. Chief reason was the accessible toilet nearby. Also Police etc normally did not move them on.
	Town Hall	10		
	Circular Quay (1)	11	RG-21.	
E. Kings Cross/Darlinghurst Mob (5)	Darlinghurst	12		Some found sleeping under concrete car parks near St Mary's Cathedral, while others in squats around city. Many lived outdoors. Extremely dilapidated physical appearance very common. Were very clannish in their movements & could be found around Kings Cross & the Woolloomooloo dockside. Number of sex offenders in group were grave concern considering number of young people living in the area. Socialised and begged at Kings Cross & its railway station, Oxford St and Taylor Square. Not exclusively Aboriginal. Strong sense of family & independent from other groups. Experienced lot of violence. Main meeting place Wayside Chapel. Mostly heroin users, however also speed & cocaine. Majority of Darlinghurst transient sex workers found to be closely connected with those from Kings Cross, & used speed and cocaine.
	Kings Cross	13		
	Woolloomooloo (2)	14	RG-08 and PI-02.	
	Potts Point	15		
	Wayside Chapel (3)	16	PI-14, 15 & 17.	
	Rushcutters Bay	17		
F. Broadway/Glebe Mob (2)	Broadway / Glebe	18 / 19	RG-19 & informal.	Found to sleep rough around Broadway area or in squats around Glebe. Found socialising & begging at Glebe Point Rd, the Broadway Shopping Centre & Central Railway Station. Many shops could be seen feeding these people. Were alcoholics & had developed related mental illness problems. Mingled with other groups with medical conditions who gathered at Royal Prince Alfred Hospital psychiatric ward & rehabilitation clinic.

Analysis of Interviews with Public Place Dwelling and Insecurely Housed Aboriginal Persons

The two categories of homelessness used in the interview process are public place dwelling, in which a person lives entirely without accommodation in a residential dwelling; and insecurely housed, wherein a person has accommodation but its tenure, the condition of the dwelling or the nature of its other occupants make them vulnerable to eviction and homelessness. These categories, and their derivation, are discussed in more detail at the beginning of Chapter 2.

Interview Methodology

One male (Richard Green) and one female (Pam Ingram) researcher carried out a total of 53 interviews with either public place dwelling or insecurely housed individuals. On a number of occasions a third, female researcher (Angela Pitts) accompanied each lead researcher. Col James and Ms Pitts chose the interviewers or researchers for their extensive knowledge of the project area and the homeless people living in it. Their subjects were known to reside in this area. [Refer to the discussion in Chapter 1 regarding how the study area and study groups were defined.]

The male researcher interviewed 28 individuals, while the female researcher interviewed 25. A number of second follow-up interviews were conducted; six out of the original 53 respondents being engaged with again. The interviews conducted by the female researcher occurred between 19/6/04 and 13/8/04, while those by the male researcher occurred between 1/6/04 and 7/10/04.

The female researcher conducted interviews within business hours. The majority of those carried out by the male researcher were at similar times, however he did conduct a small number in the evening between approximately 6 and 9pm. Referral sheets to be passed onto relevant service agencies were also filled out for all interviewees and contact details obtained where possible.

One quarter of the male researcher's respondents were female, as were 40% of those interviewed by the female researcher. Of the 28 people interviewed by the male researcher, seven were insecurely housed, as were nine of the female researcher's 25 respondents.

The interviews conducted with public place dwellers contained 25 questions grouped under the following headings:

- Earlier life and background;
- Current situation;
- Problems, needs and services;
- Pathways into the situation; and
- Pathways out of the situation.

Those carried out with insecurely housed individuals contained 24 questions grouped under the same headings.

Certain respondents thought that some of the questions were too personal for Aboriginal people. An example given was the question asking the respondents to tell the researcher their life story. This may explain why some of the questions were not answered in full or with great elaboration. Apart from being reluctant to reveal private information, some respondents may have felt uncertain of the interviewers motives, even though they had been fully explained. However there was general enthusiasm for the research aims. On a few occasions the interview sessions were interrupted by activities in their group, such as an argument or an outbreak of violence. The effects of alcohol and drugs will also have had an influence on the ability of some interviewees to respond to questions clearly.

Introduction

The topic headings around which the following analysis is structured provide a clear depiction of the interviewees, first detailing their general characteristics such as age, gender, community of origin, how long they had been in their current situation, why they came to Sydney and the study area, and where they spent the night previous to the interview. Then information is provided about the specific problems experienced by both public place dwellers and the insecurely housed, as well as such factors as physical and mental illness, substance abuse, prison and family violence. There is also a discussion of where interviewees sourced what incomes they had. And a short examination is made of whether or not they would choose to return to their home community if it was other than Sydney. Finally the needs of the interviewees are summarised.

There are a number of topics included in the following discussion for which questions were not directly put to interviewees by the field researchers. These involve time spent in prison in the near or distant past, personal drug or alcohol dependency and use, mental illness and its treatment, and family violence. However, the answers given to other queries often made reference to people's struggles with these issues so they feature in the ensuing discussion because they

are vital to understanding the homeless experience. The authors believe that, in fact, all the issues listed above play a greater role in homeless Aboriginal people's lives than the number of respondents who mentioned them suggests. And we believe that if interviewees had been questioned directly regarding these things the response rates would be much higher and more accurately reflect the prevalence of prison, substance abuse, mental illness and family violence in the population under examination.

As the field researchers sometimes made extensive notes on their interview respondents, and these are frequently more illuminating on certain points, the decision has been made to include a number of case studies along with the analysis of the interview data provided below. This will help illustrate more vividly how people had come to be homeless or insecurely housed, and what factors kept them in this situation; what were the pathways they have followed into homelessness. (Refer to Chapter 5 for these case studies.)

Age and Gender

Of the 53 respondents, 66% were male and 32.1% female. Just over 71% of all respondents were aged between 25 and 45 years. No people aged less than 18 years were engaged by the interviewers (they had no remit to do so), however, 37.7% of interviewees wanted to be housed with their minor children who were residing elsewhere while their parents were homeless. Either their children or a grandchild accompanied only two respondents; one was living rough while the other was staying with friends. For the remainder having a secure home meant being able to re-establish an active role in their children's lives.

Just less than 21% of those interviewed were older than 45 years of age. And just over half of these individuals had been in their current situation for ten years or more, compared with 31.6% of 25 to 45 years olds. 72.7% of people in the >45 year old age bracket were public place dwellers, while almost 87% of the younger group fell into this category. There were only three women among the eleven individuals who declared themselves to be 45 years or older. This represents 17.6% of all women interviewed. Twelve out of 38 were aged between 25 and 45 years and women, or just over 31.5% of the total number in this age category. Of those in the youngest applicable age bracket, between 18 and 25 years of age, 50% were women. All of these were insecurely housed.

Table 4.2: Respondents categorised by age and gender.

	Men	Women	Total	Percentages
18 to 25 years	2	2	4	7.54%
25 to 35 years	10	7	17	32.07%
35 to 45 years	16	5	21	39.62%
45 to 55 years	6	3	9	16.98%
> 55 years	2	0	2	3.77%
Totals	36	17	53	
Percentages	66%	32.1%		

Community of Origin

Table 4.3: Respondents categorised by their community of origin.

	Project Area	Elsewhere in metro Sydney	Other NSW city or town	Remote NSW	Another State or Territory
Public Place Dwellers	6	5	13	9	5
Insecurely Housed	1	0	7	4	2
Total	7	5	20	13	7
Percentages	13.21%	9.43%	37.73%	24.52%	13.21%

One respondent did not specify from where they originated. Of the respondents from other States, 2 were from Western Australia, 1 from Victoria and the remaining 4 from Queensland. Both the majority of public place dwellers and those insecurely housed originally came to the project area from other parts of New South Wales, almost 57% and 75% respectively.

Of the interviewees from Sydney, seven cited Redfern as their community of origin. The other Sydney suburbs mentioned were Camperdown and La Perouse. With regards to the interviewees from elsewhere in NSW, they originated in three broad regions, which are defined by the authors as the North Coast, the South Coast and West or inland of these areas. Five of the respondents were from the first area, and four were from the second. The largest number of people, 24 or almost 73% of all respondents in this general category, came from the areas West of Sydney and the coast. The North Coast urban localities that people came from were Kempsey and Coffs Harbour. And the small towns were Tingha (Northern Tablelands) and Birapi. The two larger South Coast urban localities in which people originated were Bega and Nowra, while the smaller centres were Bargo (Southern Highlands) and Wallaga Lake. The Western district centres from which various numbers of interviewees emanated were as follows: four people came from Walgett, two people each came from Bourke, Cowra and Moree; and single people came from Narrandera, Wilcannia, Orange, Darlington Point, Coonabarabran, Wellington, Boggabilla, Mulli Mulli, Brewarrina, Dubbo and Gilgandra. [Refer to Figures 4 and 5 for maps showing the nationwide and NSW-specific locations from which the interviewees originated.]

Length of time spent as public place dwellers or insecurely housed

Table4.4: Respondents categorised by the length of time they had been Public Place Dwellers or Insecurely Housed

	A few nights or less	A few weeks	Approx. a year	A few years	5 years	10 years	> 10 years
Public Place Dwellers	0	3	3	7	9	6	9
Insecurely Housed	1	1	5	7	0	1	1
Totals	1	4	8	14	9	7	10
Percentages	1.89%	7.55%	15.1%	26.4%	17%	13.2%	18.9%

Sixteen out of 53 respondents were insecurely housed while the remainder were public place dwellers. Three of the insecurely housed had slept rough in the past, either in public settings such as parks or in squats. Five had stayed with family or friends. And one had used crisis accommodation. Only two had ever leased a dwelling of some sort. And the remainder had either rented a room or boarded.

45.28% of all homeless respondents had been dwelling in public places for 5 years or longer. This represents 64.86% of the public place dwelling proportion of those interviewed. Only two further insecurely housed respondents had been in that situation for ten years or more. The largest number of insecurely housed individuals had been so for between about a year and a few years, that is 22.64% of total respondents or 75% of the total insecurely housed population interviewed.

80% of those who had dwelt in public places for more than ten years were men (Only one of the insecurely housed interviewed had been in that situation for longer than 10 years). Of those who had been in their current situation for just on 10 years, 85.7% were male, or six out of seven respondents. The sole woman was also the only insecurely housed individual in this category. 55.6% of respondents who had dwelt in public places for approximately 5 years were women (none in this category were insecurely housed). 63.63% of those who had been either public place dwellers or insecurely housed for between a year and few years were male. The interviewees who were public place dwellers represented 45.45% of the total in this category.

Where had respondents slept the night previous to the interview

Of the 16 insecurely housed interviewees, ten spent the night prior to the interview in a rented room (some as boarders). Five more spent the night with friends or relatives and one person was in crisis accommodation. Eight of the public place dwelling respondents spent the previous night in a squat. Eleven had stayed with friends or relatives. One had paid for a room overnight, while another had stayed in crisis accommodation. The remaining 16 had spent the night on the streets or in a park.

Reasons for coming to Sydney

Seven people, or 13.46% of interviewees, had come to Sydney seeking employment. Other reasons included: the perception that educational and training opportunities were greater in Sydney, visiting relatives, seeking the excitement of a big city, curiosity, seeking medical treatment, and escaping disintegrating community life elsewhere (elders dying).

Who had shifted between public place dwelling and insecure housing

18.75% of the insecurely housed had been through periods of 'living rough' or public place dwelling in their pasts. 24.3% of public place dwellers had stayed with friends and 10.8% had stayed with family for a period in their past. No one, whether homeless or insecurely housed, had stayed with both friends and relatives. 24.3% of public place dwelling respondents had frequented squats, this being the total number of people who had done so in their past. Only two of the respondents who had lived rough in the past had also rented a room or been a tenant in a residential property in the past. None had ever actually been responsible for a lease. Only one of the public place dwellers interviewed had rented a room or boarded in the past. The remainder had staying with friends or relatives when not on the streets or living in squats. This would suggest that public place dwellers have experience of a more limited range of accommodation types and the responsibilities involved in them than the insecurely housed. This may explain how some people are kept from full or extended periods of homelessness. It also highlights the importance of how certain young people, particularly those with mental illness or drug and alcohol problems, make the transition out of a family home with regards to future homelessness.

Problems of public place dwellers

Respondents who were public place dwellers were asked directly if they: had trouble getting food, had difficulty obtaining clean needles, were assaulted, were moved on by police or security guards, had difficulty locating a good place to camp, had trouble getting housing or shelter, had trouble finding work, and whether there was too much substance abuse going on where they camped.

Table4.5: Public Place Dwelling respondents categorised by their stated problems.

	Getting food	Getting clean needles	Being assaulted	Moved on by Police or security guards	Locating a good place to camp	Too much substance abuse	Trouble getting housing or shelter	Trouble finding work
% of public place dwelling respondents	64.86%	16.21%	32.43%	75.67%	78.37%	64.86%	86.48%	56.75%

Almost 83.78% of respondents (or 31 of 37 public place dwelling respondents) experienced three or more of the eight defined problems. 37.84% of respondents experienced almost all of the problems (6 to 8 of them). Two respondents experienced none of the problems about which interviewers enquired. The smallest number of interviewees had problems getting clean needles. And 25% of respondents complained about being assaulted or fearing for their safety.

Housing problems

Insecurely housed respondents were asked directly if their accommodation: was overcrowded, hosted too many visitors, had working services, required maintenance, or housed people with serious problems such as substance abuse. They were also asked about the security of their tenure.

Table4.6: Insecurely respondents categorised by their stated problems.

	Overcrowding	Too many visitors	Services need repair	Insecure tenure	Housemates with problems	Maintenance required
% of insecurely housed respondents	50%	43.75%	37.5%	25%	56.25%	37.5%

43.75% of the total number of insecurely housed individuals experienced three or more of the six listed problems relating to their accommodation. A further 18.75% experienced two of the problems. And 31.25% revealed that they did not experience any of them.

Mental and Physical Illness

15.09% of respondents had a diagnosed mental illness, while the interviewers suspected a further 9.43% suffered from some form of psychiatric condition. Two of those with a diagnosed mental illness were women, while it was suspected that a further three had such a problem. Thus 61.5% of this subset of interviewees was male. Four of the mentally ill group were insecurely housed, leaving 69.23% as public place dwellers. Six out of the 13 interviewees believed or known to be mentally ill had been public place dwellers for five years or more. With two of these individuals it was only suspected that they were mentally ill.

Only 15.4% of interviewees in this category were aged 45 years or older. And only one individual was mentally ill and aged between 18 and 35 years. This person was also insecurely housed. Nearly 77% of mentally ill respondents were aged between 25 and 45 years. Half of this number was only suspected to have such a problem. And two were insecurely housed.

Almost 51% of respondents disclosed that they were suffering from a physical illness. 37% of these people had a chronic ailment, while 29.63% had an illness related to their abuse of alcohol or drugs. One respondent had been disabled in a motor vehicle accident, while another was believed by the interviewer to suffer an intellectual disability. Only 14.8% of physically ill respondents fell into the insecurely housed category, and the majority of these suffered from chronic illnesses. Of the total number of interviewees who fell into either illness category, physical and mental, 22.5% fell into both. Four out of the nine people in this position were only suspected to have a mental illness, and one of these was insecurely housed.

Almost half of the interviewees who were physically ill were women. The age group experiencing the highest incidence of physical illness was the 35 to 45 years olds, being 44.4% of the total number in such a situation. The physically ill age group entirely made up of public place dwellers, and representing 33.3% of the total, was that containing the 25 to 35 year olds. None of the four people who declared themselves to be aged between 18 and 25 years were suffering from a physical illness. Those interviewees 45 years of age or older made up 22.2% of all physically ill respondents; this being just over half of all people in that particular age category.

Alcohol and Drug Dependency

Almost 43.5% of respondents declared, or the researcher determined, that they were alcohol dependent. One person described themselves as a recovering alcoholic. Five of those insecurely housed abused alcohol, or 9.43% of the total group of interviewees. And 48.65% of public place dwelling respondents were alcohol dependent. This represents almost 78.5% of all alcohol misusers interviewed. Only 30.43% of those dependent on alcohol were women. 76.47% of people who had been either public place dwellers or insecurely housed for ten years or more were alcohol dependent, however only two of the total fell into the latter category of homelessness.

Nearly 30.2% of respondents were drug dependent. Two of these people fell into the category of insecurely housed while the remainder were public place dwellers. 37.5% of those dependent on drugs were female, one of whom was insecurely housed. 43.7% of those dependent on drugs had been public place dwellers for ten years or more. 18.7% of drug-addicted individuals had been homeless for approximately five years, all of whom were women. Seven respondents or approximately 13.21% of the total number interviewed were both alcohol and drug dependent. Only one of the insecurely housed individuals fitted into this category. Five of the seven people in this category had been homeless for ten years or more.

Prison

7.54% of respondents had recently been released from prison, while 22.64% had spent time in prison sometime in their past. All but one of those recently released fell into the public place dwelling category. And 41.67% of people with prison in their pasts were insecurely housed.

Domestic or Family Violence

The completed interview forms reveal that 15.09% of respondents cited domestic or family violence as a factor in their homeless situation. This represents just over 47% of the female population interviewed. This figure is slightly at odds with the declaration made at the end of the previous section that most women are homeless because of domestic violence or sexual abuse from family. This may be because the questionnaire used did not specifically enquire about these issues.

Sources of Income

78.8% of respondents received some form of monetary government assistance, whether it was a disability pension or unemployment payments. Only nine people, or 17.3% of the total set of respondents, confirmed they received the former. Three people did not specify whether they received any kind of government assistance. Unfortunately the interviewers were not always able to clarify with each person what kind of payment they received. Nearly 40% of respondents had other sources of income. These are listed below:

Table4.7: Respondents categorised by their sources of income other than government assistance.

	Begging	Theft	Borrowing	Odd Jobs (incl. busking)	Total
Percentage of respondents	23.1%	3.85%	7.69%	3.85%	38.49%

Return to home community

86.79% of respondents had elected to stay in the project area or metropolitan Sydney (the large majority in the project area). It must be noted that twelve people, or 22.64%, identified either the project area or metropolitan Sydney as their home community. So 82.92% of people from outside Sydney wished to remain in the city. Only three people wished to return to a home community. And three did not answer this question.

Needs

To assess what the public place dwellers and insecurely housed of the study area need from the relevant service providers, the authors have constructed the following table. It shows each of the categories of need included on the referral sheets that were filled out for each interviewee, and the number of people that fitted into them.

Table4.8: Respondents categorised by the categories of need cited on their Referral Forms.

Interviewers	Referral Categories													
	Physical Health	Mental Health	Accommodation /Housing	Employment	Household Items	Legal Advice	Drug Counselling	Alcohol Counselling	Assist with Bureaucracy	Education	Food & Clothing	Gambling Counselling	Custody Help	Home Support
RG	10	3	23	19	0	3	5	7	2	1	0	0	0	0
PI	14	3	25	5	16	0	6	3	4	7	1	1	3	3
Totals	24	6	48	24	16	3	11	10	6	8	1	1	3	6

The vast majority of respondents fell into a number of the needs categories. Only five people had one need listed, for four people it was accommodation and the remaining person required employment. Twenty respondents, or 37.73% of those interviewed, had three areas of need listed on their referral sheets. And 19, or only a slightly smaller percentage of people had four need categories listed. The highest number of categories simultaneously listed was six. The area of greatest need was obviously accommodation. Further to this, almost 46% of interviewees needed assistance with employment and managing their physical health. The figures for people requiring drug and alcohol counselling, and mental health assistance were particularly low given the prevalence of these concerns among the homeless population (20.75%, 18.86% and 11.32% respectively).

Conclusion

The following discussion includes the personal thoughts and opinions of the two Aboriginal interviewers/researchers Richard Green (RG) and Pam Ingram (PI) regarding the situation of Indigenous homeless people in the inner Sydney project area. These two people have spent a great deal of time with the study group and have long experience of the area and the issues surrounding the range of homelessness categories it hosts. Their contributions embellish, and extend in vital ways, the portrait that emerges from the previous analysis of interview data and the delineation of group identities. This section serves to summarise many of the issues that will inform the discussion in Chapter 6: Strategies and Recommendations.

General Comments

How the Survey was Received

PI stated that the survey had been positively received by everyone she encountered, and that people were eager to participate in the interview process. As she recounted, "some were so keen to be interviewed that one grabbed the form, eagerly, and filled it in himself; and one took a form home and concentrated on doing a good job ... she was so keen, she sneaked away, sort of, with the form". RG recounted that "numerous homeless people have been made aware of the study". He also noted that certain people were very reluctant to be questioned about issues and episodes from their past lives as these were painful and elicited a range of strong emotions, particularly anger and resentment. He went so far as to say that some homeless people found these kinds of questions insulting because they had been unable to forgive people or groups who they perceived had caused them past trouble.

Counting the Aboriginal Homeless

PI described the study area as accurately covering the main part of metropolitan Sydney where Aboriginal homelessness occurs. She said that the number of Aboriginal homeless persons was difficult to establish because of the "itinerant and moving nature of the Aboriginal population of the area". This researcher also emphasised that even the number of the area's Aboriginal residents was not known because they were reluctant to give information as part of the Census. With regards to the people who would fall into the insecurely housed category, PI stated that they "are often incorporated into insecure housing with relatives, friends and any community shelters available" when counts are conducted, and the statistics do not reflect the actual numbers of people without appropriate and secure housing. These comments concur with the relevant discussion contained in Chapter 2 regarding the hidden nature of Indigenous homelessness.

RG reported that from what he had seen during both his recent survey work and general experience over twenty years, the number of homeless Kooris in inner Sydney had increased tenfold and equalled the numbers of non-Indigenous people living rough. He believed that there were many Indigenous public place dwellers who would dodge being counted or interviewed, and had lost faith in the Aboriginal organisations that were meant to assist them, believing that they only served people from certain families.

General Characteristics of the Interviewees

A review of the interview data collected from a sample of 37 public place dwelling and 16 insecurely housed individuals from the inner Sydney study area allows some conclusions to be drawn about the general complexion of this group. It was found that a majority of interviewees were aged between 25 and 45 years, and generally were more likely to be male. And as people began to age the more likely it was that they would be caught in their homeless state for longer. As the age of interviewees declined a balance appeared between male and female. While no one under 18 years of age was interviewed, a significant number of the people who were had children residing elsewhere. Having appropriate accommodation meant these parents could either live with or be visited by their minor children.

By talking with non-Indigenous homeless people living on the streets of inner Sydney, RG had established that their Koori counterparts commanded a high level of respect because they brokered a certain kind of law among people who felt forgotten by the rest of society. They also provided assistance to anyone who found him or herself homeless and were considered to have saved the lives of many people with whom RG spoke.

PI highlighted the vital importance of the network by which homeless Aboriginal people exchange information, particularly pertaining to "safe shelter ... [t]he availability of food, access to services [and] information about police tolerance, or the absence of it, [as well as] the availability of blankets, sleeping bags, clothes and cash welfare possibilities". This kind of exchange could happen when two people met or at larger gatherings in Parks and other favoured socialising locales. Such information was also obtained at service agency outlets, through libraries and the

internet and even through government departments. As PI explained, "without this exchange of vital information no one would survive on the street."

RG reflected that "[a] great percentage, have made a habit out of constantly biting people for money to live and get by." He described one woman who travelled on the trains begging from the thousands of morning commuters and could make hundreds of dollars every hour. "She has done this in plain view of the whole community of South Sydney and city areas for more than a decade during which process she has lost all her own children to the Department of Community Services. This is not an isolated case as there are numerous young mothers doing the same as a means to feed their children, some leave their young with family members whilst they comb the streets asking for one dollar coins and in many cases for whatever the public can spare."

The male researcher described people spending the night in doorways before moving on in the morning when the shop's trading began, and people sleeping in cardboard boxes. In the case of one homeless man RG recounts, "the residents have never noticed him as he returns late at night and rises before dawn to begin his day. [His] dwelling is covered by bird droppings creating a water proof seal and concealed by the fauna which surrounds his Gunyah." This researcher believed that none had employment and few were actually capable of work. Also, RG stated that only two of the people he spoke to during the interview process had not spent time in prison at some point in their lives.

Why People Come to Inner-city Sydney

In terms of where people had begun their lives, the analysis of interview data showed that a clear majority of interviewees came from elsewhere in New South Wales, a large proportion of them originating in communities inland or West of the coastal areas. Just over one fifth of respondents were from Sydney. As a destination, Sydney was considered to provide better chances of employment, education and training. Significantly, in leaving their home communities, people also sought the excitement of a large city and were drawn by the fame of the Redfern Aboriginal community. Some people were also escaping the turmoil being experienced in their home communities and the toll being taken by elders dying and no one taking over their cultural roles and duties. A significant majority of the people from elsewhere (either NSW or interstate) preferred to remain in Sydney.

While PI did not detail what brought Aboriginal people from country areas into Sydney, she did state that the availability of certain things attracted homeless people into the inner city. The first of these attractors was the existing population of homeless people who would inform newcomers of the safest places to sleep. There was also an array of places to find immediate shelter, from squats to hostels or refuges. And trains provided a convenient respite from inclement weather, cold and violence, as the central Sydney stops were the only ones from where they begin a round trip. What also brought homeless people into the area was the availability of services compared to other areas, particularly those in the country. PI cites examples such as improved medical treatments, the greater range of long-term housing opportunities, and if people were waiting for these services, the extent of backup services. People who choose to spend a great deal of time out on the street found it much easier to return to a residence late at night because of the inner city's extensive public transport system.

How Long Have People Been Public Place Dwellers or Insecurely Housed

Public place dwellers were significantly more likely than the insecurely housed to have been in their situation for five years or more, just over 64% of the former as opposed to a little more than 12.5% of the latter. The large majority of people who had been public place dwellers for ten years or more were men. Slightly more than half of those who had been homeless for five years were women, however, the percentage of men in the next time category, between a year and a few, rose to 65. This level was reduced to below half for the shorter time frame of homelessness. The large majority of the insecurely housed had been so for between a year and a few.

Almost two thirds of the public place dwellers interviewed had spent the previous night sleeping rough, on the streets, in parks or in squats. Approximately one third of the insecurely housed had spent the night at a relative's place of residence, and 62.5% had a rented room. One fifth of the insecurely housed had been through periods of 'living rough' or public place dwelling in their pasts. And almost one third of all respondents had stayed with friends or relatives (the insecurely housed were slightly more likely to have done so), however no one had done both. Only two of the respondents who had lived rough in the past had also rented a room or been a tenant in a residential property in the past. None had ever actually been responsible for a lease. Only one of the public place dwellers interviewed had rented a room or boarded in the past. The remainder had staying with friends or relatives when not on the streets or living in squats. This would suggest that public place dwellers have experience of a more limited range of accommodation types and the responsibilities involved in them than the insecurely housed. It also highlights the importance of how certain young people, particularly those with mental illness or drug and alcohol problems, make the transition out of a family home.

Mental & Physical Illness

PI stated that these issues were a pressing area of concern for homeless people, second in importance only to seeking appropriate and secure accommodation. And the interview data revealed that almost a quarter of respondents had been diagnosed, or were suspected of suffering from, a mental illness. A significant majority of the mentally ill were public place dwellers, and almost half of these had been so for five years or more. The large majority of the mentally ill were between 25 and 45 years of age. These figures are low compared with what the researchers witnessed on the streets. Across all the groups identified in the first section of this chapter, there were a large percentage of the Aboriginal homeless who clearly had mental health problems. One researcher (RG) said that "the mental state of people has been the hardest section of this study, when it is encountered it can be a very sad experience for one to go through." In one interview it was said, "they are ignored and neglected because it is a fact that many people deal with the conditions of madness within their own families and the system turns a blind eye."

A specific mental illness described by a number of interviewees, which was often created by the homeless experience itself yet appeared to receive little recognition from service agencies, was depression. As PI described, "[t]o begin with the lifestyle affects the emotions, [and] frustrates the mental stability of the clients. Always being on the move causes tiredness, above the rest of the problems. This in turn affects health and energy [levels] and progressively the itinerant becomes less able to help himself from lack of energy and deteriorating interest that can, and often does, drop down to despair where no interest exists. The situation becomes acute needing appropriate redress."

Just over half of respondents declared they were suffering from a physical illness; the large majority being public place dwellers. The age group experiencing the highest incidence of physical illness was the 35 to 45 years olds. The physically ill age group entirely made up of public place dwellers, and representing a third of the total, was that containing the 25 to 35 year olds. And just below 17% of respondents were both mentally and physically ill, the vast majority of these people being public place dwellers.

The interview process and the discussion of groups conducted earlier showed that the majority of dwellers bought their food from local fast food shops, usually with money obtained from begging. This caused an array of nutritional problems for the homeless, and a number of the participants were judged to be constantly sick. One of those people interviewed by PI described how her lung problems were caused by having to live and sleep outside during cold or inclement weather. "She explained that there are few warm places available to her and her 'gang' as I euphemistically call the groups. They mostly spend their time out of doors regardless of weather except in extreme weather conditions when they will find the nearest available dry spot." PI suggested that a useful model to review for application to the situation of the Sydney inner-city homeless population was an Aboriginal alcoholics shelter located in Townsville.

Alcohol & Drug Addiction/Abuse

Across all the groups, the majority of the Aboriginal homeless interviewed were found to be alcoholics and/or addicted to drugs. The analysis of interview data revealed that almost twice as many public place dwellers as the insecurely housed were alcohol dependent, the large majority being men. And another significant majority of people who had been either homeless or insecurely housed for ten years or more were alcohol dependent. The proportion of drug addicted public place dwellers was almost three times that of the insecurely housed. And again a clear majority of drug users were men. Almost 14% of the total number interviewed was both alcohol and drug dependent. Only one insecurely housed individual fitted into this category. Nearly three quarters of the people in this category had been public place dwellers for ten years or more.

The discussion of groups at the beginning of the chapter revealed that the homeless purchased alcohol from local bottle shops and pubs, usually buying casks of Moselle wine and filling their soda bottles with it. One of the Newtown mob (Group B) said that he obtained his methylated spirits (rot belly) from the local hardware shop, its staff always just giving it to him free of charge. One interviewer (A.P.) observed that the local bottle shop/pub did not turn away the same inebriated homeless person when he went in to buy alcohol. Another interviewee admitted that she only drank alcohol "to be sociable with the group she congregates with as that is their practice". This person also "explained that her survival on the street depended upon her intermingling with her group". Many interviewees suffered from the physical and mental illnesses resulting from alcohol addiction: such as pancreatitis, epilepsy, diabetes, schizophrenia and anaemia. These conditions were compounded by the harshness of life on the streets, particularly in winter when the interviews were conducted.

RG observed that, "concerning those transients inhabiting the city, there is no specific time to approach any of [them] as every one is addicted to one stimulant or another... Heroin and cocaine are their drugs of choice and there are quite a few

who spend the night either soliciting or committing larceny to support their habits ... at the break of dawn they seem to just vanish into thin air at the sight of first light. It is a very macabre situation to watch occur before our eyes, as people seem to melt into the surroundings. They are all very thin and gaunt and many have mental and emotional problems."

PI described the generational influence of drugs on the community living on the Block, emphasising that the "only people who are living homeless on the Block are heroin and cocaine addicts. They are the second generation of hard-drug addicts – most of their parents are, or were heavy drug addicts. ... In any event, this batch of Koori kids – most of them parents themselves now, whose families care for their children – have grown up in heroin addicted families or the heavy heroin-packed community of the Block." According to this researcher, the Block is next only to Kings Cross and Cabramatta as a heroin supply centre, its remaining dwellings serving as sales outlets to the addicts who are invariably homeless. In fact, PI went on to say that the addicts prefer homelessness if it means they are close to their suppliers. She believes that "[t]he A.H.C. has more of a moral obligation and a social responsibility to evict the dealers out of the houses than moving itinerants on."

PI spoke positively about the potential for change being revealed in the fledgling Aboriginal Medical Service's Drug and Alcohol Program and the standard of medical, administrative and field staff it was currently striving to achieve. She believed it would represent world's best practice in both its infrastructure and operation. "Many drug and alcohol addiction problems that affect overall health and status (housing namely), will be greatly addressed and resolved, if not solved". This is significant as the research process found that the majority of interviewees did not use Alcoholics or Drug Anonymous services, and experienced great difficulty in entering rehabilitation programs. An interviewee from the Redfern/Waterloo mob (Group A) said she could not seem to rehabilitate because she did not like how she was treated by program staff. She was quoted as saying, "I would like to attend out-patients rehab but I need a place because on the streets I just zonk myself out because of the cold and then I can't think straight to do anything".

RG reiterated that drug related earnings and dealings were a virulent part of the homeless scene. "The young do not wish their names to be recorded as being out dealing drugs, as they know it is illegal though they claim they have no other choice as it is all they have known." (Refer to the following section on young people.) This researcher also revealed that all the people he had interviewed wanted to abstain from using drugs and/or alcohol before being housed. "Though all have stated [that] the government has neglected everyone addicted by closing down the rehabilitation clinics in the city and forcing groups of addicts to join together in homeless situations."

Violence and Other Crime

PI reiterated the notion that there was a communication network operating among homeless people in inner Sydney that allowed them to exchange information about how safe certain locations were for sleeping, where police and security guards most frequently moved people on and where blankets, a meal or drink could be obtained. Newcomers could access this network quickly to orient themselves, but would also arrive from outlying areas with some prior knowledge of a place. The longer time spent homeless or as public place dwellers the greater a person's ability to read an area for signs of impending violence and disruption. PI stated, "[o]ne of the most, if not the most, important bits of information someone will get upon arrival is ... on violence that happened both recently and dramatically. The more severe the violence, the more it is discussed. And it is the first thing discussed in the morning when people gather at a spot. This happens, not only because it is human nature to do this, it is more so done in a world where the risk of violence towards you personally is very high."

RG described the situation of a number of female public place dwellers who continually became the victims of sexual and physical abuse at the hands of male transients. The initial discussion of group identities revealed that this was the pattern for how homeless women were treated. These women were intimidated late at night for money and sexual favours. One twenty-seven year old woman he described had suffered this kind of abuse for many years and had been assaulted in front of onlookers without being helped. She attempted to keep the location of her squats secret to prevent further attacks. Also, she had ceased taking her medication so endured the full symptoms of her mental illness, as well as being physically ill from years of poor hygiene and diet. One woman from the Central Railway mob (PI-10) mentioned that she had been sexually assaulted frequently, including by racist men, and also had been harassed by police who said abusive things to her. In an informal interview conducted by RG, one young homeless woman said she was constantly being harassed by men on the streets, which made her existence deplorable. This woman had developed a condition similar to meningitides that had affected her sight. As he says, "[t]he desperate child is at her wits end and this one case is a blight on the Australian Government's neglect of ... indigenous youth. [She] can hardly see two feet in front of her and you can watch as men approach her in full view of the public and almost sexually assault her on the footpath of the strip of Kings Cross, where sex is cheap [she] doesn't even warrant protection least of all payment as the whole world glide by turning their faces from the sight."

The majority of women interviewed were on the streets either because of domestic violence or sexual abuse from a family member. This was not quite reflected in the interview data, which only showed about half of women in this situation. The issues discussed in the introduction to the earlier section may have influenced the level of positive responses regarding this matter.

Other Problems

The clear majority of public place dwellers experienced a range of problems on the streets; almost 38% experienced nearly all. These problems included difficulty obtaining accommodation or shelter and food, trouble with Police and security guards, too much substance abuse, the negative effects on physical health, and the risk of violence. And almost 43% of the insecurely housed experienced half or more of the six problems enquired about during the interviews. Their problems included failing services and fittings, lack of maintenance, overcrowding and housemates with problems such as drug addiction. Below the researchers have outlined some further problems that they have observed affecting the lives particularly of public place dwellers.

Property and belongings

"Mostly because of the nomadic nature of existence of the homeless, belongings are usually lost, stolen, left behind or thrown out by minders. Consequently it is impossible for homeless people to get properly organised to help themselves. Property like correspondence, addresses and contact details are lost, along with I.D., money, family photographs, clothing and bedding." It was very difficult in such a high crime area to protect ones belongings. One of the women interviewed by PI claimed that staff at the Mathew Talbot Hostel took her belongings to the dump because it was apparently not their policy to keep the property of female, overnight residents. "Of all the belongings my client lost in that event, she mourned her family photographs the most." As DoCS had placed her children in care, these were the mementos she used to comfort herself on the streets at night. The anguish caused by these kinds of losses drive people "to the point [where they] give up on owning possessions, save the survival equipment like a small bag or a coat occasionally. This further compounds the low self-esteem of itinerants, leading to a deeper stage of homelessness, which [reduces] the ability and/or desire of the client to help himself." PI believes that lockers in homeless shelters and drop-in centre would help alleviate this situation.

PI stated that the homeless people interviewed lacked even more knowledge and skill with new technologies than the general Aboriginal population, which is frequently unfamiliar with these things for cultural, social and economic reasons. One example she gave was mobile phones. They were not popular with the Koori homeless because they could be difficult to protect when "you were drunk, stoned, bashed up or moving from place to place." However they would be useful devices for people trying to improve their situation. Providing access to computers and the internet would also be invaluable.

Correspondence and communication

PI pointed to an important obstacle for homeless people trying to secure accommodation and other assistance: the lack of a fixed postal or street address. It would allow them to receive correspondence from such government agencies as the Department of Housing, Centrelink and Medicare, regular and timely communication with which is essential to people changing their homeless situation. These agencies will not deal with people without such an address. Also PI believed that some of these agencies needed to revise the length of time they require for a client response. "For example, a letter from the DoH is officially marked for return after seven days. So, if a client is in custody for that week, or in hospital, visiting family or friends, or just out of the area for a while—which is often done just for a break, a change of scenery, or for safety reasons—then the letter is returned and that client is taken off the waiting list." In the space of seven days, the homeless person could lose their place on a waiting list they have been on for seven years. "Generally speaking, it is usually imperative that the homeless have a postal address for correspondence to aid survival on the street and to address their status from both sides!"

The lack of reliable postal addresses has implications for homeless people's relationships with their families. As PI explained, "[t]he majority of family communications break down for the homeless person, especially where the Department of Community Services becomes involved and removes children from parents." Without housing this agency will not return children to their homeless parents. "Some parents have the incentive to 'fight' this but most do not and give up and simply wait for the children to grow up and visit them or rely on a relative to bring them for a visit. As well, the absence of a postal address or the availability of a phone, generally renders most family communication practically extinct and your street friends eventually become your family." This situation exacerbates the difficulties of the homeless, from general ill health to depression. People turn to alcohol or drugs to ease their pain. As PI describes, "homelessness directly leads to a lowered state of resistance and in most cases directly causes illness".

Over one quarter of respondents declared that they had either been recently released or had spent time in prison in the past. Over two thirds of respondents received either a disability pension or unemployment payments. And nearly a quarter begged to supplement their income.

Needs - Lack of Services

As PI reported in a previous section, the availability of certain services draws people to the inner city Sydney area from country areas. However, the majority of the homeless from all groups were found not to use the various homeless shelters provided across the city or access the range of mainstream services available. They said that these shelters were often culturally inappropriate. The Aboriginal homeless found the workers rude and off-hand. They also did not feel welcome in these places. There were accounts of people's belongings being stolen or thrown out. An Aboriginal organisation, the Mudgin-Gal Women's Drop In Centre (Refer to the profile in Appendix 2 and its summary in Chapter 3), was the only centre in Redfern being used quite frequently by homeless women who needed a shower, refuge and a cup of tea. The majority of all the homeless people interviewed complained about the lack of services provided for Aboriginal people. They did not use government services because they found it both too difficult to communicate with staff and the paperwork too problematic.

The themes of trust and cultural inappropriateness arose continually when those interviewed discussed why the Aboriginal homeless did not access the many other services available in the area. For example, when asked why she did not access counselling services, one interviewee explained that her shyness and lack of trust brought on by her experience of incest and family violence made it difficult to become involved in group therapy. And she could not afford private counselling. Other interviewees have expressed the need for more Aboriginal rehabilitation centres and services for the homeless.

PI wondered why the range of temporary or crisis accommodation did not ensure that people were without shelter overnight. "Several forms of temporary or crisis shelter are available to the homeless. They generally are homeless shelters, squats, doorways, camp sites and friends or family or one night stay in hotels on pay days. Boarding houses and single room accommodation in permanent houses in the area also offer temporary immediate accommodation to the homeless client as well, and of course, the in-place governmental and community-based housing bodies offer both immediate, temporary, and permanent accommodation to all. For example, D.O.H. offers immediate accommodation to anyone who says they're homeless by paying for hotel accommodation overnight and onwards." People can also frequently find shelter in church halls or on their verandahs.

RG explained another aspect of the problem when he recounted that many homeless people were dyslexic and could not dial a phone number before the coins ran out. This researcher also believed that "there are a few elder transients on the streets that I [would] continue to visit to seek advice on all many of things. ... I could introduce your members to more than 12 homeless people of the highest of minds." PI explains that "some homeless are illiterate as well which virtually renders them helpless in matters of severe ill health [and how to] address it". She says that the "Aboriginal Medical Service is a lifeline and greatly needed".

RG also reported that many he had spoken to in the course of this survey were dissatisfied with the level of assistance provided by such charitable organisations as St Vincent's and the Salvation Army. They disputed the quality and extent of service these organisations offered in consideration of the funds they receive from government for assisting Kooris. He revealed that few Kooris use the Mathew Talbot Hostel despite it sheltering many other homeless people in the area. Kooris often socialised with the men who did use this facility in the adjacent laneway at night. Although the people RG interviewed and talked with believed that a valuable service was being provided, they did not feel enough was being done to alleviate the condition of homeless Kooris.

PI describes the importance of the study area's Drop-in Centres for homeless people in need of somewhere to get a meal, have a shower, launder clothes, meet others, and access the help and advice provided by their staff of trained workers. She stated that these represent one form of service that was abundant and visited frequently by the area's Aboriginal homeless population. "Each major 'area' that the inner-city homeless people use usually has a Drop-In Centre. The Darlinghurst, lower Kings Cross area has the St Vincentian Drop-In Centre, Paddington has one where mostly homeless men gather and meet up. Central has a centre for youth both homeless and not. Waterloo has the South Sydney Youth Service and there are many more. ... There are many reasons why homeless consumers use these centres and one of the main, but basic, reasons is to get a warm cup of tea or coffee, in cold weather to warm up, or to refresh and relax when it's warm. The homeless would be lost without these places."

Examining the information contained on the referral sheets, the area of greatest need for the homeless people interviewed was obviously accommodation. Further to this, almost 50% of interviewees needed assistance with employment and managing their physical health. The figures for people requiring drug and alcohol counselling, and mental health

assistance were particularly low given the prevalence of these concerns among the homeless population. The vast majority of respondents fell into a number of the needs categories. Just over three quarters of respondents required assistance with 3 or more need categories, reflecting the importance of holistic and partnership approaches. PI also made the vital point that without appropriate housing people were unable to properly utilise the education and training services that did exist to allow them a chance to improve their and their family's situation. These also form part of any holistic approach to resolving the problems of Aboriginal homelessness and ill health.

RG criticised the willingness of certain organisations to pass their workload onto others. He claimed that he had rung "several of the charitable institutions claiming to be homeless and received no true support at all. Until I rang back and changed my voice and informed them who I was and who I was working for, immediately I was put through to some VIP who would assure me everything that could be done was being accomplished. That is not to say they don't provide a community service it just reinforces the fact that everyone will put their hand up where Indigenous funds are concerned. If they were doing their job there wouldn't be anywhere near the amount of transients to deal with and in many cases they will run through an amount of Koori names to further assess people's needs." RG believed that many Aboriginal people had lost faith in both Indigenous and non-Indigenous organisations because nepotism was too pervasive. "People are tired of being asked if they are Gadigal⁴ [ie a Traditional Owner of the Port Jackson area] for if they admit to having no knowledge of the name they are instantly referred back to the Redfern community as a place to obtain all their services."

The Role of Racism in Aboriginal Homelessness

PI declared that "[r]acism is at the base of Aboriginal homelessness." It kept these people marginalised. Even more so than the general Aboriginal population, homeless people were more discriminated against, more frequently experienced violence against them, and had even lower standards of literacy and numeracy. "Demeaning is the tool used more against Kooris than any other." (P.I.) Two Koori women described how they had been repeatedly called 'back sluts' by police officers. And one was severely assaulted on one occasion, however she feels there is no way to seek redress for these offences. "This happens a lot on the streets of Sydney", PI explained.

There were a number of significant points where the Indigenous and non-Indigenous homeless population differed, according to PI. "Other poor homeless persons do not receive as much discrimination from landlords, real estate agents, and lessors as Aboriginal homeless do. The general degree of racism existing against the Aboriginal race as a whole is especially prominent against the homeless. Some reasons for this are that the homeless are less resourceful or resourced to address this. As well, the availability of the possibility to 'dress up' to the role of tenant at a real estate agents office for example, is practically non-existent, so landlords reject them on initial appearance alone. More available shower rooms and adequate clothing would go a long way towards solving this initial problem. All solutions appear to be practical ones."

PI believed that the situation "is improving noticeably every day and as well it needs to be addressed by the Aboriginal community itself. For example, Aboriginal organisations, or service providers, could ensure that appropriate Koori information reaches depots used by the homeless in the target area. This set-up would go a long way to improving conditions for Koori homeless on the street as well as to aid efforts on both sides," to ultimately house people appropriately.

Spiritual Homelessness

PI said, "it also needs to be mentioned about the expressly Koori problem of home-sickness, that also adds to Koori homeless problems, as well as to the already sad emotions of the Koori homeless. For example, Kooris are communal people by nature, as well as practice and so any disconnection from family and community has a devastating effect on the individual and the group. This is one reason why people who come from the same place 'hang' together. It is always better to talk about someone to someone who knows them. And moreover, the two basic points of introduction and identification as a Koori is to ask where the person comes from and what their family or 'mob's' name is. So all Koori conversations would be based upon the person and where they are from. This also in a strong way can, or does, determine where you are going to and how. For example, all or most, Koori visitors to the city from the country will end up living in

⁴ "I have studied at the Mitchell Library and I for one suggest the government do a little more research into the atrocities of the Sydney clans. There is only one family of Gadigal that I am aware of. It remains the interference of individuals working towards their own political agenda and dictating our culture which has led to the dispossession of Sydney Blacks. We were the first attacked and it remains a fact that many of us have been bleached out. Let me assure you the Gadigal clan are just one of 32 clans of the Darug. Eora (or Iy-ora) means 'people', yet for the past 20 years people both black and white have been claiming Eora as a word for tribe. All this misinformation is creating division amongst our extended families. Especially considering the federal government allow prominent blacks from interstate to come to Sydney and claim to be of the Eora tribe. You wonder why there is so much homelessness? I can tell you it stems from nepotism. Unless you know someone who knows somebody else you are consigned to do your best." (R.G.)

or near a single suburb, like Redfern, just to be near someone you know, people you know or family. Birds of a feather flock together once more.”

PI believed that while the survey area selected was suited to the purpose of the current project, it would have been valuable to include Newtown and Victoria Park where the new Aboriginal Tent Embassy had been established (abandoned since survey completed). Newtown was where she knows many chronically homeless Indigenous people in need of assistance were residing. She also believed that the Tent Embassy and the way people were living in a form of shelter erected in a public setting represented a further homelessness category and a potentially useful field for considering such issues as spiritual homelessness.

Young People

Both researchers made a particular point of the need to consider how young people are drawn into homelessness and how it can affect their lives. Understanding this situation was seen as vital to halting the increase in homelessness in the study area. PI lamented that “[p]aedophilia became rife on the Block due to drug dealing. In fact it’s become a network across the State from one Aboriginal community to another, one on the North Coast. The strategy is to marginalize youth, then get them hooked, and then threaten them into paedophilia and pornography. Letters have been written to authorities for over twelve years about it from members of the Block. The issue is only now, currently, being addressed. Lots of lives have been ruined in the meanwhile.”

RG described how homelessness and the social problems that help produce and perpetuate it work across generations. In reference to drugs he said that “[a]lthough many ask for no other lifestyle others claim they wished there was another way to make a living. Some have children to feed with no other prospects for advancement. Nearly all will blame their dysfunctional home environments for the situation they are in, yet it remains many are screaming out for help. Starting out from Waterloo the young crews [gangs] will range from Wollongong to Bankstown into the city of Sydney during their nighttime sessions. I am sure the rest of Sydney doesn’t experience the same level of social injustices as the young of South Sydney.”

CHAPTER 5: CASE STUDIES OF HOMELESS PEOPLE & PATHWAYS IN AND PATHWAYS OUT

This chapter contains a series of case studies summarising the lives of twelve public place dwelling and insecurely housed individuals, which were prepared using the interview findings and notes recorded by the researchers. As these were sometimes quite extensive and full of detail that was not contained in the questionnaire, the decision has been made to prepare these case studies to complement the discussion in Chapter 4. They provide an even more vital portrait of how the Aboriginal homeless of inner Sydney live, how they become homeless and the problems they experience in trying to secure reasonable accommodation for themselves and their families. Following each of the sections, a discussion of the relevant themes, which emerge from the proceeding examples, is provided.

Each case study subject has been assigned a pseudonym to protect his or her identity. Eight public place dwellers are profiled first, followed by those of four insecurely housed people, reflecting the overall numbers from each category interviewed. Seven are men and five are women. A slightly higher percentage of women were chosen for closer examination than were interviewed, in order to highlight some of the unique aspects that complicate their lives, such as vulnerability to violence on the street and the impact of family violence and abuse.

Public Place Dwellers

Of the total number of 53 Aboriginal interviewees in the current study, 70% fell into the category of public place dwellers. Following are eight case studies of these individuals. There are five men and three women, whose ages vary from the late twenties to mid-forties. The public place dwelling category outlined in Chapter 2 is broken down into four subdivisions related to the term over which people have been homeless and the extent to which they have habituated themselves to their situation. These examples were chosen for the way they illuminated a number of aspects of public place dwelling lifestyles including the role of substance abuse, family violence and breakdown, and mental illness in bringing people to the brink of homelessness and sometimes pushing them into it. Also of relevance to the aims of this study, a number of the people discussed below had spent some years insecurely housed before moving into their current circumstance.

Case Study 1 (Anthony and Carol)

Anthony was a thirty-six year old man originally from Geraldton in Western Australia. He came to Sydney three years ago with a female cousin (Carol see below) who looked after him and they had been homeless since that time. He was unable to care for himself, relying on his cousin because he suffered from numerous physical and mental illnesses, including epilepsy and some form of psychosis. The interviewer identified the latter problem and it appeared to be linked to his 'wet brain', ie one damaged by long-term alcoholism. She reported that he was not receiving any ongoing medical attention for his epilepsy and urgently required assessment by a mental health professional. The level of debility endured by Anthony made him a target for a great deal of violence, however the interviewer was unable to determine who perpetrated it. She could not proceed with the interview when violence broke out among the group her interviewees were accompanying. Both Anthony and his cousin (Carol) camped with groups containing between twenty and forty people.

This public place dweller experienced a range of the problems enquired about in the questionnaire, including those related to health and alcohol consumption mentioned above. He also had difficulty in obtaining housing or finding a good place to camp, being moved on or hassled by police and security guards, and getting food. Anthony had difficulty dealing with government agencies because he "didn't understand many things".

This man and his cousin wished to be housed together. He regularly slept on the streets or in parks despite receiving a Disability Support Pension (DSP). A great deal of it was probably spent on alcohol. The interviewer stressed that once Anthony and his cousin were housed they would need ongoing support to ensure that they settled in successfully. Being from another state meant they did not know many other local Kooris or the relevant organisations. They tended to mix with fellow travellers from Western Australia so did not tend to access relevant information about the area. As the interviewer explained, out-of-state Kooris did not have local family to go to for help, did not know the political scene and were therefore very isolated in Sydney. An uncle of these cousins was reported to have recently obtained housing through the Department of Housing. Both belonged to the City/Town Hall Mob or Group D.

Carol was an approximately thirty-two year old woman from Geraldton in Western Australia. She and her male cousin, Anthony, arrived in Sydney three years prior to the interview, after she was raped in her home community. She vowed to never return to live there again as the location conjured up too many bad memories. However, she did return to see her

father, which apparently caused her application with the Department of Housing (DOH) to be cancelled. They required some support letters from her before they would continue to process her application for housing.

Until the day before the interview Carol was living temporarily in a rented room shared with her boyfriend and Anthony. The boyfriend got drunk and vandalised it so they were all evicted. The DOH gave her money for emergency accommodation, however on the day of the interview she was in dispute with them about precisely how much she had received. Despite obtaining infrequent, short-term accommodation in hostels and boarding houses, Anthony and Carol had been public place dwellers for the majority of their three-year term of homelessness.

The two female interviewers had first met Carol one night when she was sleeping in the street outside the Mathew Talbot Hostel with other non-Indigenous transients. They had all been unable to get a bed inside the hostel. Later in the night the police moved on all the women as they were concerned that their mingling with men would lead to sexual violence. Carol said she often sought a bed at an Albion Street shelter (probably run by The Haymarket Foundation refer to Appendix 2).

During the day Carol and her cousin consumed alcohol in Hyde Park where there was grass to sit on and sunshine to keep them warm in the winter. Of prime importance in their choice of daytime socialising camp was the accessible toilet located in the Museum Railway Station near the park. Such a facility did not exist at the Redfern Railway Station anymore where they had previously frequented. In their current daytime camp, the police did not normally move them on.

Carol was also an alcoholic, although she claimed that she only drank to be sociable among her public place dwelling group and that if she had her own place she would not consume alcohol. She suffered from lung problems and depression caused by being chronically homeless and from living without an inadequate diet. Carol collected the Newstart allowance at her local Centrelink office.

Carol cited the difficulties getting housing or a good place to camp, being moved on by police, too much heavy drug taking in the group she socialised and camped with, occasional violence (more in regards to Anthony) and chronic, lifestyle-induced illness as her main problems with street life. She also said that she had been the victim of domestic violence perpetrated by her boyfriend, and that obtaining housing was the only way she could be safe from him. He often camped with the same groups that she frequented.

Case Study 2 (Noel)

Noel, a 44 year old Bunjalung man from Coffs Harbour, had been living on the streets since he was 15 years old. He had been adopted twice since the age of four years. When his stepparents passed away during his teenage years he started drinking methylated spirits and hit the streets of Coffs Harbour. Noel originally came to Sydney to attend the Bennelong Haven Rehabilitation Centre in Marrickville, a drug and alcohol rehabilitation facility that catered specifically for Aboriginal addicts. He also worked for the Centre as a bus driver, taking people to Alcoholics Anonymous meetings all over the city. When Bennelong Haven closed down he returned to the streets, where he has lived ever since. With the exception of a couple of years when he was married, Noel had been a public place dweller in Sydney for fifteen years. He was separated from his wife and had five teenage children.

Noel was well known and respected among the study area's homeless and was looked up to because of his knowledge of the streets and the longevity of his surviving rough in the inner city. He looked out for younger homeless people and made sure they had a safe place to sleep at night. He said that he used to counsel kids on the street. Noel had been unable to get out of his situation because of his chronic alcoholism, for which he felt there was no cure. He stated that he had spent 'half his life' in rehabilitation centres, having attended such facilities as Bennelong Haven and Campbell Park Manor, as well as centres in Lismore, Ashfield, and Kempsey.

Noel suffered from a number of medical conditions related to his excessive consumption of alcohol, including pancreatitis, diabetes, epilepsy, and schizophrenia. He was also anaemic. The harsh conditions of life on the streets created and compounded a number of other problems such as the effects of poor nutrition and hygiene, and sleeping without shelter in cold weather. Noel reported that he had spent time in every hospital in Sydney and Coffs Harbour, as well as two psychiatric facilities. When asked if he was on medication, he said, "I don't like popping pills or taking medication and all that because I drink too much." He elaborates further:

"I spent 12 months at Campbell House off Oxford Street. They had to send me to Sydney Hospital cause I had a fit and had pancreatitis - couldn't stop bleeding from the mouth and the backside. They gave up on me and said I was a goner but one nurse stood up and said don't give up on him and they brought me back to life. I can verify all of this. What keeps me alive is my children ... I've died in every hospital in Sydney, I've died in Concord Hospital, I've died in Prince Alfred Hospital. There's no cure for it, no cure for it."

Over a period of two weeks during this study, Noel had collapsed three times due to his consuming a cocktail of drugs. He said he usually did not remember what he had taken because of his advanced state of inebriation. He believed he was drinking mentholated spirits, took 15 valium tablets and collapsed. He had no recollection of what happened until he regained consciousness 24 hours later. Apparently he was given Narcan (a drug used to treat heroin overdose) to revive him, although he said he did not remember taking heroin. He claimed not to have injected heroin since he was younger. Noel also said that he collapsed at the Block only the week prior to this incident and was again revived.

Noel identified himself as belonging to the Newtown mob or Group B, normally sleeping in empty squats in either Newtown or the Broadway/Central area. He described the situation as follows:

“I’m used to sleeping on the streets ... when there’s a spare mattress, you jump on it before anyone else comes and jumps on it. If it is pissy, who cares, it’s better than sleeping on the ground. When it was real cold, Night Beat brings blankets around. A friend of mine would go up to a shop window and smash it so he could spend a few months in jail until winter finishes.”

He stated that where he was currently living, the squat occupants had to sleep on milk crates to avoid being bitten by rats at night. There was no electricity or water so they used candles and could not shower or bath. The squat smelt of human excrement because the toilets did not work and occupants went into another room to relieve themselves. Noel usually camped with one other mate, however when living in the squat he was sharing with around eight or nine other people. He described his sleeping arrangements as follows:

“Got kicked out of Broadway squat about 3 or 4 weeks ago. They knocked the building down. There were about eight camping together at the squat. You have this mob here, you have got that mob there and that mob there and you sleep and mix with people who you know that you’re not going to get a bottle smashed over your head or rolled or robbed. After we got kicked out of squat, everyone split up.”

When asked why he hung out in Newton versus Central or the City, he responded that it was busy, people were nicer there and that he felt safe. He continued to say that he felt pretty well protected there: “Newtown is my town. You know that you won’t get hit over the head with a bottle or bashed.” The field researchers saw that the Newtown dwellers operated like, and considered themselves, a very tight family unit. Noel says, “if they see me lying out on the street, asleep or whatever, they pick me up and take me to the squat or to a mattress.” When asked if there was a real sense of cohesion and solidarity among the group, he responded:

“Yeah, not everyone, just a certain mob that drinks together. See, down at Central Station, we don’t mix with them mob. Oxford St, we don’t mix with them mob. Kings Cross we don’t mix with them mob. Or Surry Hills mob. Cause when you get drunk and lay down to have a sleep, they go through your pockets, you wake up in the morning and oh shit thought I had enough for a bottle of Metho or a bottle of Moselle or whatever, and thought I had a few smokes and they’re gone.”

When asked if he experienced any problems or was concerned about being assaulted, he responded: “No, I carry a knife all the time, plus I’m with the boys/my mob.” Noel said, “Yeah, that’s why I sleep on the streets, I don’t want to sleep in the empties. I sleep out on the streets where there is light and the shops are open and there are people around. I sleep on the street its safer.”

Noel lived on a pension. The Newtown mob was known to share all their resources, as well as exhausting the social security/pension allowances of its members. Noel recounted that, “if you live in a squat and you have about eight or nine people around, by the time you shout a feed or a drink you’re broke and I don’t like to say no too much - I wasn’t brought up that way.” When asked if he has any problems getting food, he responded that he would walk into a shop and they would give him a free pie. He mentioned that he has been to ‘the Tank’ where the homeless could get a spare bed for the night and a meal. However, he did not use any of the hostels for a free meal, saying, “they’re shit, I wouldn’t go nowhere near Mathew Talbot.”

When Noel was asked if he would like to go back to Coffs Harbour, he responded: “I won’t leave Sydney cause my children live here. I’m here for my kids. Won’t even go back to Coffs Harbour, can’t stand that place. All the Elders up there are no good. Junkies out there, like in Redfern, they are everywhere up there.”

Noel had five teenage children, with whom he kept in frequent contact. The youngest was 18 years old. They would come in to see him every so often. He recently became a grandfather for the fifth time. This youngest grandchild was 2 to 3 weeks old and he had not seen her. When asked if his children helped him out financially, he strongly responded: “No, I don’t ask my children for not one lolly – I don’t ask my children for nothing.”

The interview conducted for this study represented the first time Noel had talked to anyone about resolving his housing problem. He had not utilised any services such as the Department of Housing because he believed that no one cared. He

mentioned that one person he had talked to about his situation was a psychiatrist, and the only services he had dealt with for advice and help were two psychiatric centres. The first was a mental health hospital run by St. Vincent de Paul, and the second was the Rozelle Mental Health Hospital run by the State. He said that he stayed at Rozelle for a couple of months and said it was helpful. He described the situation as follows:

“It was good. They (St Vincent’s) reckoned that all my alcohol was out of my system, so I had to go... I got kicked out of Rozelle Mental Health cause I was sneaking downtown buying snorties and smokes. My ex-Partner (mother of my children) got me out of Rozelle but that was when I wasn’t as mad as I was.”

When asked how he thinks he could get out of his situation, Noel said he wanted the study team to help him with his housing situation. He responded:

“Have you heard of the Big D? I’m desperate for a place. I want to get my son off the streets cause he’s running around stealing, breaking into cars, and smoking snow cones... If I get my own place, I know I’ll change. Cause I want my second eldest son to come live with me cause he’s on the streets too. My other sons and daughters are safe. My other kids are fair skinned but my second eldest son is dark like me - I call him Black Boy. There’s a few people complaining about my son - he’s not paying board or bringing food into the house, so he’s squatting over at Woolloomooloo ... I want a house for my family. If I get a place it would solve a lot of problems.”

When asked where he preferred to live if he got a house, Noel stated that he wanted to live in Newtown. He mentioned that he did not want a house on the Block as he wanted peace. He did not want a lot of people to visit and mess up his new place. He said that it would be like living in another squat on the Block, “[o]n the Block, they steal off each other, they rob each other. I don’t want that life.”

When prompted to describe how he felt being homeless, Noel reiterated that he was an alcoholic and very unwell. He reminisced that when he first came to Sydney he played for the Redfern All-Blacks. But alcohol had changed everything in his life. He wanted proper accommodation to be able to take better care of himself. The interview left Noel in tears but somewhat hopeful that in the future the AHO researchers would help get housing for himself and his son.

Case Study 3 (Veronica)

Veronica was a twenty-seven year old woman who identified her traditional country as Wiradjuri, however she also said that she came from Kempsey on the Mid-North Coast, as well as Batemans Bay on the South Coast and Cowra in the Central Tablelands. Her custodial history as a child could explain the diversity of these locations. She had been a public place dweller for a few years, but stayed with friends infrequently. She did not want to impose her misfortune on them too often.

When Veronica was approximately six years old her mother died and she was placed in the custody of her father who then molested her. She was too afraid to do anything about this abuse because he was very violent, however when she was twelve she revealed the truth to a Department of Community Services (DoCS) worker and was taken into their care. Her father beat her severely for doing this. During her lifetime, her mother had needed facial plastic surgery to repair damage inflicted during one of his beatings. Veronica was brought to Sydney as a ward of the state and placed in a foster home, but this did not work out and she has essentially been homeless ever since. She did have Department of Housing (DoH) accommodation when she was eighteen but her partner became abusive and she left. Because of this she was removed from the Department’s high priority list.

Veronica needed help finding accommodation, education and work. She had looked for private accommodation but had found it to be too expensive. Without a house she did not feel she had a stable base (showers and clean clothes) from which to search for work and then maintain it. She would have liked to stay in Sydney’s outer suburbs. This woman regularly travelled to Melbourne and spent time on the streets there because that is where her sister, who cared for her child, resided. She wanted to be able to establish a home for her child.

Veronica identified many of the problems listed in the questionnaire as figuring in her life on the streets. She experienced trouble finding housing and a good place to camp, as well as being involved in too much heavy drinking and moved on or hassled by the police or security personnel. She often got influenza from sleeping rough in cold weather without blankets. Also, too much heavy drug taking occurred in the groups she camped and socialised in. She also had great difficulty getting employment. Violence was another problem. She would become involved in fights because people in a group are meant to support one another in this regard.

For the past few years Veronica has frequented a camping spot under a car park at Kings Cross. She said to the interviewer that she had recently met a man on the streets who protected her. Her experience of incest had left her unable to trust people so she did not seek advice or help from anyone. As a consequence she was sinking deeper into her

addiction to drugs. She had spent time in prison and received a Disability Support Pension (DSP) that she collected from her local Centrelink office.

Generally, Veronica said she felt safe on the streets because she always slept with at least one other homeless person from the Kings Cross mob. She derived a sense of protection and solidarity from the homeless people living in the area.

She did not use Narcotics Anonymous because she did not like the group counselling they offered. There were too many people and it was not private. She did not trust the Kirketon Road needle clinic because she believed they informed the DoH that she was a user. She got her food at the Wayside Chapel and used their shower facilities, but did not access any other services in the City.

Case Study 4 (Keith)

Keith was a thirty-two year old man originally from Walgett in the North West Slopes and Plains District of New South Wales. He recounted to the interviewer that he had been a public place dweller for more than ten years, although at the time of the interview he was living with his sister in an overcrowded house. He was addicted to alcohol and drugs, and since his teens had spent regular time in prison. He had never been properly employed and had no experience of a reasonable level of accommodation that would reflect minimum community standards.

The problems listed in the questionnaire that Keith identified as ones he regularly experienced include: difficulty accessing shelter or housing and finding a good place to camp, being hassled or moved on by police or security personnel, health problems, and difficulty getting food, clean needles or work.

Keith supplemented his Newstart Allowance through begging and occasional theft, although he would have preferred not to engage in the latter. He wished to stay in Sydney because of the community he had grown close to there, which was a common reason people from elsewhere gave for wanting to remain in the city. Keith could recall no other lifestyle.

Case Study 5 (Christine)

Christine was a twenty-seven year old woman who came from Sydney, possibly the South Sydney area. She claimed that the failure of her marriage and her subsequent abandonment had left her destitute. She believed she had been a public place dweller, particularly in the suburbs of Redfern, South Sydney and Glebe, for five years or more. Christine had frequented a safe squat in Glebe for the year prior to the interview, being very careful about revealing her whereabouts to other people for fear of violence being directed at her. In the past, homeless men had moved in on her secret camping spots and threatened and assaulted her for her meagre possessions and sexual favours. The interviewer identified a number of untreated injuries on her arms at the time of the interview.

Aside from her physical ailments Christine also suffered from some form of mental illness as evidenced by her bouts of "talking to the ether and the elements". She had received a diagnosis in the past but did not take her prescribed medication. Some commercial or retail premises in the areas she frequented gave her food, however others were hostile to her presence. Christine claimed to make her money by bludging or begging. She also said that she had approached many people for help with her situation but had always been turned away.

Apart from having the obvious difficulties in finding housing or a good place to camp, Christine also experienced a number of the other problems associated with street life that were listed in the questionnaire. She got hassled or moved on by the police or security officers and had trouble getting food. The fact that she cited difficulty in obtaining clean needles and too much heavy drug taking as problems suggested that she abused heroin. Getting work and violence were further problems that she encountered when living rough.

Case Study 6 (Michael)

Michael was a 36 year old man from Toowoomba in Queensland who had been living on the streets since the age of 14. He had generally led a nomadic life up and down the NSW coast and in Queensland. He suffered from schizophrenia but was not taking medication for it. He was receiving a disability support pension for his mental illness. Michael came to be living on the streets because he could not get along with his relatives. He said he could not bear family squabbles and had to get away from them. His family had moved around a lot, and he had lived in Sydney and Melbourne with his aunts and uncles. For two and a half years prior to the interview Michael had been living rough on the streets of Sydney. He said he first came to Sydney for work, and stayed because he eventually had "no money to move anymore". However, he did emphasise that he wanted to remain in Sydney because he wanted to make a connection with his "other relations". He

explained: "I am both sides in me, white and black, and I only been mixing with my white relations and now I want to get to know my Koori relatives."

Michael did not know his traditional language or country, but said he could speak a language without understanding its meaning. He had three children aged four, eight and 14 years. He was not sure he was their biological father, and had last heard that they were in Queensland, possibly with their mother or mothers.

Michael slept alone and moved around a lot, usually camping out in parks all over inner city Sydney. Some of the main problems he experiences being homeless were: being housed, finding a good place to camp and receiving mail. He sometimes stayed at the Mathew Talbot Hostel, however he did not like the dormitories and their little partitions. He said he had been unable to find the Aboriginal Hostels.¹ He felt safe on the streets and did not worry about getting bashed since he was strong and could defend himself. He said he had been hassled by the police a few times. Obtaining food was also problem for Michael. He sometimes went to the Salvos (Salvation Army) and St Vincent's for a meal. Despite not liking living rough, once he had eaten a meal he felt okay. He missed having showers and said he used the various drop-in centres provided by the organisations listed above for a shower. He further described his situation:

"I like having a shower ... I use drop-in-centres a lot for showers and sometimes I save money for showers. Occasionally, when I can, I save money for a room for the night and a shower, but I don't like living that way because you can't have anything, people take your things. You just can't keep nothing to yourself."

Michael felt that his level of alcohol consumption was not a problem, and he did not use heroin. He wanted to contact some health services with regard to his schizophrenia, but did not know all that were available to him in Sydney. He had stopped taking medication for his schizophrenia because it "messes him up" and he gained weight as a result. He complained that when taking the medication prescribed for his illness he weighed 20 stone and "could not fit through the doorways".

Michael had applied to the Department of Housing in an effort to resolve his homelessness problem. For the two weeks following the interview he stayed with a friend who was helping him sort out his paperwork. He had recently received a letter from the DoH saying that they would pay for him to stay in a hotel for six days. Also, when he found a private rental dwelling, the agency would cover the bond and a maximum of two to three weeks rent. The interviewer commented that he would also be able to receive rental assistance as part of his disability pension.

Michael felt that the pathway out of his situation involved being in a stable situation where there was a bed and walls, where he could "better himself instead of being down". He wrote song lyrics, played the guitar and composed music. He had written numerous songs while staying with his friend. He wanted a place to settle down in so he could write more music and possibly form a band and record it. He also wrote stories and wanted to teach guitar. He said that he had not previously had "a place where he could start a career". He hoped for a place that was semi-permanent where he could "get it together", focus and write.

Case Study 7 (Robert)

Robert was 38 year old Dhungutti man who had recently arrived from Kempsey on the mid-North coast of New South Wales. He had been living in a squat for a few months when interviewed. The problems he identified as a public place dweller included: difficulty obtaining shelter or housing and finding a good place to camp, excessive alcohol consumption on his part, being hassled and moved on by police, security officers or council staff, and getting food. He came to Sydney to face court and has stayed for the community he found around Redfern. This man was an alcoholic.

Robert was interviewed a second time after he had spent a fortnight visiting other Kooris in squats around Sydney. He remained unemployed and drinking heavily. He did not know how to find a way out of the situation he found himself in without government assistance.

Review of Public Place Dwelling Case Studies

The previous research outlined in Chapter 2 divides the overarching category of public place dwellers into four sub-categories: (i) short-term, intermittent and voluntary; (ii) medium-term, voluntary; (iii) long-term (chronically homeless), voluntary; and (iv) reluctant, necessitated by circumstances. A key factor by which three of these sub-categories were determined revolves around the term over which people have been public place dwellers. Of the case studies listed above one person had been homeless in the short-term (less than a year), three had been homeless in the

¹ The interviewer commented "that is why drop-in centres are important so people could find out where beds are available, find out information on Aboriginal services, etc."

medium-term (a few years to five), and four had been homeless over the long-term (five years or more). However all of the interviewees had been eager to find a solution to their homeless situation and none were voluntarily dwelling in public places. It should be noted however that the nature of this study and the way people were invited to participate attracted subjects who wanted assistance to change their circumstances. In the original research on homelessness categories, the delineation of 'voluntary' referred to people who had become habituated to public place dwelling and identified themselves with such a lifestyle. Some also maintained residences elsewhere, but lived rough to socialise and consume alcohol with friends and family in an external setting. These kinds of people operating within the study area would not have been recorded by the interviewers and are therefore absent from the interview data. But some of the people described above may still choose to spend time socialising in the public place dwelling group with whom they affiliate, even after they obtain stable accommodation.

It is interesting to note the number of people described in the above case studies who had been insecurely housed in their past or who moved into this category intermittently throughout their public place dwelling 'careers'. The man and woman, Anthony and Carol, discussed in Case Study 1, fit the latter pattern. Just prior to their interviews they had occupied a rented room from which they were evicted because of her boyfriend's drunken vandalism. And the female researchers had encountered Carol outside one of the area's large hostels one night, having failed to obtain a bed inside. Noel (CS2) had previously spent time in alcohol rehabilitation clinics and was in fact forced back onto the streets when one of these clinics closed recently. Case Study 3, Veronica, had been insecurely housed from an early age. After her mother died when she was six, she entered the custody of her father who sexually abused her. To protect her from this abuse and violence the DoCS placed her in care, which brought her to Sydney. When she was 18 she had obtained a dwelling from the DoH, but when she left her violent partner she was apparently removed from the Department's high priority list. During the time of the interviews, she regularly travelled to Melbourne to visit her child who was being cared for by her sister, and she also lived on the streets there. Veronica sometimes also stayed with friends. Keith (CS4) had a long history as a public place dweller, although at the time of his interview he was living with his sister in an overcrowded house. Michael's (CS6) family moved around between rental housing a lot and it was their fighting that drove him on to the streets.

Of the examples listed above, Veronica (CS2) most clearly illustrates where homelessness or the risk of it can begin, and how dysfunctional mobility (also refer to the discussion of insecurely housed interviewees below) emerges and can lead to public place dwelling. Her life also provides a stark warning about the effect which family violence and abuse can have on young lives, particularly when the levels at which these crimes are occurring in Indigenous communities throughout Australia are considered. Her case demonstrates the value of intervening effectively in young lives where dysfunctional mobility and insecure housing are factors. The importance of dealing with violence is also highlighted by Carol's (CS1) case where her rape drove her away from her home community, and compounds her current sense of despair at being homeless. Both these cases reveal the serious, life-affecting repercussions of certain events that can occur when lives are already marred by disadvantage.

The above case studies also demonstrate the destruction wrought by alcohol and drug addiction, and most particularly the threat that these problems represent to secure housing. Two of the eight interviewees discussed above were confirmed alcoholics, and an additional one regularly consumed alcohol to socialise with her group but claimed she was not addicted. Two more were addicted to both alcohol and drugs and another two were addicted specifically to heroin. This means six to seven of the eight case presented above involved serious alcohol or drug abuse. Anthony (CS1) suffered a permanent mental impairment due to his heavy and long-term consumption of alcohol, rendering him vulnerable to attacks on the streets and reliant on the care of his cousin. To succeed in rental accommodation he would need a carer. Noel (CS2) had been a long-term alcoholic and had unsuccessfully attempted many times to beat his addiction. He suffered from a number of medical conditions related to this excessive consumption of alcohol, including pancreatitis, diabetes, epilepsy, and schizophrenia. Over a period of two weeks during this study, Noel had collapsed three times due to his consuming a cocktail of drugs. Such a person would not be able to enter or maintain stable housing without ongoing support, and his related medical conditions would be costly to treat. Veronica's (CS3) experience of incest had left her unable to trust people so she did not seek advice or help from anyone. As a consequence she was sinking deeper into her addiction to drugs. It must be accepted that for people with a long history of drug or alcohol abuse, the path to stability will be long and must be attended carefully by outside support agencies, otherwise people will slip back into homelessness.

A number of the public place dwelling interviewees described above suffered from both mental and physical illnesses. Carol (CS1) not only experienced a number of ailments related to living rough in cold conditions, such as lung problems, but her homelessness had also made her depressed. This must have been made worse by her unresolved feelings regarding her rape. This trauma brought her to Sydney and kept her away from her home community. Anthony her cousin (CS1), suffered a number of illnesses related to his alcohol consumption and life on the streets, in particular a psychosis that remained undiagnosed and untreated. All the case studies suffering from a mental illness endured their conditions without medication or ongoing treatment. Michael (CS6) suffered from schizophrenia and Christine (CS5) had bouts of "talking to the ether or elements", which suggests she had a psychiatric condition of some kind. People with this level of disability

will require close monitoring and support to enable them to change their circumstances. And many would require assistance in the long-term to ensure they remained securely housed.

Noel (CS2), Veronica (CS3) and Michael (CS6) all declared that they were the parents of minor children being cared for by others. Noel's example provides a clear illustration of how a parent's lifestyle may affect his or her children. He was concerned about his son as he had not paid board or brought food into his residence and was squatting at Woolloomooloo. Community members had been making complaints about the young man and Noel wanted to have a house he could share with his son and divert him from slipping into a longer term of public place dwelling. Many of the case studies, including those listed below under the heading insecurely housed, had younger children for whom their situation prevented them from taking an active parental role. Where such children are cared for by relatives there is the potential for them to slide into dysfunctional mobility if the relatives are not properly supported. On many occasions people such as grandmothers or aunts step in to care for children but do not have the resources to provide a stable home.

Insecurely Housed

Of the total number of 53 Aboriginal interviewees in the current study, 30% fell into the category of insecurely housed. The next part of this chapter contains the four case studies of Aboriginal individuals who fell into this category. There are two men and two women, whose ages varied from their late teens to mid-forties. Each one of the situations described involves not only insecurity of tenure but also dwellings that are sub-standard and overcrowded, while at least two involve dysfunctionally mobile persons, according to the finer grade divisions of the 'at risk of homelessness or hidden homelessness' category outlined in Chapter 2. These examples were chosen for the way they illuminated a number of aspects of 'at risk' lifestyles including the role of substance abuse and mental illness in acting as pathways into homelessness.

Case Study 8 (Sandi)

Sandi was a Kamilaroi teenager originally from Moree in the North West Slopes and Plains district of New South Wales. She would turn 18 after the study's interview period, later in 2004. She suffered from schizophrenia and was insecurely housed. Since she had arrived in Sydney four years prior to the interview, she had been living in unsuitable and overcrowded rental accommodation. Sandi left Moree searching for better conditions and opportunities in Sydney, and to live with her grandmother. She said, "Moree is a dead-end town ... I wanted to get away from my home, the mission and my home town as they were meant to me ... I came to live with my Nan in Sydney."

Sandi came from a family of five children and two parents. Her mother suffered from a severe case of schizophrenia. Consequently, the family had disbanded and most had moved to Sydney. When she was younger Sandi lived in a foster home with her brothers. When she arrived in Sydney, she stayed with her grandmother out at Berala. The house burnt down and she spent two years staying at various homes of relatives and in some hostels, including a youth hostel for young Aboriginal girls in Concord. This transitory state had resulted from her deteriorating health and the difficulty people experienced having her around. Her health deteriorated to the point where she was hospitalised.

At 14 years of age Sandi attempted suicide. She slashed her wrists but because she was at the beach the salt congealed her blood and prevented her from bleeding to death. She had been admitted numerous times to hospitals in Sydney, such as Campbelltown, West Mead and the Royal Prince Alfred Hospital (RPAH). She recounted that on one occasion she was feeling well and using her medication properly when the police picked her up and admitted her to hospital. She appeared paranoid that the police could come at anytime, grab her and take her to hospital. She described her experience of hospitals as follows:

"I don't like hospitals because they drug me up and lock me up in a confined space ... The most terrible one was in Newtown (RPAH). I was put in the adult ward, but because these people have severe mental conditions all their lives, most of them were very violent. One woman picked a fight with me ... One guy poured hot coffee over my head and all over me, it was very painful ... Another guy was making sexual advances towards me and that's when they transferred me to the children's ward."

Since Sandi's release from hospital she had been staying with her aunt in Waterloo but the situation had proven unsuitable for her. Drugs were consumed in the house and some criminal activity also brought the police to the house and the area. As well, the children in the house teased her. She shared the three-bedroom house with two adults and six children. The shower and toilet did not work and she slept on the lounge. Besides needing maintenance and being overcrowded, Sandi described the house as "having too many drugs around". Marijuana and heroin were being used there and she sometimes felt tempted to take them. Alcohol however was not a problem in the household. She said, "they drink but they aren't alcoholics".

Sandi mentioned that she attended youth groups most Fridays. She said, "I go to this group for young teenagers with mental problems and they take us to movies and things ...". She reported to the interviewer that she sought advice from the youth service and her nurse. These people had known her and her family for years.

Sandi received a youth allowance, which was deposited directly into her bank account. She had no skills and did not know what kind of work she could do. She was considering taking a course offered at Centrelink that taught people the basic skills to obtain work in cafes. Before she became ill Sandi had been able to complete half of Year or Grade 9. She said that she would like to further her education.

Sandi believed that her health was good and she was taking her medication as prescribed. In the week following the interview she was to return to her grandmother's new house in the inner west area. She requested that the project workers check up on her and assist her settle back into her grandmother's house.

Case Study 9 (Eric)

Eric was a thirty-nine year old male originally from Bourke in the Far Western district of New South Wales. At the time of the interview he had been in his latest accommodation option for a year and a half. A friend was the head tenant for a five-bedroom rental house in Glebe where he was a boarder. Eric reported that he came to Sydney to study and improve his employment options, and that he preferred to stay there.

Eric stated that he had experience in Aboriginal housing and believed there was a homelessness crisis occurring among Aboriginal people, particularly singles. He also felt strongly about the issue of overcrowding in Aboriginal communities and households and commended the survey for reporting on this situation. Eric warned that other interviewees would lie rather than face reprisals over this issue, and thereby distort the image presented in the survey. The house he boarded in accommodated eleven people plus numerous visitors. Although they were all polite and considerate there was no privacy for the household's members, causing him to feel isolated. Sometimes the services broke down and the house was in need of much maintenance.

Also of significance, Eric felt that the questions asking interviewees to relate their life stories were too personal for many Kooris and would offend them. They would be cautious about answering fully. This man believed that it was just a matter of wording. Rather than using the term 'life story' the questionnaire should have simply invited people to talk about how they had gotten into their current situation.

Case Study 10 (Shaun)

Shaun was aged in either his late twenties or early thirties and was a chronic heroin user. His family had moved to Redfern from the country (although where was not revealed during the interview) to find work. And when he was released from prison, he went to stay with them to ease his re-entry into society. His drug use had put him frequently in prison, although whether he was committed for consuming drugs or stealing to fund his habit was also not specified. His family, headed by his mother (no father mentioned) had recently moved from Redfern to Glebe. However, she suffered from a serious mental illness that intermittently put her in hospital, and during these periods the family would disintegrate. His younger siblings were taken into care by the Department of Community Services (DoCS) and sometimes cared for by relatives.

The house where the family resided often had broken facilities such as toilet and shower, and was visited by people with drug and alcohol problems who would steal food on occasions. When Shaun's mother was ill and the family broke up, he had sometimes stayed on the streets.

Shaun understood that he was caught up in a cycle of drug abuse that centred on The Block in Redfern and resulted in his involvement in crime, alcohol abuse and violence. These things meant he was often pursued by the police and would go in and out of jail. He had a sister who was pregnant for the third time and had used drugs throughout each pregnancy. Her first two children were removed from her custody by DoCS and given to their grandmother. She first injected heroin when she was nine and now lives in dirty surroundings on The Block and never eats properly. Shaun also had a brother completing a fifteen-year sentence in prison that started when he was just fifteen years old. Shaun wanted to enter a rehabilitation program because he recognised that he needed to improve his life in order to assist his family. He needed support to help him through its early stages and to find out about the chances for furthering his education.

Shaun wanted to obtain a small house or unit for himself where he could re-establish his life and be self-sufficient. He had a two year old daughter who lived with her mother in country NSW, and he wanted to have the child visit and stay occasionally.

Case Study 11 (Margaret)

Margaret was a forty-six year old woman who moved to Sydney from Toomelah Mission near Boggabilla on the NSW/QLD border over 15 years ago to further her university education and gain employment. Once in Sydney she married and had five children, however she became the victim of domestic violence almost as soon as the relationship began. Eventually she and her husband divorced and he took custody of the children and possession of their rented house in Newtown. This occurred approximately ten years prior to the interview, and caused her to start consuming alcohol in excessive quantities.

To be close to her children and keep the family together Margaret said she had endured continuing violence from her ex-husband. He was now the head tenant of a Department of Housing unit in Waterloo where the entire family resided, with Margaret as a boarder. She revealed to the interviewer that soon before the interview took place threats she made to him about her making a complaint to the police had appeared to halt his violent behaviour. She felt that she and her children did not have the strength or personal resources to maintain a rental property themselves so had relied on her ex-husband.

Seven people lived together in the ex-husband's two-bedroom unit. One householder was not a family member. Of the problems enquired about in the questionnaire, Margaret said: that the unit was too crowded and received too many visitors; that only one of its toilets was working and that it urgently required other maintenance; and that some of the people who visited had severe problems particularly in relation to alcohol consumption. The interviewee hoped to access her own accommodation and live with her eighteen year old daughter for whose safety she was fearful living among so many alcoholics. This daughter would also be able to look after her with regards to her physical condition, which was exceedingly poor after years of alcohol abuse, domestic violence and poor nutrition.

The Department of Housing required that Margaret did six months of residential rehabilitation before they would provide her with housing. She felt trapped by this requirement, as she understood the importance of dealing with her alcoholism but felt she could not improve while living away from her children. They often looked out for her and took her home when she has been drinking heavily on The Block. The interviewer believes that Margaret would have lived a derelict's life without their efforts.

Review of Insecurely Housed Case Studies

The research discussed in Chapter 2 defines an overarching category into which certain 'homeless' people can be classified, which is termed 'at risk of homelessness or hidden homelessness'. A set of sub-categories is delineated headed by the insecurely housed and including those living in overcrowded and substandard dwellings, and the dysfunctionally mobile. What the case studies listed above reveal is that these issues are intertwined; they interact with one another over the course of people's lives.

With regards to insecurity of tenure, all of the case studies were essentially living as boarders (two lived as apart of a renting family), which is a circumstance inherently prone to change. A boarder's security relies on the behaviour of the head tenant, visitors and other boarders, and on the actions of the dwelling's owner. And with the Aboriginal community's cultural preference for visiting and hosting larger numbers of visitors for longer periods than the general Australian population, the actions of visitors are less subject to control. These people can also overburden services that were not designed for such high loads. Three of the case studies could be classified as residing in places where the stability of their situation was greatly uncertain and as having physical and mental problems that would make them particularly vulnerable to upheaval. Sandi (Case Study 8) had demonstrated this kind of vulnerability for a significant part of her young life. Her mother's mental disorder broke up her family and brought her to live with her grandmother in Sydney. And when that house burned down, her mental illness rendered her living situation precarious for two years. The effects of her illness and her failure to take her prescribed medication made her difficult to live with and this shifted her between a number of relatives and hostels. This unstable period meant that she had attained no more than part of a Year 9 education, had no work skills and was even less in a position to support herself. Similarly with Shaun (Case Study 10), his mother's mental illness and her periodic hospitalisation meant that his family was disbanded regularly, some of his younger siblings being taken into care by the Department of Community Services. Not only was it difficult to rely on his family when he came out of prison, but his drug addiction also made him vulnerable. While Eric (Case Study 9) had survived as a boarder for a relatively long period and, according to the information he provided, was in a stable situation, Margaret (Case Study 11) had to rely on the whim of a previously violent ex-husband for her accommodation, in order to be with her children.

Each of the Aboriginal people described in the above case studies were residing in overcrowded dwellings. As outlined in Chapter 2 the concept of overcrowding does not purely revolve around density but must incorporate both the numbers and characteristics of occupants that cause stress. In Sandi's case (CS8) her current arrangement saw her living with a number of children who teased her. The house also played host to numerous visitors with drug-related problems. Similarly Margaret (CS11), boarded with her ex-husband and their children, but the unit also received numerous alcoholic visitors.

She wanted urgently to obtain accommodation to enable her to live with her 18 year old daughter for whose safety she was concerned. Eric's case (CS9) further demonstrates the kind of factors that indicate a dwelling is overcrowded. He came to Sydney to study and improve his employment prospects, and felt that his overcrowded dwelling made him feel isolated and essentially homeless. Eleven people and numerous visitors occupied his house, and despite everyone being polite and considerate, there was no privacy for the household's regular members. Eric felt strongly about the issue of overcrowding in Aboriginal communities and households, and warned that other interviewees would lie rather than face reprisals from housing authorities over this issue.

With regards to substandard conditions, all of the case studies reported that their residences were in need of maintenance, had basic facilities such as toilets and showers that were not working or had been in urgent need of repair for an extended period in the past.

The number of the insecurely housed affected by alcoholism, drug addiction and mental illness was substantial, as was the case with the public place dwellers. One of the above case studies abused alcohol, while another abused heroin. And two of the four suffered from a serious mental illness. Not only had their condition and the difficulties involved in keeping to their medication regimes disrupted their lives, but also the similar disability of their parents had significantly compounded the instability of their living arrangements. Shaun (CS10), who fell into this latter category had a brother completing a 15 year jail sentence and a sister pregnant with her third child. During each pregnancy she had abused drugs, and was living in deplorable circumstances on the Block. Margaret's case (CS11) demonstrates the difficult situation people can find themselves in, particularly women, and how tenuous their accommodation arrangements can be.

CHAPTER 6: STRATEGIES AND RECOMMENDATIONS

Chapter Aims

The chapter will begin with a summary portrait of the Aboriginal homeless of inner city Sydney, both public place dwellers and the insecurely housed (hidden homeless), which draws on the information contained in Chapters 4 and 5. Following, the relevant findings from this study pertaining to service responses will be summarised under the relevant headings and a recommendation made at the end of each section. This section will draw largely on the information contained in Chapter 3, and where relevant Chapters 4 and 5. Together, these findings will generate a recommended strategy for addressing Aboriginal homelessness in inner city Sydney.

Portrait of Inner City Sydney Aboriginal Homelessness

The field research conducted as part of this study revealed that approximately six distinct Aboriginal homeless groups or 'mobs' operated in the inner city of Sydney. These groups were identified as the: (A) Redfern/Waterloo, (B) Newtown, (C) Central Railway Station, (D) City/Town Hall, (E) Kings Cross/Darlinghurst, and (F) Broadway/Glebe mobs. They quite frequently moved between areas, however, they largely operated within a set of clearly designated territories. They often functioned like a family unit, looking after one another's personal possessions and safety. Each one identified strongly with the society of its members and exhibited a political dynamic. Certain protocols had to be observed when entering or engaging with the different groups.

The majority of the Redfern/Waterloo mob (Group A) socialised and gathered at the Block and the Redfern Post Office. Many members slept rough at the Block, some constructing makeshift dwellings that were regularly removed by Council. Others made their way to family and/or squats around Newtown and Glebe. The key issues for the Block involved drug and alcohol consumption and drug-related crime. Most of the Newtown mob (Group B) were found to live in squats and frequently begged on King Street near the Newtown Square, and around Redfern railway station and its Post Office. They also socialised at the Square, the suburb's Post Office and on the Block. This group were considered a very tight knit family unit that shared all its resources. The majority were alcoholics. The Central Railway Station group (C) largely slept rough at Belmore Park, although some members slept in parks around Surry Hills and the city. Central Station was usually the first stop for transients arriving from outside of Sydney. While most moved off to find family and friends on the Block, some remained, particularly Queenslanders. The group was found to socialise and beg at Belmore Park and the railway station, but also in Newtown and Redfern. Again, the majority were alcoholics.

The City/Town Hall mob (Group D) slept rough at the Town Hall/Cathedral Square off George Street and in Hyde Park, also socialising in these locations. Some members slept at the Belmore and Domain Parks, while others were found begging at Circular Quay, Hyde Park and the Town Hall. Most were alcoholics. It was observed that some of this group socialised with people from their hometown or region. The Kings Cross/Darlinghurst group (E) slept at various places around the Kings Cross area, including Potts Point and Woolloomooloo. Some members were found sleeping under concrete car parks near St Mary's Cathedral, while others lived in squats around the city. Still more lived outdoors. They usually socialised and begged at Kings Cross and its railway station, Oxford Street and Taylor Square, and their main meeting place was the Wayside Chapel (refer Appendix 2 profiles). The group's members were not all Aboriginal, and most were heroin users. Some used speed and cocaine. A number of transvestites and transsexuals working along the Oxford strip were observed. They had arrived for the 2000 Olympic Games and stayed, and almost all were from north Queensland. The Broadway/Glebe mob (Group F) slept rough around the Broadway area or in squats around Glebe. They were found socialising and begging at Glebe Point Road, the Broadway Shopping Centre and at Central Railway Station. Those interviewed were alcoholics and had developed related mental illnesses. Group members mingled with other groups with medical conditions who gathered near the Royal Prince Alfred Hospital psychiatric ward and rehabilitation clinic.

Pathways Into Homelessness

In the following section a general description will be made of the homeless Aboriginal people interviewed for this study. It is followed by a discussion of a number of factors that lead people into homelessness and prevent them from being readily able to change their circumstances. These factors or influences are physical and mental illness, drugs and alcohol, violence and crime, insecure housing and racism. Insecure housing and its various forms are discussed as a pathway, as it is frequently these circumstances which drive people into public place dwelling or keep them in constant danger of it. Two final comments regarding young people and the concept of spiritual homelessness are made before the section's conclusion.

A clear majority of interviewees came from regional and rural New South Wales, a large proportion of them originating in communities inland from the east coast. Just over one fifth of respondents were from Sydney. As a destination, Sydney was thought to provide better chances for employment and education. Significantly, in leaving their home communities, people also sought the excitement of a large city and were drawn by the fame of the Redfern Aboriginal community. Some people were also escaping the turmoil being experienced in their home communities and the toll being taken by elders dying without anyone assuming their cultural roles and duties. A significant majority of the people from elsewhere preferred to remain in Sydney. Other things that attracted people into the inner city, included: (a) the existing homeless population with its valuable advice for newcomers, (b) an array of places to seek immediate shelter, and (c) the availability of a range of services compared to other areas, particularly those in rural areas. Examples of sought-after services included improved medical treatments, a greater range of long-term housing opportunities, and if people were waiting for these things, the extent of back-up services, such as shorter-term accommodation, meal provision and health clinics.

The homeless people interviewed could be categorised as either public place dwelling or insecurely housed individuals, the sample including 37 of the former and 16 of the latter. The majority were aged between 25 and 45 years, and were most often male. The older people were more likely to have been caught in their homeless state for longer. Public place dwellers were significantly more likely to have been in their situation for five years or more, while the large majority of the insecurely housed had been so for between one and a few years. The interview data also revealed that both categories of homeless people moved between these states during their overall homeless careers. The man and woman discussed in Case Study 1 (Chapter 5) fitted this pattern: Just prior to their interviews they had occupied a rented room from which they were evicted because of the drunken vandalism of the woman's boyfriend (this woman had also been encountered outside one of the area's large hostels one night, having failed to obtain a bed inside). Only two of the respondents who had lived rough in the past had also rented a room or been a tenant in a residential property in the past. None had ever actually been responsible for a lease. Only one of the public place dwellers interviewed had rented a room or boarded in the past. The remainder had been staying with friends or relatives when not living on the streets or in squats. This would suggest that public place dwellers have experience of a far more limited range of accommodation types than the insecurely housed. This may explain how some people are kept from full or extended periods of homelessness, as well as the converse.

Mental & Physical Illness

While the interview data revealed that almost a quarter of respondents had been diagnosed or were suspected of suffering from a mental illness, the researchers witnessed a greater incidence of this problem on the streets. Across all the Aboriginal homeless groups identified in the first section of Chapter 4, a large percentage had mental health problems. A significant majority were public place dwellers, and almost half of these had been so for five years or more. A specific mental illness described by a number of interviewees, depression, was often said to have been caused by the homeless experience itself yet appeared to receive little recognition from service agencies.

As well, just over half of the respondents declared they were suffering from a physical illness; the large majority being public place dwellers. The age group experiencing the highest incidence of physical illness was the 35 to 45 years olds. This research found that the majority of public place dwellers bought their food from local fast food shops, which was often combined with alcohol or drug abuse, causing an array of nutritional and other problems that affected the health of the homeless population.

Slightly fewer than 17% of respondents were both mentally and physically ill, the vast majority of these people being public place dwellers. The woman described in Case Study No. 1 not only experienced a number of ailments related to living rough in cold conditions, such as lung problems, but her homelessness had also made her depressed. This was made worse by unresolved feelings regarding the rape, which had brought her to Sydney and kept her away from her home community. This woman's cousin (also CS1), suffered a number of illnesses related to his alcohol consumption and life on the streets, in particular a psychosis that remained undiagnosed and untreated. All the interviewees suffering from a mental illness endured their conditions without medication or ongoing treatment.

People with this level of disability require close monitoring and support to enable them to change their circumstances. And many require assistance in the long-term to ensure they remained securely housed. Not only had their condition and the difficulties involved in keeping to their medication regimes disrupted the lives of the mentally ill homeless, but often the similar disability of their parents had significantly compounded the instability of their living arrangements. Case Study No. 10, whose mother suffered a serious mental illness that frequently hospitalised her and broke up the family, had a brother completing a 15 year jail sentence and a sister pregnant with her third child. During each pregnancy she had abused drugs, and was living in a deplorable circumstances on the Block.

Alcohol & Drugs

Across all the groups, the majority of the Aboriginal homeless interviewed were found to be alcoholics and/or addicted to drugs. The analysis of interview data revealed that proportionally almost twice as many public place dwellers as the insecurely housed were alcohol dependent, the large majority being men. And another significant majority of people who had been either homeless or insecurely housed for ten years or more were alcohol dependent. The proportion of drug addicted public place dwellers was almost three times that of the insecurely housed. And again a clear majority of drug users were men. Almost 14% of the total number interviewed was both alcohol and drug dependent, and nearly three-quarters of the people in this category had been public place dwellers for ten years or more. The male researcher reiterated that drug related earnings and dealings were a virulent part of the homeless scene in the study area.

The Chapter 5 case studies clearly demonstrate the destruction caused by alcohol and drug addiction, and most particularly the threat that these problems represent to obtaining and maintaining secure housing. Two of the eight interviewees depicted were confirmed alcoholics, and an additional one regularly consumed alcohol to socialise with her group but claimed she was not addicted. Two more were addicted to both alcohol and drugs and another two were addicted specifically to heroin. This means six to seven of the eight cases presented in Chapter 5 involved serious alcohol or drug abuse. One case study suffered a permanent mental impairment due to his heavy and long-term consumption of alcohol, rendering him vulnerable to attacks on the streets and reliant on the care of his cousin. To succeed in rental accommodation he would need a full-time, lifelong carer. Another had been a long-term alcoholic and had unsuccessfully attempted many times to beat his addiction. He suffered from a number of medical conditions related to this excessive consumption of alcohol, including pancreatitis, diabetes, epilepsy, and schizophrenia. Such a person would not be able to enter or maintain stable housing without ongoing support, and his related medical conditions would be costly to treat. One case study's experience of incest had left her unable to trust people so she did not seek advice or help. As a consequence she was sinking deeper into her addiction to drugs. It must be accepted that for people with a long history of drug or alcohol abuse, the path to stability will be long and must be attended carefully by outside support agencies, otherwise people will slip back into homelessness.

Violence & Crime

Many of the interviewees cited violence as being a serious risk to life as a public place dweller. Often the most valuable piece of advice exchanged by homeless people regarded a place to sleep safe from this concern. The male researcher described the situation of a number of female public place dwellers who were continually the victims of sexual and physical abuse at the hands of male transients. The Chapter 4 discussion of group identities revealed that this was a common pattern for how homeless women were treated. These women were intimidated late at night for money and sexual favours. One twenty-seven year old had suffered this kind of abuse for many years and had been assaulted in front of onlookers without being helped. She attempted to keep the location of her squats secret to prevent further attacks. Also, she had ceased taking her medication so endured the full symptoms of her mental illness, as well as being physically ill from years of poor hygiene and diet. The majority of women interviewed were on the streets either because of domestic violence or sexual abuse from a family member. This was not fully reflected in the interview data, which only showed about half of women in this situation (still a significant number). Certainly the lack of direct questioning regarding this matter will have influenced this result.

Over one quarter of respondents declared that they had either been recently released or had spent time in prison in the past. However, the male researcher stated that only two of the people he spoke to during the interview process had not spent time in prison at some point in their lives. Again direct questioning may have produced a clearer result.

Insecure Housing (Hidden Homelessness)

This research reiterates the fact that the issues of insecure tenure, overcrowded and substandard housing stock, and dysfunctional mobility are intertwined; they interact with one another over the course of people's lives. These factors combine with the other symptoms of disadvantage such as poor physical and mental health, or the reduced ability to cope with such difficulties, drug and alcohol abuse, and involvement with the criminal justice system to keep people teetering on the edge of a life of public place dwelling.

Many of the insecurely housed interviewed were living as boarders, a circumstance inherently prone to change. A boarder's security relies on the behaviour of the head tenant, visitors and other boarders, and on the actions of the dwelling's owner. And with the Aboriginal community's cultural preference for household visiting and hosting larger numbers of these visitors for longer periods than the general Australian population, the actions of such visitors are often

less subject to control. These people can also overburden services that were not designed for such high loads. Case Study No. 8 had demonstrated a vulnerability to upheaval caused by insecure housing and mental illness for a significant part of her young life. Her mother's mental disorder broke up her family and brought her to live with her grandmother in Sydney. And when that house burned down, her mental illness rendered her living situation precarious for two years. This unstable period meant that she had attained no more than part of a Year 9 education, had no work skills and was in no position to support herself. Similarly with Case Study No. 10, his mother's mental illness and her periodic hospitalisation meant that his family was disbanded regularly, some of his younger siblings being taken into care by the Department of Community Services. Not only was it difficult to rely on his family when he came out of prison, but his drug addiction also made him vulnerable.

As outlined in Chapter 2 the concept of overcrowding does not purely revolve around density but must incorporate both the numbers and characteristics of occupants that cause stress. Case Study No. 11 boarded with her ex-husband and their children, but the unit also received numerous alcoholic visitors. She wanted urgently to obtain accommodation to enable her to live with her 18 year old daughter for whose safety she was concerned. Case Study No. 9 further demonstrates the kind of factors that indicate a dwelling is overcrowded. The male interviewee came to Sydney to study and improve his employment prospects, and felt that his overcrowded dwelling made him feel homeless. Eleven people and numerous visitors occupied his house, and despite everyone being polite and considerate, there was no privacy for the household's regular members. This man felt strongly about the issue of overcrowding in Aboriginal communities and households, and warned that other interviewees would lie rather than face reprisals from housing authorities over this issue.

With regards to substandard conditions, all of the case studies reported that their residences were in need of maintenance, had basic facilities such as toilets and showers that were not working or had been in urgent need of repair for an extended period in the past. [Refer to the following discussion of young people for a further consideration of dysfunctional mobility.]

Racism

Both of the Aboriginal field researchers believed that racism played a significant part in the level of Aboriginal homelessness. Aboriginal people experience more discrimination from housing providers than the general Australian population, as well as having lower levels of literacy and numeracy. These factors keep people marginalised.

Young People

Both field researchers made a particular point of the need to consider how young people are drawn into homelessness and how it can affect their adult lives. Understanding this situation was seen as vital to halting the increase in homelessness in the study area. A suggestion was made linking paedophilia and the drug trade on the Block. Young people from around the state are drawn into drug use and then threatened into paedophilia and pornography. The male researcher described how homelessness and the social problems that help produce and perpetuate it work across generations. Parents can pass their drug habit onto their children but the example they set as drug dealers also has a huge effect. One case study provided a clear illustration of how a parent's lifestyle may affect his or her children. One of the men interviewed was concerned about his son, as he had not paid board or brought food into his residence and was squatting at Woolloomooloo. Community members had been making complaints about the young man and his father wanted to share a house with him and divert him from slipping into a longer term of public place dwelling.

Case Study No. 2 most clearly illustrates where homelessness or the risk of it can begin, and how dysfunctional mobility emerges and can lead to public place dwelling. This woman's circumstances also provide a stark warning about the effect which family violence and abuse can have on young lives, particularly when the levels at which these crimes are occurring in Indigenous communities throughout Australia are considered. Her case demonstrates the value of intervening effectively in lives where dysfunctional mobility and insecure housing are factors. The importance of dealing with violence is also highlighted by Case Study No. 1's situation where her rape drove her away from her home community, and compounds her current sense of despair at being homeless. Both these cases reveal the serious, life-changing repercussions from certain events that can occur when lives are already marred by disadvantage.

Another aspect of homelessness that affects children involves the number of people who have minor children for whom their situation prevented them from taking an active parental role. Where such children are cared for by relatives there is the potential for them to slide into dysfunctional mobility if the relatives are not properly supported. On many occasions people such as grandmothers or aunts step in to care for children but do not have the resources to provide a stable home. Not only are children's futures at risk, but also they must bear the psychological burden of being separated from their parents.

Spiritual Homelessness

The female field researcher believed that the Tent Embassy in Victoria Park and the way people were living in a form of shelter erected in a public setting represented a further homelessness category and a potentially useful field for considering such issues as spiritual homelessness. She also believed that the issue of 'Koori homesickness' needed to be more fully addressed. Such feelings added to the already depressed emotional state that Aboriginal homeless people find themselves in. The separation from family and community connections that these individuals experience can have serious effects on their mental health. This explains why people from elsewhere are known to congregate together; it can be very reassuring to talk to people one shares common knowledge of people and places with. The two basic points of introduction for Koori people are where a person is from and which 'mob' they belong to. Therefore people collect in a suburb like Redfern, to be near people known to them.

Conclusion

The discussion above illustrates the pathways people follow into homelessness. Often they are drawn to inner city Sydney by positive factors, because of a desire to better themselves through education or improved employment opportunities, or because of an ambition to live in a more exciting place. Often people leave their home communities for negative reasons such as the lack of opportunities and services, or the levels of violence and social upheaval being experienced there. Once in Sydney they can find their housing situation tenuous for a number of reasons. Sometimes a lack of pre-planning is involved or racism on the part of the rental market. And when congregating in Redfern where problems such as drug and alcohol abuse are severe, people can be drawn into these lifestyles. Once engaged, people can find it very difficult to extricate themselves from them. And a host of physical and mental ailments ensue. As people spend longer abusing alcohol or drugs and living rough with untreated physical and mental illnesses it becomes more and more difficult to find a way out of their predicament. Mental illness can drive people into homelessness as it severely destabilises families and lives. Domestic and family violence can also be a factor that directly brings most often women and children into homelessness. As is unsupported prison release. The above discussion highlights the kinds of homelessness that are hidden from view, and the numbers of people who experience overcrowding and dysfunctional mobility, as well as sub-standard housing conditions, and who are generally not included when the homeless population is being counted.

Pathways Out of Homelessness

All of the interviewees had been eager to find a solution to their homeless situation and none identified as voluntarily dwelling in public places. The research upon which Chapter 2 is based describes one category of people's homeless situation as voluntary, in that they had become habituated to public place dwelling and identified themselves with such a lifestyle. Some also maintained residences elsewhere, but lived rough to socialise and consume alcohol with friends and family in an external setting. These kinds of people operating within the study area would not have been recorded by the current study, which sought subjects who wanted assistance to change their circumstances. However, some of the respondents said that they may still choose to spend time socialising in the public place dwelling group with whom they affiliate, even if they were to obtain stable accommodation.

The interview data was generally less revealing about potential pathways out of homelessness. Respondents were not as forthcoming or knowledgeable about how others of their acquaintance had accessed and/or maintained stable housing. And the research team did not have the capacity to investigate whether the examples provided had truly remained in secure accommodation. The majority of interviewees that did respond to this question believed that people had received help through the NSW Department of Housing.

But certain conclusions can be drawn from the interviews and the pathways into homelessness that were identified. These can be considered in light of what previous research has revealed about successful strategies for dealing with Aboriginal homelessness. The case studies discussed above regarding young people reveal the importance of intervening early in situations where mental illness, unstable custodial arrangements or family violence are factors. And these are serious concerns considering the level at which they are occurring in Aboriginal communities throughout Australia. With regard to mental illness and the effects of long-term alcohol and drug abuse, the previous discussion shows that intensive case management and ongoing support is vital to keeping people affected by these problems in stable accommodation. It also reveals the social cost inherent in having people spend long periods of time as public place dwellers. A strategy to divert people from this course would be highly beneficial to the individuals themselves, but would also reduce the need to outlay lifelong support resources. Over two-thirds of respondents received either a disability pension or unemployment payments. This suggests that monetary support alone will not assist people out of homelessness. Brad Freeburn, the Aboriginal Medical Service's representative, reported that a potential barrier to people moving out of homelessness

characterised by substance abuse was created when people had to wait for rehabilitation accommodation after undergoing a detoxification program. This demonstrates that gaps between service providers can have a simple but powerful effect.

Another factor that was found to have influenced the homeless state of both the male Aboriginal researcher and a prominent local Aboriginal figure was the involvement of charismatic, commanding religious figures. Priests who provided not only practical support, but also spiritual and moral guidance helped both men out of homelessness. These figures and the religions they championed served as powerful influences in the men's lives. In some way these priests may have modelled some of the effective aspects of intensive case management, such as close attention to people's lives and making an effort to understand the things that have brought them into their current situation. But beside these features, strong religious figures maintain the moral strength to challenge people's feelings of weakness, anger and despair. People are told that such things are sinful or wrong in the eyes of God. This provides a channel and a focus that may be missing from a secular life.

Recommendations Regarding Service Provision

The need for appropriate Patrols and Outreach Services

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified 18 patrol or outreach services operating in the study area. Two targeted drug users, one employing an Aboriginal Health Education Officer and recently establishing an Aboriginal health and healing group. Only one service was run by an Aboriginal organisation. And an additional one employed Aboriginal street workers. The remaining 14 services did not specify if they had evolved methods or used techniques with the Aboriginal people that they encountered, or in fact how many they did meet in their work areas. Two services assisted sex workers and people with gender issues.

Recommendation No. 1.1: Trained and properly resourced Aboriginal outreach workers

Those that attended the August 2004 Reference Committee Meeting asserted that more trained Aboriginal counsellors or outreach workers are needed to maintain regular contact with the homeless, listen to their stories, give them hope, advise them and accompany them to service providers. A number of related issues must be addressed if this strategy is to be put in place. A source of recurrent, reliable funding must be identified. Also training and supervision must be provided (refer to later section regarding training for workers).

Recommendation No. 1.2: Investigate feasibility of Night Patrol

Both groups involved in the November 2004 workshop and the August Reference Committee Meeting agreed that whether an Aboriginal Night Patrol is feasible must be investigated. A number of difficult issues must be resolved before moving forward with such a proposal. For example, it must be ascertained whether or not the patrol would serve public place dwellers only or also address other problems on the Block (the latter being a difficult agenda). It would also require one or more strong Elders or older people for leadership. Finding such a strong leader could be a problem. The training, resourcing and support of someone who has already been carrying out this kind of work, as well as counselling street youth on a voluntary basis, should be considered. A Police representative reported that it would be easier for a Night Patrol to transport intoxicated Aboriginal people than the Police, as they would most probably encounter less resistance. Funds for vehicles, fuel and staff, as well as administration support must be located. Some Night Patrols that are run elsewhere are funded through the Crime Prevention Division within the NSW Attorney General's Department (eg Nambucca Heads and Kempsey) and local government provides for capital costs. There is the possibility that funding may be obtained from the NSW Department of Transport if the patrol became part of a 'transport strategy'.

Recommendation No. 1.3: Develop a Transport Strategy and Service

There are a number of services operating in the study area—such as Mission Beat run by Mission Australia—which transport people of all ages to various hostels and takes some young people to their homes. Some Aboriginal people report to the research team that this service is not as friendly to Aboriginal people as it could be. Funds could be provided to improve these kinds of services to homeless persons at-risk, or to train existing staff and employ Aboriginal ones, or to have such an organisation auspice a distinctly Aboriginal service. Both the November workshop and the August Reference Committee Meeting discussed additional aspects of a transport service that need to be considered. These include the transport of furniture to newly established accommodation (the female researcher states that there are many outlets for cheap furniture and household items but no free transport service available), transporting people to funerals and monitoring the activities of juvenile street gangs.

The need for Diversionary Strategies

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified ten diversionary services operating in the study area. The charitable organisations, such as Mission Australia and St Vincent de Paul, run a number of such services, which are linked to the others it provides (refer to 3.15 Holistic Approaches). This project's field research and service provider interviews have revealed that Aboriginal people do access a number of these services, however only one of the organisations have stated clearly that they deal with their Aboriginal clients in a manner different to their non-Indigenous ones. None appear to have informed their work with research into the way Aboriginal sobering-up centres¹ in other communities operate.

Recommendation No. 2.1: Aboriginal Sobering-up centre

While no specific mention of sobering up centres for Aboriginal people have appeared during this study, the research team believes a strategy for establishing such a facility for Aboriginal clients would be useful and could be linked to a night patrol or transport service. Separate locations or facilities for men and women should be considered. (Refer to Alcohol & Drug Strategies section below.) This could complement a managed Aboriginal Wet Centre² in the vicinity of the Block. The NSW Premier's Department and City of Sydney Council have been considering a designated Wet Area.

The need for appropriate Alcohol & Drug Strategies

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified 18 alcohol and drug services operating in the study area. One was run by an Aboriginal organisation, while another specifically targets Aboriginal alcoholics. The research team was unable to determine that any of the remaining programs had enunciated strategies or approaches for dealing with Aboriginal clients, except for those run by St John's Church in Darlinghurst (refer to Anglicare profile in Appendix 2). It was also unable to determine in most cases how many Aboriginal homeless people accessed the services.

To complement the program profiling exercise the research team drew on the information provided to it during a number of service provider/stakeholder workshops and interviews with organisation representatives. The Aboriginal Housing Company, the Aboriginal Medical Service, and the City of Sydney Council identified drug and alcohol problems and the drug-related crime in the area as key issues. The AHC reported that a cocktail of drugs, mostly amphetamine based, was widely used in the area, forming a lethal combination when mixed with alcohol. Another area of concern was the homeless youth at risk of becoming addicts and/or being targeted to become drug dealers or runners.

These concerns are significant as the research process found that the majority of interviewees did not use Alcoholics or Drug Anonymous services, and experienced great difficulty in entering rehabilitation programs. An interviewee from the Redfern/Waterloo mob (Group A) said she could not rehabilitate because she did not like how she was treated by program staff. She was quoted as saying, "I would like to attend out-patients rehab but I need a place because on the streets I just zonk myself out because of the cold and then I can't think straight to do anything".

Recommendation No. 3.1: Inner city Sydney Aboriginal Drug and Alcohol Residential Rehabilitation Service

All existing Aboriginal rehabilitation services are located outside the metropolitan area, for example, Orana Haven Hostel, Wyong, Benelong's Haven and Namitjia Haven. The establishment of an inner Sydney Aboriginal drug and alcohol residential rehabilitation service that can act as a 'halfway house' must be investigated. People could move from such a facility to the other outlying services. It must be ensured that people who have engaged in a detoxification process, usually lasting seven days are placed in a longer-term program or accommodation immediately. If people return to the streets they will re-engage in substance abuse. Also recommended in the AHC Social Plan was the use of Rachael Foster House, a disused building in the study area located close the Aboriginal Medical Service office, for this facility. Links with other services, such as Marrin Weejali in Emerton, are to be encouraged.

Recommendation No. 3.2: Additional funds to train and improve existing services

While the program profiling exercise did identify a number of short-term drug and alcohol facilities in operation in the relevant area of Sydney, none of these facilities appeared to have strategies for dealing with Aboriginal clients or encouraging them to utilise their services. Additional training could be provided to staff (refer later section regarding training and education for workers) from existing services regarding culturally appropriate treatment of Aboriginal clients. Incentives for employing Aboriginal staff with the relevant training could be introduced. Such steps may serve to improve the situation for the Aboriginal homeless in the study area with drug and alcohol problems until the Recommendation 3.1 is realised.

¹ Essentially a sobering-up centre is a Proclaimed Place under NSW state legislation to which intoxicated persons can be taken by the Police.

² Wet areas are designated by a local Council to allow the consumption of alcohol in a public place, normally for particular occasions such as a wedding in the park. A Council may elect to designate a certain public place as a "wet area" on an ongoing basis and nominate specific days and times when alcohol can be consumed there.

Recommendation No. 3.3: Link with the redevelopment of the Block

The AHC confirms that the benefits accruing from the Block's redevelopment would include: (1) improved services and activities for youth, as well as fewer numbers of youth at risk, (2) a decrease in criminal activity attributed to drug use, and (3) the discouragement of drugs and drug-dealers. Any drug or alcohol rehabilitation facilities should consider this redevelopment. [The formation of the Redfern Waterloo Authority was announced as this report was reaching its final drafting stage. The implications of the role and powers of this body for infrastructure and planning revitalisation of the study area have yet to be fully considered. Refer to Appendix 2 and the profile of the Redfern Waterloo Partnership Project.]

The need for appropriate Accommodation Options (Crisis or Emergency, Medium Term & Long Term)

While a strategy for improving the accommodation options of the Aboriginal public place dwellers of inner city Sydney is required, there are also important issues to consider with regard to diverting from homelessness the insecurely housed, whether these people are living in overcrowded circumstances, in poor quality dwellings or under conditions that make their tenure insecure. Not only must the different terms over which people need accommodation be considered, but also the kinds of users whether single men or women, childless couples, families or young people. The following section will describe the current situation as revealed by this study's research and then set out the kinds of facilities that are needed.

The various stakeholder workshops and reference committee meetings, the program profiling exercise and the interviews with homeless Aboriginal people all revealed that the existing accommodation facilities available to the inner Sydney homeless population were not widely used by needy Aboriginal people. Representatives from both the Mathew Talbot Hostel (run by St Vincent de Paul) and Campbell House (run by Mission Australia), two of the largest emergency accommodation facilities operating in the area, expressed such a concern. Aboriginal people made use of their day services such as meals or health clinics but did not widely utilise their accommodation options.

This study's interviews revealed that Aboriginal people avoided the kinds of facilities described above for a range of reasons: they did not feel welcome, thought they were treated impolitely or even in a racist manner, and believed their possessions were not cared for properly. [The issue of what happens to homeless people's meagre possessions, some having enormous personal value, is critical as will be revealed in the discussion below about Gathering Places or Drop-in Centres.] These problems outlined by the interviewees may be explained simply as the operation of cultural differences. Both the City of Sydney Council and Aboriginal Housing Company representatives reported a lack of culturally appropriate accommodation considering the area's high transient Aboriginal population. The representative from the Youth Drug and Alcohol Court stated that a lack of safe, appropriate and stable accommodation was a frequent problem confronting YDAC participants. The stories told by a number of interviewees also suggested that these facilities were often filled to capacity. Campbell House has received funding from DoCS to investigate the reasons for the lack of use of their facility by the Aboriginal homeless and the outcomes of this research should be followed up (refer Holistic Strategies below).

Four facilities run by Aboriginal Hostels were identified in the relevant Sydney area (refer Appendix 2 profiles). One at Marrickville was noted at a Reference Committee meeting (23/8/04) as having 12 beds and only 60-70% occupancy. Two others, the Tony Mundine and Chicka Dixon hostels had 90% occupancy. At this same meeting it was also noted that Aboriginal Hostels capital expenditure was planned in Sydney for 4 or 5 years, recurrent funding may be available through its 'Community Hostels Grants Programme' to assist a hostel accommodation type service with salaries for managers, cooks and security officers. A suggestion was also made at this meeting that SAAP or other funds could be used to pre-buy some beds in hostels for homeless people brought in by Night Patrol or Outreach Workers. However it was also noted that Hostels is reluctant to have its Managers responsible for more service provision as many street people exhibit a complex of problems related to addictions, and mental and physical health, and specialist staff are therefore required to assist them. Some staff could undergo this specialist training. This is an issue that will be considered under *Skills and Training for Field and Outreach Workers* and the strategic discussion following.

This study's research has also revealed that different types of Aboriginal people are being excluded or cannot locate accommodation appropriate to their situation. According to the Barnardos representative, very specific groups of people were being excluded from appropriate emergency accommodation, such as couples without children. These people frequently had to split up to find accommodation causing stress to adults who were already highly vulnerable and who found it difficult to cope or manage on their own. Also, families presenting to DoCS as homeless often had their children taken into care despite this not being in keeping with the current NSW Care and Protection legislation that requires families be kept together as a priority. The workshops and a Reference Committee meeting (23/8/04) also revealed that single Aboriginal men were lacking facilities. Two were considered appropriate. The interviews suggested that women needed facilities also. It was noted that most women's refuges only allow approximately three months of accommodation, so a medium term option was required. A diversionary hostel for Aboriginal youth was also required (refer to the Aboriginal Hostels ACT facility). While not all street dwellers would come together readily in one accommodation

facility and more than one facility would be useful, at the same time, there is a need to look at case studies that present a mix of managed accommodation types (one example mentioned in Melbourne).

Also of significance is the transgender, gay and lesbian, and sex worker segment of the Aboriginal homeless population. A number of services operate for these people in the study area, but none appear to have clearly defined strategies for making Aboriginal clients feel at ease with using their services. The Gender Centre Inc offers medium-term accommodation to people with gender issues, while the Twenty 10 Association deals with young gay and lesbian people. And the Women's and Girl's Emergency Centre offer assistance to many sex workers, 20% of whom it reports are Aboriginal. These are neglected segments of the Aboriginal homeless community whose needs must be addressed.

With regards to the issue of hidden homelessness, the Aboriginal Children's Service representative strategies must be devised that deal with the 'hidden homelessness' situation where families are living in overcrowded conditions and tenancies are insecure. It is important to allow Aboriginal families to provide short-term accommodation in crisis situations thereby creating an interim link with mainstream accommodation providers. As a result many Aboriginal children are being moved out of their families and into non-Indigenous care.

The Barnardos representative described a number of important issues related to hidden homelessness. Some were related to how DoH deals with families who have accrued a significant debt, and how it deals with young people who have good independent living skills and therefore do not require support, just accommodation. Without a support plan these people are refused housing. Aboriginal people were found to encounter racism from both the private rental providers and DoH. Also, Aboriginal people receiving the Newstart allowance experience difficulty with private rental agencies as they are not considered to have a reliable income. The Barnardos representative believed there was a serious lack of readily accessible information for Aboriginal people about housing rights. Problems were compounded when information is required over the telephone rather than face-to-face, when Aboriginal people often give up and remain homeless as a direct result.

Recommendation No. 4.1: Crisis Accommodation

The study area urgently requires culturally appropriate crisis accommodation facilities for all types of Aboriginal homeless people: men, women, families, youths and childless couples. The feasibility of mixing these types of people should be closely investigated to establish how many facilities are actually required. In the meantime resources should be provided to some of the existing services to provide improved assistance to Aboriginal people. Particularly the needs of women escaping domestic or family violence must be provided for with a shelter. The Mudgin-Gal Drop-in Centre could be funded to assume this role as it already succeeds in providing comfort and services to local Aboriginal women.

Recommendation No. 4.2: Medium and Long Term Accommodation

Solid links must be provided for people moving between crisis accommodation and successful medium and long term accommodation options. More medium term options for women are required. It must be ensured that people are supported throughout this journey. Again, existing services could be funded to provide a more culturally appropriate service to Aboriginal clients. The CRASH program and its efforts should be engaged further [Refer to Appendix 2 profile]. The social planner with the City of Sydney Council could consider exercising special Local Environmental Plans to achieve short and medium term accommodation in vacant buildings.

Recommendation No. 4.3: Review of current AHO programs

The current programs that the Aboriginal Housing Office has operating need to be evaluated to consider how they might assist with the issues of hidden homelessness.

Recommendation No. 4.4: Transgender, gay and lesbian, sex worker services

Assistance must be provided to these groups of Aboriginal homeless people. The existing services may be resourced to improve or enhance their services to Aboriginal clients.

The need for appropriate Dedicated Service Centres and Gathering Places

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified 20 dedicated service centres or gathering places operating in the study area. Four were specifically for women, one being run by an Aboriginal organisation and targeted at Aboriginal homeless women and another also targeting girls. One further centre focuses its services on young people. The other centres provide services and utilise strategies of client interaction that would be readily translated to use with Indigenous clients. Two of the services address the needs of transgender individuals as well as gays and lesbians, while a further one assists sex workers.

The field researchers commented on the importance of a drop-in centre or gathering place for homeless Aboriginal people to visit and collect information about services specifically targeted at their needs. This was reaffirmed by Brad Freeburn

from the Aboriginal Medical Service. He said that Aboriginal country people would frequently arrive in Sydney at around 4:30pm on Friday afternoons with few resources and no accommodation plans, and seek help at the AMS offices in Redfern. The female researcher highlighted the vital role played by networks of homeless people exchanging information pertaining to safe shelter, available food, police tolerance and other personal items. The most important information involved violence: where it had recently occurred and what its intensity had been. Having this knowledge forearmed people living rough, as personal safety was where they were most vulnerable. This researcher also remarked on the importance of homeless people being able to use a postal address for dealing with government agencies such as Centrelink, the Department of Housing and Medicare. Without a reliable postal address they experienced great difficulty corresponding with these groups and making their way out of homelessness. There is a problem involving people waiting for a DOH letter of invitation to rent after being on the waiting list for months or perhaps years. They have only seven days to accept; and if the letter is not received in time, then they miss out on the offer and are returned to the waiting list for another period of several years. The researcher also underlined the value of lockers where homeless people could keep their meagre possessions, which are constantly at risk of being damaged or stolen on the streets. Not only can valuable correspondence and identification details be lost, but also possessions of great personal value can be destroyed, making the despair of homelessness worse.

Recommendation No. 5.1: Establishment of an Aboriginal Drop-in Centre

Possibly two Aboriginal drop-in centres, one specifically for women are required as a high priority. They must provide showers, laundry facilities, counselling and relaxation facilities such as a television. This was reinforced by the August 2004 Reference Committee Meeting. They must also provide postal facilities as recommended above. A drop-in centre should assist the network of information among homeless people described above. It must also provide lockers. The Station (refer Appendix 2 profiles) provides about forty lockers for which there is a six-month waiting list. The possibility of establishing such a facility in the Rachael Foster Hospital premises should be explored (refer to the Alcohol and Drug Rehabilitation recommendation above). [Refer to the Redfern Waterloo Partnership Project entry in Appendix 2 for information on the newly formed Redfern Waterloo Authority.] The Mudgin-Gal Centre already provides some of the services described above to Aboriginal women in the study area. It could be resourced to extend these services and target homeless women.

The November 2004 workshop evolved a general principle, which it would be important to apply to how any Aboriginal drop-in centre operates. There is a need for a sensitive space to be created, both physical, social and mental, where relatively free of external pressure, homeless people can absorb information, obtain counsel, reflect on their circumstances, formulate goals and then seek assistance to find a pathway out of their predicament. This idea is illustrated in the following Figure (6):

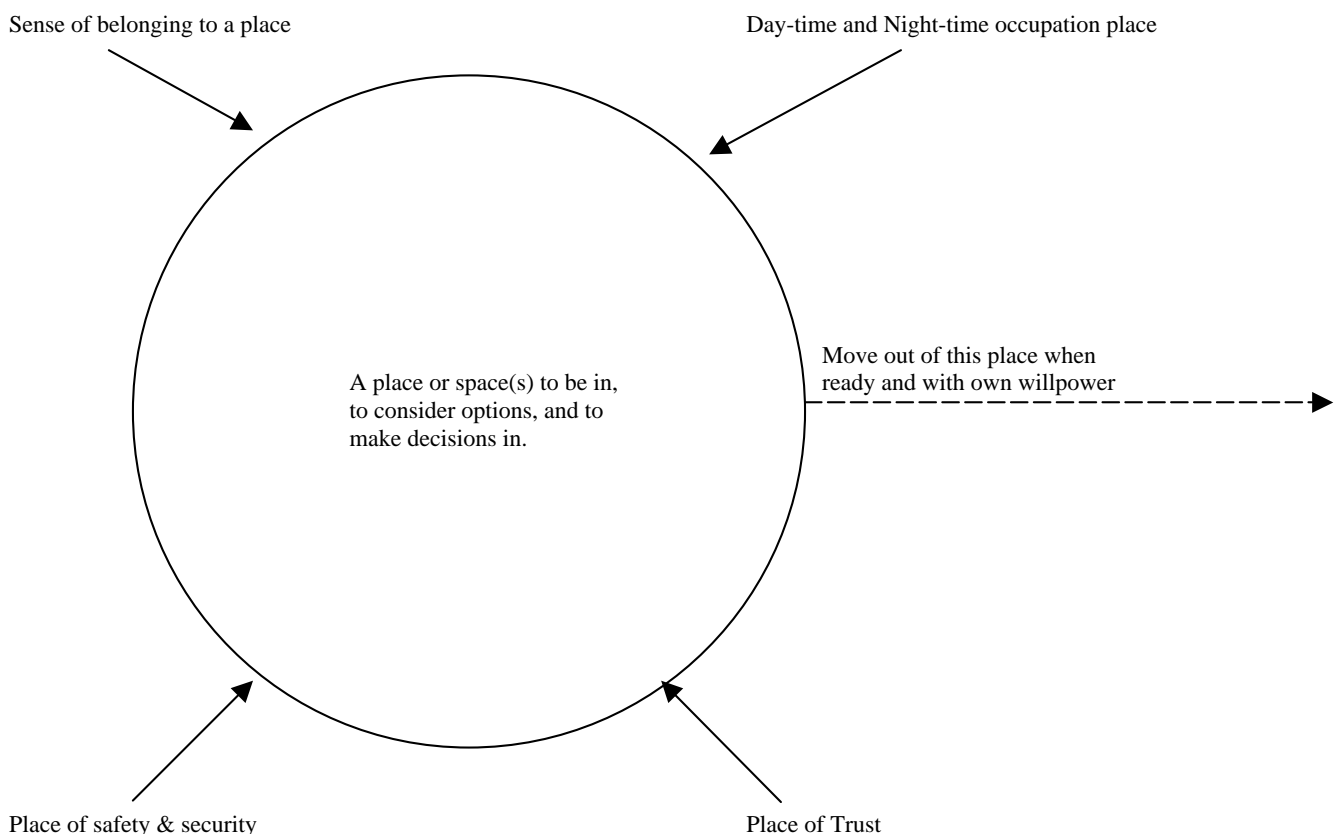


Figure 6: A schematic diagram expressing the need for an Aboriginal person to have a secure and culturally appropriate space from which to plan their pathway out of homelessness. (Adapted from a sketch by Gavan Mate of Centrelink, 1/11/04.)

Recommendation No. 5.2: Establishment of Wet Areas

The establishment of wet areas must be further researched and considered. The Lord Mayor (Clover Moore) has initiated discussions on setting up such centres in Surry Hills for example. These efforts should be seen as part of a wider set of solutions to the Aboriginal homelessness crisis occurring in the study area.

The need for appropriate Physical Design of Public Places

The City of Sydney's operations and philosophy reflect the aim of the NSW State Government's 'Homeless Persons Protocol', a key principle of which is the right for people to be in a public place. Also implicit in this policy is the idea that people may sleep in public places and should not be harassed or moved on from these places. The City's external staff, for example parks officers and City rangers, work closely with homeless people and local homelessness services to ensure that people who are sleeping on the streets are treated with respect and dignity and are offered assistance in relation to accommodation, support and health services, where appropriate.

Recommendation No. 6.1: Ensuring public place dwellers have access to basic public amenities

Despite the above principle, the City of Sydney does not appear to have considered designing public places with the homeless and their needs in mind. A number of interviews revealed that through removing access to public toilets, the City Council was attempting to reduce the use of certain city parks by homeless groups. Such an approach could be reconsidered; however the issues of safety and hygiene need to be investigated in parallel.

The need for better access to Phone-in Services

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified six phone-in services operating in the study area. None were specifically targeted at Aboriginal people or run by an Aboriginal organisation. One focused its services toward women escaping domestic violence. The male researcher reported that he had witnessed homeless people affected by drugs or alcohol attempting to use the pay phones available to them. They were often unable to connect to the relevant services before their money ran out. A related comment was made by the Barnardos representative who said that Aboriginal people often find using the phone to contact services regarding their problems intimidating and will remain homeless or at risk.

Recommendation No. 7.1: Link between phone-in services and outreach workers

Outreach workers must be trained to provide assistance with the relevant phone-in services that are available. This will reduce the impact of the issues discussed above. Consider providing an Aboriginal Drop-in Centre with a freecall number to allow it to provide over-the-phone assistance.

Skills and Training for Field and Outreach Workers

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified eight training programs for field or outreach workers that were available to service providers in the study area. None were specific to Indigenous people, however two dealt with the skills necessary for assisting people with gender issues and gay and lesbian people. A further program provided training to workers in the women's refuge and domestic violence field.

Recommendation No. 8.1: Develop and run training program for workers dealing with Aboriginal homeless people.

A program must be developed to train outreach workers who deal regularly with street dwellers. A training course for outreach workers and street police should include the following topics:

- First Aid
- Public place dweller lifestyle (street group identities and territories).
- Human management issues (the dynamics of homeless groups, particularly Aboriginal ones)
- Streetwise behaviour (including street language).
- Available homelessness services.
- Drugs and drug use by street people.
- Recognising medical problems and appropriate responses (particularly mental health issues).
- Legal rights and procedures in public place contexts.
- The role of police, interaction protocols.

- Aboriginal cultural awareness and sensitivity.
- Aboriginal cultural and language groups (emphasis on NSW and eastern states) understanding where homeless people come from.
- Aboriginal history and politics in NSW generally.

This program could also be supplied to non-Aboriginal workers to improve their understanding of the circumstances people find themselves in and the concept of spiritual homelessness. Staff that manage accommodation facilities and drop-in centres require specialist training also. Having these programs run by the AMS should be investigated. There is a need to develop a pool of outreach workers. One key aim of training would be to strengthen the cultural identity of Aboriginal fieldworkers and help them gain the necessary self-confidence and cultural skills to carry out their work. An allowance should be made for ongoing training and improvement of skills. Linkages should be pursued with the organisations listed in Chapter 3 that provide training to people with gender issues and gay and lesbian homeless youth. Also the organisations (refer Appendix 2) that deal with sex workers should be linked into any training program. An investigation of which organisation or education agency can develop such a training scheme must be made. In the future a drop-in centre could provide the base for such courses, and literature could be distributed there that contains much of what should be included in them.

The need for Partnerships & Holistic Approaches

The listings of relevant programs or strategies under the 15 service response category headings provided in Chapter 3 identified seven programs or organisations that actively facilitate partnerships in their work with the homeless. A further 15 programs that take a holistic approach to the issue of homelessness and operate for people residing in the study area were identified. These two service response types are being considered together as holistic approaches rely greatly for success on the operation of partnerships between agencies.

Of particular relevance to the aims of this study is the Redfern/Waterloo Partnerships Project, which represents a government-sponsored effort to respond to the vital social issues of those particular inner Sydney suburbs that have large Indigenous populations. The anticipated role of the Redfern Waterloo Authority, which was announced as this project drew to a close in late 2004, must be considered in light of the homelessness issues raised in this report. Also of great importance is the NSW Government's *Partnerships Against Homelessness*. Many of the non-government groups that work with the homeless, particularly the charitable organisations whose work touches upon the full scope of people's lives, recognise the value of taking an holistic approach, as well as forming partnerships with other agencies. They enact this through their case management approaches and philosophies. The research team determined that even those groups that have a more limited remit still recognised that other issues were involved and must be addressed before change can occur.

Recommendation No. 9.1: Coordination of Aboriginal homeless services

What is apparent, from not only the review of partnership programs and holistic approaches, but also the wider profiling exercise, is that a lead Indigenous agency or body that might drive any holistic approaches to the issue of Aboriginal homelessness in the study area is missing. The August 2004 Reference Committee declared the need for a Regional Plan for Inner-City Homelessness, approved by the NSW Department of Aboriginal Affairs, that links all State-based services—including the Aboriginal Housing Office, the Department of Community Services, the Justice and Transport Departments, and the Police—with relevant Aboriginal services. And the Commonwealth Department of Families and Community Services and the Local Government (City of Sydney) must be partners. A November 2004 workshop elaborated that an overall coordination strategy was required. The responsibility for coordination could be with the Premiers Department, as this is its role. However an Indigenous coordination centre or team, based in the community-controlled groups from the area, would be desirable.

To achieve the goal of coordinating services, and thereby to allow holistic approaches to operate fully, a structural planning group must be established. The August meeting suggested the following model. A Partnerships Against Aboriginal Homelessness Committee with the Department of Housing as the lead agency would oversee all efforts. The existing Advisory Committee, as well as the existing Reference Committee, formed as a part of this study and including service providers and government agencies should be maintained. The Reference Committee could steer the directives of the overarching group. Its membership must be boosted to include representatives from each relevant Aboriginal organisation in the area to ensure ownership is shared. The relevant organisations to consider include:

- Aboriginal Housing Company
- Aboriginal Children's Service
- Aboriginal Medical Service
- Regional Aboriginal Housing Committee (RAHC) of DOH
- Mac Silva Centre
- Crossroads Refuge

- Kinchela Boys Home Committee
- Aboriginal Legal Service.

Further, the remit of the overarching *Partnerships* committee would be to ensure that work is not duplicated. For example, the research from Campbell House's investigation of the barriers preventing Aboriginal men using their facility should be accessible to others and be used to inform any future strategies. It should also consider the methods and means by which to resource smaller organisations to form partnerships with other agencies. A number of charitable organisations, such as Mission Australia, St Vincent de Paul, the Salvation Army and Barnardos, operate a range of programs that seek to address the various issues involved in the homeless experience. These organisations and the coordinated effort required to take a holistic approach could serve as useful models for addressing Aboriginal homelessness in the study area. However, more programs are needed with an Aboriginal focus and understanding of the spectrum of disadvantage they occupy. Also the NSW Government, through its *Partnerships Against Homelessness* initiative, has demonstrated its understanding of the importance of a whole-of-government approach. It should play a key role on the overarching committee.

The City of Sydney and its Homelessness Services have demonstrated some best practice efforts at addressing the problem of Indigenous homelessness that should be investigated further. It has: (a) convened an Aboriginal Homelessness Workers Network to better coordinate the provision of services and accommodation options for local homeless people; (b) ensured that its parks staff work in cooperation with homeless people in managing the public domain, recognising the fact that people have a right to reside there; and (c) has developed a draft City of Sydney Homelessness Strategy.

An alternative approach would be to utilise current SAAP-funded service agencies (mainstream) to provide Aboriginal-specific services (refer recommendation in Ombudsman's Report).

Recommendation No. 9.2: Inventory of relevant services

It is essential that an inventory of services relevant to the Aboriginal homeless population of inner city Sydney is maintained and made available to workers who come in contact with Aboriginal homeless people. [Note: The webpage <http://www.db.ndri.curtin.edu.au/browproj.php> provides a listing of the entries in the Database on Indigenous Australian Alcohol and Other Drugs Project run by the National Drug Research Institute. This is a useful location to browse for other relevant programmes.] Such an inventory would be an essential tool for a Steering Committee attempting to make sensible planning decisions.

Categories with no Strategies

For a number of service response categories, the research team has not devised any strategies. These include: Legislative and Police Approaches, Addressing Anti-Social Behaviour, Philosophies of Client Interaction, Regional Strategies and Education Strategies for Non-Indigenous People. Only three examples of programs addressing anti-social behaviour were identified by the research team, all targeting young people. However, only one catered for the cultural needs of Aboriginal homeless youth. The kinds of strategies envisioned under this category heading included cultural protocols such as those developed in Alice Springs by the Tangentyere Council (Sitting Down Good in Alice Springs) and in Darwin by Larrikia Nation (refer to the report Memmott & Fantin 2001). These protocols were targeted at visitors and their negative behaviour. They would be difficult to draft in the context of inner city Sydney as the complexion of groups is more diverse. They also rely on an education campaign that is initiated in home communities, however few of the homeless interviewed for this study wished to return to their communities of origin. Eleven examples where appropriate philosophies of client interaction were being enacted were listed in Chapter 3. Three were run by Aboriginal organisations. Five more had initiated strategic approaches to dealing with the needs of Indigenous clients. The themes of trust and cultural inappropriateness arose continually when the people interviewed discussed why the Aboriginal homeless did not access the many other services available in the area. Therefore it would be useful to pursue such a strategy for this further. Regional Strategies were not developed due to a widespread unwillingness to return to home communities. And finally with regard to education strategies for non-Indigenous people. Daniel Thorpe, the City of Sydney's Social Planning Coordinator, described a great deal of conflict and disharmony existing between non-Indigenous people and the Indigenous homeless population of the study area. This suggests that developing these kinds of strategies could prove useful in reducing such tension.

Note Regarding Mental Illness Strategies

Given the number of homeless people suffering from a mental illness, as asserted by the research staff and a number of service providers, the research team was unable to document a clear regard for what this means in terms of people's ability to help themselves by completing such tasks as attending meetings and replying to correspondence. There may be a need for this issue to be assigned a specific response category. Brad Freeburn of the AMS concurs that mentally ill

people are treated poorly by the medical and government establishment. Not only can its trials lead a person into homelessness, but these difficulties can also keep them there. People suffering with mental illness require ongoing support to help them maintain stable accommodation, and this fact requires attention and related funding.

Researchers Evaluate Effectiveness of Research Approach

The female researcher reported that the survey was positively received by everyone she had encountered. People in need were eager to participate in the interview process. The male researcher also recounted that awareness of the survey had been widespread. He said that certain people had been very reluctant to be questioned about issues and episodes from their past lives as these were painful and elicited a range of strong emotions, particularly anger and resentment. He went so far as to say that some homeless people found these kinds of questions insulting because they had been unable to forgive people or groups who they perceived had caused them past trouble. He also noted that a number of people avoided being involved in the study, such as sex workers and transgender people. From what he had seen during both his recent survey work and general experience over twenty years, the number of homeless Kooris in inner Sydney had increased tenfold and equalled the numbers of non-Indigenous people living rough. He believed that there were many Indigenous public place dwellers who would avoid being counted or interviewed because they had lost faith in the Aboriginal organisations that were meant to assist them, believing that they only served people from certain families. The comment was also made that people under the age of 18 were not interviewed, despite the fact that they form a significant proportion of the homeless population. While it is important that their special needs and circumstances are considered, it also important that they be included in the overall picture of Aboriginal homelessness in the study area.

The female researcher described the study area as accurately encompassing the key parts of metropolitan Sydney where Aboriginal homelessness occurs. However, she believed that it was difficult to count the numbers of homeless people in the area because of the shifting nature of the population. This researcher also emphasised that even the number of the area's Aboriginal residents was not known because they were reluctant to give information as part of the Census. With regards to the people who would fall into the insecurely housed category, the researcher stated that they "are often incorporated into insecure housing with relatives, friends and any community shelters available" when counts are conducted, and the statistics do not reflect the actual numbers of people without appropriate and secure housing. These comments concur with the relevant discussion contained in Chapter 2 regarding categories of Indigenous homelessness.

Summary of impacts of existing services (effects and non effects)

The research team discovered that Aboriginal homeless people do not use the mainstream accommodation services, such as those run by the major charitable organisations, to a great extent. They access day services such as health clinics and meal, and to an extent use overnight accommodation facilities, but they do not participate in their longer-term accommodation and rehabilitation services or programs.

The field researchers revealed a number of instances where the practices of government departments form barriers to people exiting their homeless situations. The Department of Housing requirements regarding responses to offers of accommodation being submitted within seven days do not take account of how homeless people live and the difficulties they encounter with receiving and responding to official correspondence.

Summary of the recommended Strategy to alleviate Aboriginal homelessness

This study recommends that a coordination team be assembled to ensure that holistic approaches, relying heavily on partnerships between existing service providers and agencies, are enacted to assist the Aboriginal homeless population of inner city Sydney. This coordination team should comprise of an overarching Partnerships Committee that includes all the relevant State and Commonwealth government agencies, and a Steering Committee comprised of the relevant Aboriginal organisations operating in the area, as well as other mainstream services. The Steering Committee should be led by the Aboriginal agencies to ground it firmly in the concerns of the local community. This coordination team should supervise the creation of a number of culturally appropriate services, such as a range of accommodation options and a number of drop-in centres. Such facilities could serve as the bases from which the other elements of a homelessness strategy could operate. These other elements include a trained team of outreach workers, and in-house case management and counselling staff. It must be ensured that when people move between steps in the overall process, for example when they move from crisis accommodation into a drug rehabilitation program, they are not forced to return to the streets. Services for women and children escaping family violence must be improved, as should those targeting transgender individuals, sex workers, and gay and lesbian people. The effects of mental illness must be given more expert attention in terms of the services provided to the homeless. A solution for the short to medium term may be to fund mainstream organisations to improve their services to the Aboriginal homeless. Each recommendation from the above discussion is listed below:

- No. 1.1: Trained and properly resourced Aboriginal outreach workers
- No. 1.2: Night Patrol
- No. 1.3: Transport Strategy and Service
- No. 2.1: Aboriginal Sobering-up centre
- No. 3.1: Aboriginal Drug and Alcohol Residential Rehabilitation Service
- No. 3.2: Additional funds to train and improve existing services
- No. 3.3: Link with the redevelopment of the Block
- No. 4.1: Crisis Accommodation
- No. 4.2: Medium and Long Term Accommodation
- No. 4.3: Review of current AHO programs
- No. 4.4: Transgender, gay and lesbian, sex worker services
- No. 5.1: Establishment of an Aboriginal Drop-in Centre
- No. 5.2: Establishment of Wet Areas
- No. 6.1: Ensuring public place dwellers have access to basic public amenities
- No. 7.1: Link between phone-in services and outreach workers
- No. 8.1: Develop and run training program for workers dealing with Aboriginal homeless people.
- No. 9.1: Coordination of Aboriginal homeless services
- No. 9.2: Inventory of relevant services

BIBLIOGRAPHY ON INDIGENOUS HOMELESSNESS

- Aboriginal Drug and Alcohol Council (SA) 2001 "Dry Area Declaration in Adelaide," *Newsletter of the Aboriginal Drug and Alcohol Council (SA) Inc.*, Edition No.4, Autumn, p.2.
- Aboriginal Housing Company. 2003 *Community Social Plan: Pemulwuy Reconstruction Project*. Sydney: AHC. (Prepared by Angela Pitts.)
- Adelaide Capital City Committee, 2002, "Adelaide City Dry Zone Trial", www.capcity.adelaide.sa.gov.au/projects/projects_details.asp?ID=250, accessed 25/11/02.
- Adelaide, Inner City Administrators Group 1999 "Revealing the Hidden City, Responding to Poverty in Central Adelaide", Adelaide City Council, Adelaide.
- Adelaide City Council n.d. "Homeless in the City: Explaining Myths & Facts", Adelaide City Council in cooperation with the City Administration Group, Adelaide, http://www.adelaidecitycouncil.com/ACCPolicies/Brochures/Homeless_In_The_City.pdf www.adelaidecitycouncil.com/ACCPolicies/Brochures/Homeless_In_The_City.pdf.
- Allwood, D. & Rogers, N. 2001 *Moving Yarns: Aboriginal Youth Homelessness in Metropolitan Adelaide* (Research Paper). Department of Human Services, Government of South Australia, Adelaide.
- Anon. 2000 "Railway Dam: How Aboriginal People are Being Thrown out of their Home in Darwin City". <http://www.ozemail.com.au/nnc95/larrakia/railway.htm>, October 17.
- Anon. 1997 "Meerindoo: Making Choices, Getting Respect", in *Parity*, Vol. 10, Issue 4, p.10.
- Ashbourne, R. 2000 "Adelaide Alcohol-Free Plan Draws Angry Claims of Racism", in *The Age*, Adelaide, September, http://www.country-liberal-party.com/pages/hotels_p7.htm.
- Australia, Commonwealth Advisory Committee on Homelessness (CACH) 2001 *Working Towards a National Homelessness Strategy* [Consultation Paper.] Commonwealth Department of Family and Community Services, Canberra. ISBN 0 642 77012 3. [Held by AERC.]
- Australia, Department of Aboriginal Affairs and Dept of Community Development 1980 "Darwin Aboriginal Fringe Camps – A Discussion Paper", Darwin, 25 January.
- Australia, Department of Families and Community Services (FaCS) 2003A *SAAP – the supported accommodation assistance program*. [Page last viewed at http://www.facs.gov.au/internet/facsinternet.nsf/aboutfacs/programs/house-saap_nav.htm on 03/02/03.]
- Australia, Department of Family and Community Services (FaCS) 2003B "National Homelessness Strategy-Demonstration Project Application Documentation." [Document last viewed at http://www.facs.gov.au/internet/facsinternet.nsf/aboutfacs/programs/house-nhs_projects_demo_applic.htm on 27/02/03.]
- Australia, Commonwealth Grants Commission [Indigenous Funding Inquiry Submission], South Australian Treasury and Finance www.cgc.gov.au/IFI_Submissions/IFI-SUB-0010.pdf
- Australia, Commonwealth Parliament. 1994 "Supported Accommodation Assistance Act 1994." [Document last viewed at <http://scaleplus.law.gov.au/html/pasteact/2/1179/pdf/SuppAccAss94.pdf> on 04/03/03.]
- Australia, HMAAC Standing Committee on Indigenous Housing. 2001 *Building a Better Future: Indigenous Housing to 2010*. NSW Aboriginal Housing Office for HMAAC. ISSN 1446-0416.
- Australia, HMAAC Standing Committee on Indigenous Housing. 2002 "Workplan for 2002", HMAAC Meeting, 7th March, Agenda Item 3.4.1, Attachment 2, Canberra.
- Australia, HMAAC Standing Committee on Indigenous Housing 2003 "nugalngul biik nugalngul willum (our own land – our own home)". Presented at Proceedings of the National Indigenous Homelessness Forum, held 4th and 5th March, Melbourne, Victoria.
- Australia, HMAAC Standing Committee on Indigenous Housing 2003 "Proceedings of The National Indigenous Homelessness Forum", held 4th and 5th March, Melbourne, Victoria.
- Australia, National Rural Health Policy Forum & National Rural Health Alliance 1999 *Healthy Horizons: A Framework for Improving the Health of Rural, Regional and Remote Australians Report*. [Last viewed on 19/02/03 at [documents/publications/country-disability-services/healthy-horizons-sa-report-2001.doc](http://www.health.gov.au/hsdd/horizons/index.htm) <http://www.health.gov.au/hsdd/horizons/index.htm>]
- Australian Broadcasting Commission (ABC) 1992 "The house that Brisbane built. Part 3". [Sound recording], ABC, Sydney.
- Australian Broadcasting Commission (ABC) 1999 "Homelessness architectural forum & Madhur Jaffrey's food and war". [Sound recording], ABC, Sydney, NSW.
- Australian Broadcasting Commission (ABC) 2002 "Council to Vote on Aboriginal Name for Victoria Square," http://abc.net.au/message/news/stories.ms_news_564031.htm
- Australian Bureau of Statistics 2001 *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples*. ABS (Catalogue No. 4704.0). Aboriginal and Torres Strait Islander Health and Welfare Information: A joint program of the Australian Bureau of Statistics (W. McLennan) and the Australian Institute of Health and Welfare, Canberra. ISSN 1441-2004
- Australian Housing and Urban Research Institute (AHURI) 2002 "AHURI's Research Agenda 2002: 7 - Indigenous Housing." [Page last viewed at http://www.ahuri.edu/research/agenda/theme7_2002.html on 27/02/03.]
- Australian Housing and Urban Research Institute (AHURI) 2003 "AHURI Research Agenda 2003." [Document last viewed at http://www.ahuri.edu.au/attachments/agenda_2003.pdf on 27/02/03.]
- Australian Institute of Health and Welfare 2000 *SAAP National Data Collection: Annual Report 1999-2000, Australia*, AIHW Cat. No. HOU50, Canberra, AIHW (SAAP NDCA Report, Series 5).
- Australian Institute of Health and Welfare 2002 *Homeless People in SAAP: SAAP National Data Collection Annual Report 2001-02, Australia*, AIHW Cat No. HOU72, Canberra, AIHW (SAAP NDCA Report, Series 7).
- Australian Institute of Health and Welfare 2002 *Demand for SAAP Assistance by Homeless People 2000-01: A Report from the SAAP National Data Collection*, AIHW Cat. No. HOU71, Canberra, AIHW (SAAP NDCA Report Series 6).
- Australian Film Institute 1983 "Munda Nyuringu [videorecording]: he's taken the land, he believes it is his, he won't give it back". Lindfield, New South Wales, assisted by Department of Aboriginal Affairs.
- Beechey, B. 2000, "Opposition grows to Inner City "Dry Zone", www.greenleft.org.au/back/2000/430/430p5b.htm.
- Berry, M., MacKenzie, D., Briskman, L. & Ngwenya, T. 2001 "Victorian Indigenous Homelessness Study", prepared for the Aboriginal Housing Board of Victoria.
- Brisbane City Council 2001 "Draft Evaluation Report - New Farm Park Designated Space for Homeless People". B.C.C., Brisbane.
- Cahir, T. 1998 "Public Housing and Aboriginal Homelessness," in *Parity*, Vol. 11, Issue 4, p.13.
- Cahir, T. 1999 "Addressing the Causes of Indigenous Homelessness," in *Parity*, Vol. 12, Issue 3, pp.9-10.
- Ceresa, M. 1998 "Long grassers feel the hand of Stone" in *The Australian*, 30-31 May, p.6.
- Chamberlain, C. 1999 *Occasional Paper: Counting the Homeless: Implications for Policy Development 1996*. Australian Bureau of Statistics [Catalogue No. 2041.0], Canberra. [Downloaded from <http://www.abs.gov.au>]
- Chamberlain, C. and Johnson, G. 2000A *The Debate about Definition: A research paper prepared for the Victorian Homelessness Strategy*, Department of Human Services, Victorian Department of Human Services, Melbourne. [Downloaded from <http://www.dhs.vic.gov.au/vhs/pdfs/defpap.pdf> on 03/02/03.]

- Chamberlain, C. and Johnson, G. 2000B Early Intervention: A research paper prepared for the Victorian Homelessness Strategy, Department of Human Services. Victorian Department of Human Services, Melbourne. [Downloaded from <http://www.dhs.vic.gov.au/vhs/pdfs/earlyint.pdf> on 03/02/03.]
- Chamberlain, C. and MacKenzie, D. 1992 "Understanding Contemporary Homelessness: Issues of Definition and Meaning", in Australian Journal of Social Issues, Vol. 27, No. 4, pp.274-297.
- Chamberlain, C. & MacKenzie, D. 2001 "Youth Homelessness 2001", RMIT University, July. [A research program funded by all State and Territory Governments and the Salvation Army.]
- Christensen, W.J. 1981 "The Wangkayi Way – Tradition and Change in a Reserve Setting", PhD Thesis, Department of Anthropology, University of Western Australia, March.
- Christian, J. 2003 Developing a Vision to Address Indigenous Homelessness: A Discussion Paper, March.
- City Homeless Assessment and Support Team Outreach Service 2001 "CHAST Aboriginal Outreach Team Report, January 2001-June 2001," City Homeless Assessment and Support Team Outreach Service, Adelaide.
- City of Sydney, [n.d.] The City of Sydney's Homelessness Strategy, URL http://www.cityofsydney.nsw.gov.au/pdf/cat_z_hp_homeless_strategy_0700.pdf
- City of Sydney 2002 Improved Outcomes for Homeless People, City Homelessness Strategy, An initiative of the City of Sydney, The City of Sydney [Local Authority], Sydney, February. [pamphlet.]
- Clendinnen, I. 2000 "Postcard from the edge" in The Australian's Review of Books, November, pp. 10-11.
- Coleman, A. 2000A "Sister, It Happens to Me Every Day: An Exploration of the Needs of, and Responses to, Indigenous Women in Brisbane's Inner City Public Spaces". Report produced for the Brisbane City Council, the Commonwealth Departments of Families, Aboriginal and Torres Strait Islander Policy and the Office for Women in Premier and Cabinet.
- Coleman, A. 2000B "Five Star Motels: Spaces, Places and Homelessness in Fortitude Valley Brisbane". Draft PhD Thesis, School of Social Work and Social Policy, University of Queensland.
- Coleman, A. 2001 Five Star Motels: Spaces, Places and Homelessness in Fortitude Valley, Draft PhD Thesis, School of Social Work and Social Policy, University of Queensland.
- Commonwealth Department of Family and Community Services 1999 National Evaluation of the Supported Accommodation Assistance Program (SAAP III): Main Report. FaCS, Canberra. ISBN 0 642 39952 2 [Document last viewed at <http://www.facs.gov.au/saap/saap/default.htm> on 03/02/03.]
- Coulehan, K. 1995 "Sitting Down in Darwin – Yolngu Women from Northeast Arnhem Land and Family Life in the City", PhD Thesis, Northern Territory University.
- Coulehan, K. & Robinson, G. (eds) 1996 "Keeping Company in Sickness and in Health" in Aboriginal Health, Social and Cultural Transitions. Proceedings of a Conference at the NTU, Darwin 29-31 September 1995.
- Council for Aboriginal Alcohol Program Services (CAAPS) 2001 <http://www.caaps.org.au>, Berrimah Northern Territory, January 23.
- d'Abbs, P., Hunter, E., Reser, J. & Martin, D. 1994 "Alcohol-related Violence in Aboriginal and Torres Strait Islander Communities: a Literature Review". Report No. 8 for The National Symposium on Alcohol Misuse and Violence. AGPS, Canberra, July.
- d'Abbs, P. & Togni, S. 1996 The Tennant Creek Liquor Licensing Trial, August 1995-February 1996: An Evaluation (Revised Edition), Menzies School of Health Research and NT Living With Alcohol Program, Darwin.
- Daly, M., Hemley, H., Pearce, P., Newton, R., O'Bryan, D. & Lunt, M. 1996 The Homeless Handbook, A Medical Guide, Homeless Health Issues Network of the Melbourne Division of General Practice, Yarra House, Fairfield Hospital, Melbourne.
- Danila Dilba Health Service 2000 <http://www.daniladilba.org.au>, Darwin, Northern Territory, October 17.
- David Higgins & Associates 1997 "Best Practice for Aboriginal Community Night Patrols, A Report to the Office of Aboriginal Development", Darwin, N.T., March.
- Day, W. n.d. "A View From the Long Grass", manuscript.
- Day, W. 1972 "A challenge to a city". [Prepared for the Brisbane Action Conference on Racism and Education, January 1972]. S.N., Brisbane.
- Day, W. 1992 Bunji: a story of the Gwalwa Daraniki movement. Aboriginal Studies Press, Canberra.
- Day, W. (ed) 1993 "The complete 64 editions of Bunji: newsletter of the Gwalwa Daraniki Movement", Gwalwa Daraniki Association, Darwin, N.T.
- Day, W. 1997 [Untitled article on Bob Bunduwaki and the Fish Camp/Lee Point mob] in Austral Asian Newspaper, Darwin.
- Day, W. 1999 "Forgive Us Our Trespasses. Finding Space for Aboriginal fringe dwellers in Darwin." in Canberra Anthropology, Vol. 2, No. 2, pp.62-69.
- Day, W. 2001 "Aboriginal Fringe Dwellers in Darwin, Australia: Cultural Persistence or a Culture of Resistance?", PhD Thesis, Department of Anthropology, University of Western Australia, Perth.
- Dillon & Savage Consultants 1994 "The Parkie Problem and some ideas for strategies, A discussion paper about displaced and other homeless Aboriginal and Torres Strait Islander people in Cairns". (Discussion paper prepared for Warangesda Family Crisis Service and Cairns Displaced Persons Committee), Sydney, November.
- Donemann, P. & Heffernan, R. 2000 "Safety fear sparks caves eviction" in The Courier Mail, October 4, p.3.
- Doyle, M., Hume, A., McAvaney, J., Rogers, N. & Stephenson, T. 2003 Somewhere to Call Home: Supported Residential Facilities: the sector, its clientele and its future, S.A. Department of Human Services, Adelaide. [Last accessed at URL <http://www.dhs.sa.gov.au/home.asp?nav>publications> on 19/8/03 as a PDF.]
- Dunbavan, A. 2001 "Welcome to Brisneyland: Life for Homeless Young People in Inner Urban Brisbane". Prepared for the Inner Urban Youth Interagency, September.
- Durkay, V., Morrison, N. & Strommen, L. 2001 "A Noongar and Wadjular journey of working with Aboriginal people who are at risk or experiencing homelessness in Perth Western Australia". [Paper presented at National Housing Conference, Brisbane, 2001], 25/10/01, Perth.
- Durnan, B. 2001 "Report to the Riverbed Action Group on Solutions to the Problems of Homelessness in Mt Isa", Alice Springs, June.
- Durnan, R. & Dillon, J. 1994 "Summary of workshop on displaced and homeless people in Cairns". (Held on 7th November at Department of Family Services Conference Room, Shield Street, Cairns).
- Eastgate, J. 2000 "Evaluating the New Farm Park Trial", presented at Housing: Accommodating Our Future, Qld Shelter State Conference, Brisbane.
- Eastgate, J. 2001 Notes from Presentation: Aboriginal Environments Research Centre, University of Queensland.
- Eastgate, J. 2001 "Where do people go when there's nowhere to go?" Brisbane City Council's response to homelessness in National Housing Action, Vol. 15, No. 1, pp.39-44.
- Editor. 2000 "The Homeless deserve better aid" in The Courier Mail, Brisbane, 27 September, p.16.
- Fantin, S.R. 2003 "Housing Aboriginal Cultural in North-east Arnhem Land", PhD Thesis, Aboriginal Environments Research Centre, School of Geography Planning and Architecture, University of Queensland, St Lucia.
- Foote, R. 1991 "The Lord mayor's Working Party on Itinerants", [report of activities and recommendations of NTU welfare student on placement with Darwin City Council], N.T. University, July.
- Four Corners Elders Council, Tangentyere Council. 1991 "Appendix 'Draft Rules for Bush Mob Visiting Town Camps: Social Behaviour Rules'." Alice Springs, 1991.
- Gartlan, L. 1992-1993 "Walk about, Talk about, Central Queensland". A Needs Assessment of the Aboriginal Communities Perceptions of Alcohol and Drug related problems in Central Queensland, Rockhampton.

- Goldie, C. 2002A "Living in Public Space: A Human Rights Wasteland?" [Submitted to Alternative Law Journal], Darwin Community Legal Service, 10/10/02, [manuscript].
- Goldie, C. 2002B "Homelessness, Public housing and Racial Discrimination in the Northern Territory", [to be published in Parity], Darwin Community Legal Service, 15/10/02. [Manuscript.]
- Goldie, C. 2003 Homelessness: A Rights-based Approach – Fostering Community and Legal Activism, 20 May. [Unpublished draft – not to be cited].
- Goldie, C. 2003 "Rights versus Welfare", in Alternative Law Journal, Vol. 28, No. 3, Legal Service Bulletin Co-operative, Melbourne, Victoria, June, pp.132-135.
- Grannies Group 2000 "Submission to The Inquiry into the Needs of Urban Dwelling Aboriginal and Torres Strait Islander Peoples," Grannies Group, Pennington, South Australia.
- Haberfield, I. 2000 "Cave comforts" in The Courier Mail, 13 August, p.3.
- Hafner, D. 1999 "Feelings in the Heart, Aboriginal Experience of Land, Emotion, and Kinship in Cape York Peninsula", PhD Thesis, Tropical Health Program, Australian Centre for International Tropical Health and Nutrition, University of Queensland, St Lucia.
- Hale, S. 1996 " 'This is where we all meet': Aboriginal park dwellers and local authority responses: a call for progressive leadership." Centre for Social and Welfare Research, James Cook University of North Queensland, Townsville.
- Hamann, B. 1999 "One Step Forward, Two Steps Backward?," in Parity, Vol. 12, Issue 3, p. 20.
- Hamann, B. 2001 "Walking a Fine Line: Outreach in St Kilda," in Parity, Vol. 11, Issue 4, p. 14.
- Hammill, J. 2001 "Granny Rights: Combating the granny burnout syndrome among Australian Indigenous communities" in Development, Vol. 44, No. 2, June, pp.69-74.
- Hauritz, M., McIlwain, G. & Finnsson, F. 2000 "Dollars made from broken spirits: Alice Springs: Determining its well-being and Responsible Alcohol Management as part of Everyday Life: A Whole of Community Deal". Hauritz and Associates Pty Ltd, Brisbane, Queensland. [Presented to the Licensing Commission, Tuesday 11 July 2000 by the Alice Alcohol Representative Committee].
- Hayward-Ryan, T. 1980 Darwin Aboriginal Town Camps. A discussion paper, Community Welfare Division, Dept. of Community Development, Darwin, May.
- Hempell, R.J. 1985 "Darwin Aboriginal Camping Areas." Report from the Department of Community Development of the Northern Territory, February.
- Henry, R. and Daly, A. 2001 Indigenous families and the welfare system: The Kuranda community case study, Stage Two. Discussion Paper No. 216, CAEPR, ANU, Canberra.
- Herlihy, J. 1995 "Julalikari Night Patrol." In Grabosky, P. & James, M. (eds) The Promise of Crime Prevention: Leading Crime Prevention Programs. Australian Institute of Criminology, Canberra, pp.6-7. [Downloaded from PERLINK <http://www.aic.gov.au/publications/rpp/01/rpp01-03.pdf> <http://www.aic.gov.au/publications/rpp/01/rpp01-03.pdf> on 06/02/03.]
- Heywood, L. 2000 "Homeless compound opposed by residents" in The Courier Mail, Brisbane, 22 November, p.12.
- Housing Queensland, "Brisbane Housing Company," www.housing.qld.gov.au/pdf/brisbane_housingco.pdf
- Huggonson, D. 1995 "How to understand Aboriginal Transients: Contemporary push/pull factors in Aboriginal urbanisation". Paper delivered at ATSI/Australian Local Government Association Workshop, ANU, Canberra.
- Hughes, J. 2001 "Homelessness and Crime". [Paper for GARMA Festival, Gulkula, Gove Peninsula, Arnhem Land, August 2001], North Australian Aboriginal Legal Aid Service, Darwin, 4 October.
- Inner City Administrators Group 1999 "Revealing the Hidden City, Responding to Poverty in Central Adelaide," Adelaide City Council, Adelaide.
- Inifer, C. 2001 "A Brief Insight into Homelessness in the Kimberley" in Parity, No. 6, Vol. 14, July, pp.20-21.
- Irvine, S. c1991 "Aboriginal Town Camps and Housing, Discussion Paper", Aboriginal Affairs Planning Authority.
- Jackson, S. 1997 "A Disturbing Story. The fiction of rationality in land use planning in Aboriginal Australia" in Australian Planner, Vol 34, No.4 pp.221-226.
- Johns, P. 2002 "The House in a Park," in Architecture Australia, July/August, 2002, p.24.
- Johnson, L. 2002 "South Australian Aboriginal Housing Authority - Response to the Homeless Project being undertaken by Aboriginal Environments Research Centre," Aboriginal Housing Authority, Adelaide.
- Jordan, A. 1995 "Displaced Homeless Adolescent Claimants for Social Security Payment", Research Paper No. 66, Department of Social Security, AGPS, Canberra, May.
- Kanck, S. 2001 "Matters of Interest, Aboriginal Homelessness" in Australia, Legislative Council, Hansard, Canberra, 6 June 2001, [see http://www.sa.democrats.org.au/parlt/autumn2001/0606_a.htm http://www.sa.democrats.org.au/parlt/autumn2001/0606_a.htm]
- Kenny, L. 1998 "Inner-City Outreach Melbourne," in Parity, Vol. 11, Issue 4, May, p.17
- Keys, C. 1999 "The Architectural Implications of Warlpiri "Jilimi", PhD Thesis, Aboriginal Environments Research Centre, Dept of Architecture, University of Queensland.
- Keys Young. 1998 Homelessness in the Aboriginal and Torres Strait Islander Context and its possible implications for the Supported Accommodation Assistance Program (SAAP). Prepared for Department of Family and Community Services, 30 November 1998, [final report], Sydney, NSW. [Downloaded from [http://www.facs.gov.au/internet/facsinternet.nsf/v1A/saap/\\$file/full_report.rtf](http://www.facs.gov.au/internet/facsinternet.nsf/v1A/saap/$file/full_report.rtf) on 04/02/30.]
- Kubota, S. 1992 "Household Composition in a Modern Australian Aboriginal Township", in Man and Culture in Oceania, Vol. 8, pp.113-130.
- Long, S. 2002 "Between the Georgina and the Great Western Railway: the Transformation and Maintenance of Aboriginal Architecture in North-West Queensland". Presented at ADDITIONS to Architectural History, XIXth conference of the Society of Architectural Historians, Australia and New Zealand (SAHANZ), Brisbane, 4-7 October.
- Loveday, P. & Lea, J. 1985 Aboriginal Housing Needs in Katherine. A.N.U. North Australian Research Unit Monograph, Darwin.
- Olive, K. 1992 "A Woman's Place: A Study of Homeless Young Aboriginal Women in the Rockhampton Area", Aboriginal Welfare Program, North Rockhampton, Qld.
- McDonald, B.J. 1996 "Displaced Persons Project Cairns: Far Northern Region".
- McCallum, S. 2000 "Review: Port Augusta Aboriginal Families Project," Department of Human Services, South Australia, June.
- McGregor Tan Research 2000, "Adelaide City Council- Dry Zone Research-," report prepared for the Adelaide City Council, www.adelaidecitycouncil.com/council/publications/Agendas/Council/McGregorTanDryZoneResearchReport.pdf.
- MacKenzie, D. & Chamberlain, C. 2003 "Homeless Careers: Pathways in and out of Homelessness", RMIT Print Shop, Swinburne & RMIT Universities, May.
- Macintyre, K. 1974 "Report on Aboriginal housing and accommodation in the towns of Kalgoorlie and Boulder", Kalgoorlie, W.A. November. [Typescript.]
- Mark, S. & Hennessy, N. 1991 "Alcohol-Free Zone in New South Wales" in Aboriginal Law Bulletin, August pp.16,17.
- Memcott, P. 1979 "Lardil Properties of Place: An Ethnological Study in Man-Environment Relations". PhD Thesis, University of Queensland, Brisbane.
- Memcott, P. 1990 "Report on the Social Conditions of Aboriginal Campers in the Todd River and Other Public Places in Alice Springs – Shortened Version", Aboriginal Data Archive, University of Queensland, St Lucia, 24/4/90
- Memcott, P. 1991A "Dinner Camp Report: A Report on the Camping Needs of Western Desert Visitors to Halls Creek" for Aboriginal Housing Board, W.A., 12/12/91.

- Memcott, P. 1991B Humpy, House and Tin Shed – Aboriginal Settlement History on the Darling Rive. Ian Buchan Fell Research Centre, Department of Architecture, University of Sydney.
- Memcott, P. 1992 “Re-growing Yardgee. A Confidential Report for the Aboriginal Housing Board, W.A.”, 25/3/92.
- Memcott, P. 1993A “Mwere Anetyeke Mparntwele (= Sitting Down Good in Alice Springs)”. [Annual Report for 1992 of the Social Behaviour Project by Tangentyere Council], 1993.
- Memcott, P. 1993B “Mwere Anetyeke Mparntwele (Sitting Down Good in Alice Springs)” in McKillop, S. (ed) Aboriginal Justice Issues (Proceedings of a Conference held 23-25 June 1992), Australian Institute of Criminology, Canberra, ACT, pp.47-58.
- Memcott, P. 1994 “Report on the Cope Street Precinct, Redfern. History and Proposals” [Report for the South Sydney Council, NSW Anti-Discrimination Board and the Uniting Church], 01st July.
- Memcott, P. 1996 “From the “Curry to the “Weal, Aboriginal Town Camps and Compounds of the Western Back-Blocks”. [David Saunders Memorial Keynote Lecture for the “Sarsparella to Muckadilla” Conference of the Society of Architectural Historians (ANZ), 30/09/1994.] in Fabrications, No 7 August, pp1 - 50.
- Memcott, P. 1998 “An Aboriginal Culture of Suburbia. - Mparntwarenye” in Morgan, G. (ed) Urban Life, Urban Culture - Aboriginal/Indigenous Experiences [Proceeding of Conference by same title at Goolangullia Centre, 27-29 Nov 1997], Gulangullia Publications, University of Western Sydney, Macarthur, pp.107-129.
- Memcott, P. 2002A “Responses to Indigenous People Living in Public Spaces” in Parity, January, Vol. 15, Issue 1, pp.11-13.
- Memcott, P. 2002B “Sociospatial structures of Australian Aboriginal settlements” in Australian Aboriginal Studies, No. 1, pp.67-86.
- Memcott, P. 2003 “The Long Grass’ Survey” in Parity, February.
- Memcott, P. and Fantin, S. 2001 “The Long Grassers’ A Strategic Report on Indigenous ‘Itinerants’ in the Darwin and Palmerston Area” [3 volumes, prepared for Territory Housing, Territory Health Services and ATSI] AERC, University of Queensland, November.
- Memcott, P. & Long, S. 2002 “Place Theory and Place Maintenance in Indigenous Australia”, in Urban Policy and Research, Vol. 20, No. 1, March, pp.39-56.
- Memcott, P., Long, S. and Chambers, C. 2002 “A National Analysis of Strategies Used to Respond to Indigenous Itinerants and Public Place Dwellers” [prepared with a research grant from the Commonwealth Department of Family and Community Services]. Aboriginal Environments Research Centre, University of Queensland, St Lucia, 10/12/02.
- Memcott, P., Long, S. & Chambers, C. 2003A Categories of Indigenous ‘Homeless’ People and Good Practice Responses to their Needs: Positioning Paper. Brisbane: AHURI. [Document last viewed at <http://www.ahuri.edu.au/publish/page.cfm?contentID=15> on 1/8/03.]
- Memcott, P., Long, S., Chambers, C. & Spring, F. 2003B Final Report: Categories of Indigenous ‘Homeless’ People and Good Practice Responses to their Needs, Australian Housing and Urban Research Institute, Queensland Research Centre, St Lucia. <http://www.ahuri.edu.au/publish/page.cfm?contentID=17>
- Memcott, P., Long, S., Fantin, S. & Eckermann, E. 2000 “Post-Occupancy Evaluation of Aboriginal Housing in the N.T. for IHANT, Social Response Component”, Aboriginal Environments Research Centre, University of Qld, St Lucia, 28/4/00.
- Memcott, P., Long, S., Spring, F. 2003 “Understanding Homelessness in Rural and Remote Locations”. Presented at Proceedings of the National Indigenous Homelessness Forum, held 4th and 5th March, 2003 in Melbourne, Victoria.
- Memcott, P., Spring, F. & Long, S. 2003 “Categories of Indigenous ‘Homeless’ People and Good Practice Responses to these Needs”, Aboriginal Environments Research Centre. Presented at the National Indigenous Homelessness Forum, Melbourne City Hall, Victoria, 4th March.
- Memcott, P. and Moran, M. 2001 Indigenous Settlements of Australia. Canberra: Environment Australia [Technical Papers]. [Document last viewed at [ion.thml http://www.ea.gov.au/soe/techpapers/indigenous/introduction.html](http://www.ea.gov.au/soe/techpapers/indigenous/introduction.html) in February 2003.]
- Memcott, P. and Stacy, R. 1999 “Indigenous Family Violence Summary Research Report: to accompany the Round Table on Family Violence Findings”. [A Report for Senator The Honourable John Heron, Minister for Aboriginal and Torres Strait Islander Affairs to present to The Ministerial Council for Aboriginal and Torres Strait Islander Affairs, Canberra, September 1999.] 18 August.
- Memcott, P., Stacy, R. and Chambers, C. 1999 “Violence in Indigenous Communities: Discussion Paper”. [A Report for The National Crime Prevention Unit, Attorney General’s Department, Canberra.] 13/8/99.
- Memcott, P., Stacy, R., Chambers, C. and Keys, C. 2001 “Violence in Indigenous Communities”. Final Report for National Crime Prevention, Attorney General’s Department, Canberra.
- Millner, F. 2003 “Operation Shuteye: Youth Curfew in South Australia”, in Indigenous Law Bulletin, July-August, Vol. 5, Issue 26, pp.6,7.
- Millsom, A. 1998 “Defining Homelessness in the Aboriginal and Torres Strait Islander Context”, in Parity, Vol. 11, Issue 4, p.5.
- Micah 2002, “Micah Inner City Services”, PERLINK <http://www.micah.merivale.org.au> www.micah.merivale.org.au
- Moore, P. 1998 “Housed but still Homeless? Issues and Responses in the South-East Region of NSW” in Parity, Vol. 11, Issue 4, May, p.9.
- Mugford, J. & Nelson, D. 1996 “Violence Prevention in Practice: Australian Award Winning Programmes”, Australian Institute of Criminology, Canberra.
- Mundine, D. 2000 . “The Native Born: Objects and representations from Ramingining, Arnhem Land”. Museum of Contemporary Art, Sydney.
- Mundine, L. 1998 “Homelessness and the Need for Appropriate Tenancy Advice and Advocacy” in Parity, Vol. 11, Issue 4, May, pp.15,16.
- Musharbash, Y. 2001 Indigenous Families and the welfare system: The Yuendumu community case study, Stage Two, Discussion Paper 217, CAEPR, ANU, Canberra.
- Nagaiya, A. 1999 “Mt Isa River Dwellers Under Committee Spotlight,” in Land Rights, Queensland, February.
- National Crime Prevention 1999 Living rough: preventing crime and victimisation among homeless young people, full report. National Crime Prevention, Canberra.
- National Indigenous Times 9/10/02 “SA Ban on Grog Stays Despite HREOC Pleas”, p.8.
- National Indigenous Times 5/2/03, “Drinking Report Leaves a Bad Taste”, p.11.
- Ngwala Willumbong, 2002, [org/index.htm http://www.ngwala.org/index.htm](http://www.ngwala.org/index.htm)
- Ngwala Willumbong and Swinburne University of Technology, Pilot Training Programme n.d. “Indigenous Self Determination in Education, is it achievable?” Swinburne University of Technology, at <http://www.swin.edu.au/corporate/hr/online/equity/indigenous/news/NgwalaCP.doc>-www.swin.edu.au/corporate/hr/online/equity/indigenous/news/NgwalaCP.doc
- NSW Aboriginal Housing Office 2004 “Brief for Research project on Inner-city Sydney Aboriginal Homelessness”. AHO, Sydney.
- NSW Department of Housing 2000A “Homelessness Action Team (Fact Sheet).” [Document last viewed at <http://www.housing.nsw.gov.au/hatfact.pdf> on 04/03/03.]
- NSW Department of Housing 2000B “How to Get Information to Aboriginal People (Fact Sheet).” [Document last viewed at <http://www.housing.nsw.gov.au/a-info.pdf> on 04/03/03.]
- NSW Department of Housing, 2002A “Partnership Against Homelessness (Fact Sheet).” [Document last viewed at <http://www.housing.nsw.gov.au/homeless.pdf> on 18/01/05.]
- NSW Department of Housing 2002B “Helping the Homeless (Fact Sheet).” [Document last viewed at <http://www.housing.nsw.gov.au/fact%205.pdf> on 04/03/03.]
- Nolan, J., Keim, T. & Doneman, P. 2000 “Calls to close homeless caves” in The Courier Mail, Brisbane, 27 September.
- Northern Territory Road Safety Council, Aboriginal Road Safety Program 2001 “Aboriginal Pedestrians Injured and Killed, 1990-2001” [statistics and various analyses], Darwin.

- North West Star 2001 "More Than 1500 Object to Bottleshop", 7/6/01.
- North West Star 2002 "Mouthwash Latest High", 05/12/02, p3.
- Norwood, K. 1997 *Census Working Paper 97/1 - 1996 Census: Homeless Enumeration Strategy*. Australian Bureau of Statistics. [Available at <http://www.abs.gov.au>]
- "NT Elders meet to discuss long-grassers' in *The Koori Mail*, Edition 301, 21 May 2003.
- O'Donoghue, L. 1998 "Can We Call Australia Home? An Indigenous Perspective of Housing". The Fifth F. Oswald Barnett Oration, St John's Southgate, November.
- O'Hara, K. 1999 "Hypocrisy: it's alive and well" in *The Koori Mail*, 11 August. [Letter to the Editor.]
- Olive, K. 1992 "A woman's place: a study of homeless young Aboriginal women in the Rockhampton area", Aboriginal Welfare Programme, North Rockhampton, Queensland.
- Omundsen, S. 2003 "Homelessness and Sexwork in Inner Sydney – Easy Money." Paper presented at the 3rd National Homelessness Conference *Beyond the Divide* convened by the AFHO, 6-8 April.
- Parliament of Victoria 2000 "Drugs and Crime Prevention Committee Inquiry into Public Drunkenness Discussion Paper", October, Drunkenness pdf www.parliament.vic.gov.au/dpcp/Reports%20in%20PDF/Drunkenness.pdf
- Port Hedland Sobering Up Centre Group Inc 2002 "Hedland Homeless Support Service, Progress Report, 1st July 2001 – 31st December 2001." South Hedland, WA.
- Queensland, Department of Aboriginal and Torres Strait Islander Policy (DATSIP). 2003A *Safer Places with New Opportunities: Consolidated reports and strategies*. DATSIP, Brisbane. [Page last viewed at <http://www.indigenous.qld.gov.au/publications/homeless.htm> – FinalPrintVersionConsolidatedRe.pdf in 02/03.]
- Queensland, Department of Aboriginal and Torres Strait Islander Policy (DATSIP). 2003B *Cairns Regional Report and Blueprint*. DATSIP, Brisbane. [Page last viewed at <http://www.indigenous.qld.gov.au/publications/homeless.htm/CairnsReportV4.pdf> in 02/03.]
- Queensland, Department of Aboriginal and Torres Strait Islander Policy (DATSIP). 2003C *Regional Blueprint Indigenous Homelessness – Mt Isa*. DATSIP, Brisbane. [Page last viewed at <http://www.indigenous.qld.gov.au/publications/homeless.htm/FinalPrintVersion-MtIsa.pdf> in 02/03.]
- Queensland, Department of Aboriginal and Torres Strait Islander Policy (DATSIP). 2003D *Townsville Regional Homelessness Report and Blueprint*. Brisbane: DATSIP. [Page last viewed at <http://www.indigenous.qld.gov.au/publications/homeless.htm/Townsvillereport-printversion.pdf> in 02/03.]
- Redfern Legal Centre. 2004 *Redfern Waterloo Authority Bill 2004 Discussion Paper*. [Document viewed at URL <http://www.rlc.org.au/about/RWABillDisc.pdf> in early 2005.]
- Renouf, G. 2001 "Some Consumer Problems with the "Book-Up" System". [A Consultation Paper prepared for The Australian Securities and Investments Commission.], Darwin, N.T., May.
- Reser, J. 1976 "A Matter of Control: Aboriginal Housing Circumstances in Remote Communities and Settlements". Research Document No. 76/2041, Australian Institute of Aboriginal Studies Newsletter, Canberra, September.
- Reser, J. 1979 "A Matter of Control: Aboriginal Housing Circumstances in Remote Communities and Settlement" in Heppell, M. (ed) *Black Reality: White Imposition – Remote Aboriginal Housing*, Australian Institute of Aboriginal Studies, Canberra.
- Richards, I. 1997 "Derelict by design: homelessness and the role of place makers", B.Arch Thesis, University of Queensland, St Lucia, Queensland.
- Robinson, C. 2000 "Creating Space, Creating Self: Street-frequenting Youth in the City and Suburbs." *Journal of Youth Studies*, Vol. 3, No. 4, pp.429-443.
- Robinson, C. 2001 "Being Somewhere" in *Space and Culture*, Vols. 11 & 12, pp.7-23.
- Robinson, C. 2002 "'I Think Home is More than a Building': Young Home(less) People on the Cusp of Home, Self and Something Else", in *Urban Policy and Research*, Vol. 203, No. 1, pp.27-38.
- Ross, H. 1987 *Just for a Living – Aboriginal Perceptions of Housing in North-west Australia*, Aboriginal Studies Press, Canberra.
- Ross, H. 1991 "Household compositions and use of space" in Cock, P. (ed) *Social structures for sustainability*, Fundamental Questions Paper No. 11, Centre for Resource and Environmental Studies, ANU, Canberra, pp.64-72.
- RMIT University Research Team 2001 *Victorian Indigenous Homelessness Study Final Report* [authors: Berry, M. MacKenzie, D., Briskman, L., Ngwenya, T.] prepared for the Aboriginal Housing Board of Victoria, Melbourne.
- Ryan, W. 1971 *Blaming the Victim*, Pantheon Books, New York.
- Sansom, B. 1980 *The Camp at Wallaby Cross. Aboriginal Fringe Dwellers in Darwin*, AIAS, Canberra.
- Senior, K. 1999 "Potential Domains of Quality of Life in two Urban Aboriginal Communities". North Australia Research Unit, ANU, Darwin.
- Simmering, S. 2000 *The Johnny Balaiya Documentary*, Darwin [VHS Video].
- Sisters Inside 2002 "Sisters Inside Programs," m#releasekits www.sistersinside.com.au/programs.htm#releasekits.
- Snow, D. and Anderson, L. 1993 *Down on Their Luck: A Study of Homeless Street People*. University of California Press, Berkeley and Los Angeles.
- Solomon, R. 1998 "Reconciliation in Practice: The Bairnsdale Koorie Women's Shelter," in *Parity*, Vol. 11, Issue 4, p. 11.
- South Australia, Department of Human Services (DHS) 1998 *A Different View: Aboriginal and Torres Strait Islander young people in contact with community services*, Adelaide.
- South Australia, Department of Human Services, Housing Management Council 2002 *The South Australian State Housing Plan: Homelessness and Transitional Housing – Issues and Options Paper No. 5*. South Australian Government, Adelaide. [Last accessed in "Discussion Papers" section at URL <http://150.101.16.50/statehousingplan/desktopdefault.aspx> on 19/8/03 as a PDF document.]
- South Australia, Department of the Premier and Cabinet 2002 "Social Inclusion Unit." [Page last viewed at <http://www.premcab.sa.gov.au/html/socialinclusion.html> on 04/03/02.]
- South Australia, Department of the Premier and Cabinet, Social Inclusion Unit 2002A "Social Inclusion Initiative: Discussion Paper Following Social Inclusion Unit Consultations with Service Providers on Homelessness." Prepared 09/12/02, Adelaide. [Document last viewed at <http://www.premcab.sa.gov.au/pdf/discussion.pdf> on 04/03/02.]
- South Australia, Department of the Premier and Cabinet, Social Inclusion Unit 2002B "Social Inclusion Initiative: Background Paper – Social Inclusion Unit Consultations on Homelessness." Working Paper prepared 11/10/02, Adelaide. [Document last viewed at <http://www.premcab.sa.gov.au/pdf/Homelessness.pdf> on 04/03/02.]
- South Australian Aboriginal Housing Authority 2001 "South Australian Housing Authority, Annual Report 2000/2001," South Australian Aboriginal Housing Authority, Adelaide.
- South Australian Council of Social Service Inc (SACOSS) 2001 "Whose city is it anyway? Dry zone no answer," media release, 15 March, Adelaide, viewed 09 December 2002, [tp://www.sacoss.org.au/media/2001_03.html](http://www.sacoss.org.au/media/2001_03.html) http://www.sacoss.org.au/media/2001_03.html.
- South Australian Government, Crime Prevention Unit (CPU) 2000 *Coober Pedy Alcohol Strategy*. [Last viewed on 10 December 2002 at <http://www.cpu.sa.gov.au/CPAS%20final%20document.pdf>]
- South Australian Treasury and Finance, Commonwealth Grants Commission Indigenous Funding Inquiry Submission, [ssions/IFI-SUB-0010.pdf](http://www.cgc.gov.au/IFI_Downloads/IFI/Submissions/IFI-SUB-0010.pdf)
- Strategic Partners P/L. 2001 *Technical Forum on the Estimation of Homelessness in Australia: Final Report*. [Downloaded at [facsinternet.nsf/b919d06b2c7d99e3ca256807001393b2/eb1b1b29ee0d508aca256a310083a500/\\$FILE/Final_Report.rtf](http://www.facs.gov.au/internet/facsinternet.nsf/b919d06b2c7d99e3ca256807001393b2/eb1b1b29ee0d508aca256a310083a500/$FILE/Final_Report.rtf) [http://www.facs.gov.au/internet/facsinternet.nsf/b919d06b2c7d99e3ca256807001393b2/eb1b1b29ee0d508aca256a310083a500/\\$FILE/Final_Report.rtf](http://www.facs.gov.au/internet/facsinternet.nsf/b919d06b2c7d99e3ca256807001393b2/eb1b1b29ee0d508aca256a310083a500/$FILE/Final_Report.rtf) on 05/02/03.]

- Strehlow, T.G. 1947 Aranda Traditions, Melbourne University Press, Carlton, Melbourne.
- Sumner, L., Marshall, C., Mason, L., Taylor, F., van der Sman, J. 1999 "Original Homelessness", in Revealing the Hidden City: Responding to Poverty in Adelaide, Adelaide, Adelaide City Council.
- Taylor, F. & Graham, M. 2001 "CHAST Aboriginal Outreach Team Report, January 2001-June 2001", City Homeless Assessment Team Outreach Service, Adelaide.
- The Courier Mail 2002 "Council to Build Park Facilities for Homeless", 13/11/02, www.couriermail.news.com.au/printpage/0.5942.5476982.00
- The Koori Mail, 2002 "Adelaide 'dry zone' trial opposed" 16/10/02, p.11.
- The Koori Mail, 2002 "Drug, Alcohol Program Wins Training Award," 30/10/02.
- The Sunday Mail 2002 "Are We Losing Our Parks?", 1/12/02, www.thesundaymail.news.com.au/printpage/0.5942.5589865.00
- Thompson, L. 2001 "Picturing Aboriginal Living Conditions and Response Paradigms". Draft PhD Thesis, Queensland University of Technology, Brisbane, January. [Restricted access.]
- Tolhurst, F. 1998 "Disturbing the Peace, The Northern Territory Government's Responses to Aborigines – Alcohol – Social Disorder", Master of Letters in Peace Studies Thesis, University of New England, Armidale, December.
- Toohy, P. 1999 "A different kind of sleeping sickness in the Top End" in Land Rights, May, p.10.
- Twardowski, A. "An Overview of the City Homelessness Assessment Support Team", y.infoexchange.net.au/group/noticeboard/items/20030517010b.shtml-15k
www.parity.infoexchange.net.au/group/noticeboard/items/20030517010b.shtml-15k.
- Vanstone, A. 2002 "Homelessness Amongst High School Students, Media Release", Senator the Hon Amanda Vanstone, Minister for Family & Community Services, Minister Assisting the Prime Minister for the Status of Women, <http://www.facs.gov.au/internet/minfacs.nsf/2b0cec5b0d72d933ca2569e700143ed7/67e59e81196c9418ca256bf8001aec0b?OpenDocument>.
- Victoria, Department of Human Services (DHS). 2001 Victorian Homelessness Strategy. [Page last viewed at <http://www.dhs.vic.gov.au/vhs/about.htm> on 19/02/30.]
- Victoria, J. 2002 "'A house is just a house' Indigenous youth housing need in Queensland", M.Phil Thesis, University of Queensland, St Lucia.
- Wallace, N.M. 1979 "Pitjantjatjara Wiltja or White Man's House?" in Heppell, M. (ed) A Black Reality: Aboriginal camps and housing in remote Australia, A.I.A.S., Canberra, pp.143-152.
- Wells, S. 1995 "Town camp or homeland?: a history of the Kulaluk Aboriginal community", Darwin.
- Wells, S. 1998 Replacing those 'old ramshackle, dirty huts': Aboriginal Housing in Darwin 1899-1938. Unpublished manuscript, Darwin.
- Wells, S. 2000. "Labour, Control and Protection: The Kahlin Aboriginal Compound, Darwin, 1911-1938." In Read, P (ed) Settlement: A History of Australian Indigenous Housing Aboriginal Studies Press, Canberra, Chapter 5, pp.64-74.
- Western Australia, State Homelessness Taskforce 2002 Addressing Homelessness in Western Australia Perth, 31 January. [Document available at http://www.homeless.dhw.wa.gov.au/shtf_report1.pdf – Last viewed 19/02/03.]
- Wigley, J. 1985 "Katherine Town Camps: Report to the Katherine Aboriginal Action Group on the Housing and Land Needs of Town Campers. Report No. 2. Existing Conditions. Needs Survey and Brief." Richmond, Melbourne, September, (typescript).
- Woodhead Australia, Connell Group, N.T. Solutions c1989 "Aboriginal town camp development report". For the Department of Lands and Housing, Northern Territory of Australia and the Aboriginal Development Foundation, Darwin.
- Young, E. & Doohan, K. 1989 Mobility for survival: a process analysis of Aboriginal population movement in Central Australia, North Australia Research Unit, Australian National University, Darwin, N.T.

INNER-CITY SYDNEY ABORIGINAL HOMELESS RESEARCH PROJECT

VOLUME 2 APPENDICES

by

**Paul Memmott, Catherine Chambers, Angie Pitts, Richard Green
and Pam Ingram**

Consultant

Architects and

Anthropologists

in Aboriginal

Projects

DR PAUL MEMMOTT

B Arch (Hons), Ph. D. (Qld), FRA.I.A.
Assoc. Prof.

OFFICE

Aboriginal Environments
Research Centre
Room 517, Zelman Cowen Bdg.
Staffhouse Road
University of Queensland

MAILING ADDRESS

PO Box 114, St Lucia, Q 4067

TELEPHONE

(07) 3365 3660

FACSIMILE

(07) 3365 4744

EMAIL

p.memmott@mailbox.uq.edu.au

PAUL MEMMOTT & ASSOCIATES

in conjunction with the
Aboriginal Environments Research Centre, University of Queensland
I.B. Fell Research Centre, University of Sydney

Final Report

3 March 2005

**APPENDIX 1: THE TWO QUESTIONNAIRES USED FOR INTERVIEWING HOMELESS
ABORIGINAL PEOPLE AND THE REFERRAL FORM TO SERVICE
PROVIDERS**

INNER-CITY SYDNEY ABORIGINAL HOMELESS RESEARCH PROJECT – Draft questionnaire/Public Place Dwellers

Interview No. ... with Public Place Dwellers	Date:
	Interviewee:
(a) Name of person(s) interviewed:	(b) Age: (c) Gender: (guess if necessary)
(b) Location of Interview:	
Earlier life and background	
1. Can you tell us your life story and how you got to be living in the city parks and streets?	
2. What community do you originally come from? [town/mission/where your family are]	
3. (a) What is your traditional language, or country? (or tribe or mob) (b) Do you speak your language?	
Current situation	
4. How long have you been living rough in the city? • Just last night; • A few nights; • A few weeks; • About a year; • A few years; • Five years; • Ten years; • Longer than ten years.	
5. Where did you sleep last night?	
6. Where do you usually camp or sleep in Sydney? (a) Hot time of year? (b) Cold time of year?	
7. (a) Who else is in your camping/sleeping group? [list of names] (b) And where do each of them come from?	
8. Who are the people who talk for your group? [try to interview them later]	
<u>Problems, needs and services</u>	
9. What are the main problems you have living in the city?	
10. (a) Are the following things problems for you in Sydney? (i) Getting shelter or housing; (ii) Getting a good place to camp; (iii) Too much heavy drinking; (iv) Getting hassled and moved on by police, security police, council staff; (v) Health problems; (vi) Getting food; (vii) Getting clean needles; (viii) Too much heavy drug taking. [Elicit further info if a problem is identified:	

(b) what have you tried to do to sort this out?	
(c) Why hasn't it worked?]	
• Have you had any problems dealing with government rules and regulations?	
• Where do you get money from? Do you have a problem getting money?	
• Who do you go to for getting advice about problems?	
• Do you want us to try and get you some help with any of these problems? [Which problem? Go to Referral Form]	
Pathways into the situation • When you first came to the city, why did you come? [eg Health, court, jail, school kids, shopping, good times, employment, training, trouble at home community?] What kept you here?	
• Do you want to stay in the city or go back home? [if want to stay, go to question 18]	
• What is stopping you from getting back home?	
• Are you homeless? Explain how you feel; what is your situation?	
Pathways out of the situation • (a) Do you know any campers or people who were living it rough, but who are now living in rental housing? [Get contact details for follow-up interview] (b) How did they manage this?	

INNER-CITY SYDNEY ABORIGINAL HOMELESS RESEARCH PROJECT – Draft questionnaire/Insecurely housed person

Interview No. with Public Place Dwellers	Date:
(a) Name of person(s) interviewed:	Interviewer:
(c) Location of Interview:	(b) Age: (c) Gender: (guess if necessary)
1.0 Earlier life and background	
1.1 What community do you originally come from? [town/mission/where your family are]	
1.2 (a) What is your traditional language, or country? (or tribe or mob)	
(b) Do you speak your language?	
1.3 Can you explain how you got to be living in a situation with housing problems.	
2.0 Current situation	
2.1 How long have you been living in rented housing?	
2.2 How did you get to live in this house?	
2.3 Who do you rent from?	
2.4 Are you the head tenant	
2.5 Who is the person who talks for this household?	
2.6 How many other people living here with you? (adults/children/disabled)	
2.7 How many bedrooms in the house?	
3.0 Problems, Needs and Services	
3.1 What sort of problems have you experienced in this house over the last year or so?	
3.2 Are the following things problems for you in this house? (i) overcrowded; (ii) too many visitors; (iii) services not working (eg toilet, bath, shower, stove, electricity, water); (iv) lots of house maintenance needed; (v) some visitors with bad problems (drunks, drugs, violence, steal food); (vi) might lose the house at any time; (vii) Other [get further information if a problem is identified.]	
3.3 Have you had any problems dealing with government rules and regulations?	
3.4 Where do you get money from? Do you have a problem getting money?	
3.5 Who do you go to for getting advice about problems?	
3.6 Do you want us to try and get you some help with any of these problems? [Which problem? Go to Referral	

Form]	
4.0 Pathways into the situation 4.1 (a) When you first came to the city, why did you come? [eg Health, court, jail, school kids, shopping, good times, employment, training, trouble at home community?] (b) What kept you here?	
4.2 Do you want to stay in the city or go back home? [if want to stay, go to question 4.3]	
4.2 What is stopping you from getting back home?	
4.3 Do you think you are really homeless? Explain how you feel; what is your situation?	
5.0 Pathways out of the situation 5.1 (a) Do you know any Aboriginal people who are living in good rental housing? (b) How did they manage this?	
5.2 How do you think you'll get out of your situation. Have you any ideas.	

Second Interview

Re-read all of findings from first interview. Does the interviewee want to add more information. Fill in missing bits of interview.

Agency Referral Form – Request for assistance by a Homeless or Insecurely Housed Person

Interviewee:
Date:
Time:
Place of Interview:

Contact Details

Address:
Phone No.:
Or regular place and time where can be located:
Or contact person (leave message):

Stated need(s) of person

- (1)
- (2)
- (3)
- (4)

Interviewer:
Phone no. of Interviewer:
Forwarded to: Date:

THE INNER CITY SYDNEY ABORIGINAL HOMELESSNESS RESEARCH STUDY

Invitation to be interviewed

We are a group of independent researchers from the University of Sydney and the University of Queensland. We have been contracted by AHO to carry out an independent research study on Aboriginal homelessness in Sydney. The government want to try to see how they can improve the situation of homeless people and they need advice from people like you on what the problems and needs are.

This information is being given to the NSW Aboriginal Housing Office (AHO) in the first place, then to their Aboriginal Advisory Committee. The information is to be used to help Aboriginal people like you who are living on the streets, in parks, in crisis accommodation or in overcrowded places.

If you don't want any of your information used for this we won't go any further with this discussion.

But if you would like to be interviewed we want to respect you as an owner of your information. To do this we can put your name in with your information. Or if you wish we can leave your name off altogether. Or we could use your nickname, skin name or any other name if you like. What is your preference? Also let us know if there is anything you say that you don't want passed on.

All of your information will be written down in a bound book. After the research is finished, the book will be kept within the NSW Aboriginal Housing Office for safe keeping.

The people doing the interviewing for this research are:

- Angie Pitts (Field Coordinator);
- Pam Ingram;
- Richard Green;
- Kevin Smith.

The Directors of the project are Dr Paul Memmott, Phone: 07 3365 3660 and Col James, Phone: 02-9351 4100.

Please contact us if you have any concerns of complaints about the confidentiality or ownership of your information.

Paul Memmott, Project Leader
(Paul Memmott and Associates)

I agree to be interviewed on the above basis.....
(name and signature)

**APPENDIX 2: PROFILES OF ORGANISATIONS SERVICING HOMELESS PEOPLE IN
INNER-CITY SYDNEY**

Organisation Profiles Contents

1. Aboriginal Children's Service
2. Aboriginal Hostels Limited (AHL)
3. Aboriginal Housing Company
4. Aboriginal Medical Service Co-op Ltd (AMS)
5. Anglicare
6. Barnardos Australia
7. Centrelink Redfern - NSW Government
8. City of Sydney Council
9. CRASH (Construction Industry Relief and Assistance for Sydney's Homeless)
10. Crossroads Christian Ministry
11. The Gender Centre Inc.
12. The Haymarket Foundation
13. Hillsong Church
14. Homelessness Action Team Support and Outreach Service (HATSOS)
15. Independent Community Living Association Inc (ICLA)
16. Kirketon Road Centre (South Eastern Sydney Area Health Service)
17. Mission Australia
18. Mudgin-Gal Aboriginal Corporation
19. NSW Aboriginal Housing Office –Sydney Regional Committee - NSW Government
20. NSW Department of Community Services - Supported Accommodation Assistance Program (SAAP)
21. NSW Government – Partnerships Against Homelessness
22. NSW Police
23. NSW Youth Drug Court
24. Oolong Aboriginal Corporation
25. Redfern Waterloo Partnership Project (RWPP) - Redfern Waterloo Street Team
26. REPIDU - Resource and Education Program for Injecting Drug Users
27. Salvation Army
28. Sex Workers Outreach Project (SWOP)
29. Shelter NSW
30. Society of St Vincent de Paul
31. St Canice's Catholic Church
32. The Station
33. Sydney Medically Supervised Injecting Centre (MSIC)
34. Twenty 10 Association Incorporated
35. The Wesley Mission
36. Wayside Chapel
37. Women's and Girls' Emergency Centre Inc
38. Women's Refuge Resource Centre
39. Youth Accommodation Association
40. Youth Off the Streets

Note: The following headings have been used to order the information contained in the profiles contained in this Appendix:

- Name of Organisation
- Background Information
- Population Served by Organisation
- Management and Administrative Structure
- Organisation Ideology
- Services Provided
- Main Concerns & Issues for Aboriginal Homeless
- Issues that can be tackled by this Organisation
- Sources of Information

When no information was obtained under a particular heading it does not appear in the profile.

No. 1 Organisation/Service Profile

Name of Organisation

Aboriginal Children's Service

Contact Details

18 George Street

Redfern NSW 2016

Tel: (02) 9699 9835

Yvonne Weldon

Email: acs@nswacs.org.au

Background Information

The Aboriginal Children's Service base in Redfern provides foster care placements for Aboriginal and Torres Strait Islander children in NSW in accordance with the Aboriginal Child Placement Principle. It also provides resources and counselling to children and families going through fostering, adoption or shared family care. The service also employs two early intervention workers.

Population Serviced by Organisation

The ACS is based in Redfern but also has four branches throughout NSW, one in Wagga Wagga and another in Cowra.

Organisation Ideology

The ACS' main objective is to ensure children are safe with their foster carers. They endeavour to place children mainly with families and where possible try to reconcile them with their natural parents.

Services Provided

The ACS provides a much needed and well utilised fostering and adoption service for Aboriginal children. Their service includes a family violence worker, family and court support mechanisms, referral, and fostering of children with Aboriginal families (not exclusively so however). They also provide crisis type services.

Main Concerns & Issues for Aboriginal Homeless

According to Yvonne Weldon, many Aboriginal children are living in overcrowded or dysfunctional family situations, and many are being moved out of their families and into non-Indigenous care. There is a need for more emergency accommodation for single Aboriginal men and a refuge for women in the Redfern area. Strategies must be devised that deal with the 'hidden homelessness' situation where families are living in overcrowded conditions and tenancies are insecure. It is important to allow Aboriginal families to provide short-term accommodation in crisis situations thereby creating an interim link with mainstream accommodation providers. There also needs to be a strategy to get Aboriginal involved in accommodation services rather than relying on mainstream services. This could be done through a partnership with a charitable organisation. This question of policy should be put to SAAP. More linkages need to be established between Aboriginal organisations and mainstream homelessness agencies.

Sources of Information

- Interview with Yvonne Weldon from ACS conducted on 31 May 2004.
- Website <http://www.facs.gov.au> viewed in late 2004.
- Website <http://www.atsic.gov.au> viewed in late 2004.

No. 2 Organisation/Service Profile

Name of Organisation

Aboriginal Hostels Limited (AHL)

Contact Details

5th Floor
128 - 134 Chalmers Street
Surry Hills NSW 2010
Tel: (02) 9310 2777
Fax: (02) 9310 3044
PO Box 783
Strawberry Hills NSW 2012
Email: sydney@ahl.gov.au
Website: <http://www.ahl.gov.au/>

Mac Silva Centre

49B Wellington Road
Waterloo NSW 2017
Tel: (02) 9310 1912
Fax: (02) 9699 9056
(Homeless Men)
Contact: Phyllis Simpson

Tony Mundine Hostel

203 Catherine Street
Leichhardt NSW 2040
Tel: (02) 9550 0178
Fax: (02) 9560 5061
Email: t.mundine@ahl.gov.au
(Tertiary Education and Training)
Contact: Bo

Chicka Dixon Hostel

90 Liverpool Road
Enfield NSW 2136
Tel: (02) 9747 4198
Fax: (02) 9747 0063
Email: c.dixon@ahl.gov.au

Marrickville Hostel

321 Livingstone Road
Marrickville NSW 2204
Tel: (02) 9554 7956
Fax: (02) 9554 7915
Email: marrickville@ahl.gov.au

Background Information

"Aboriginal Hostels Limited is a company that provides temporary accommodation to Aboriginal and Torres Strait Islander people. Incorporated on 6 June 1973 in the Australian Capital Territory, AHL is funded by the Commonwealth Government." (from website.) It has established a network of hostels across Australia and currently operates 48 of its own while funding 83 others. There are over 3,000 beds available for people who are homeless, receiving medical treatment away from home, rehabilitating from substance abuse, attending a centre of tertiary education, aged and frail, and returning to the community after a prison sentence.

Management and Administration Structure

The AHL is managed by a Board comprising nine Directors. As well as receiving funds from the Commonwealth Government it collects tariff from residents. "Aboriginal Hostels Limited has an Aboriginal and Torres Strait Islander Recruitment and Career Development Policy that is reflected in its workforce. At present Aboriginal and Torres Strait

Islander employees make up 80% of all company staff - making it one of the largest single employers of Aboriginal and Torres Strait Islander people in Australia." (from website.)

"Aboriginal Hostels Limited operates from a central office in Canberra and eight regional offices around Australia. Regional offices are in Perth, Darwin, Cairns, Brisbane, Sydney, Melbourne, Adelaide, and Alice Springs. As well as operating [its] own hostels, AHL funds approved community organisations to run their own." (from website.)

Organisation Ideology

Aboriginal Hostels aims "[t]o achieve excellence in the delivery of hostel accommodation that satisfies the needs of Aboriginal and Torres Strait Islander people" (from website). This accommodation is to be "provided in an environment that encourages ATSI people to achieve personal goals and obtain dignity and equity in the Australian community" (AHL Community Hostel Grants Program 2001, p. inside cover).

Services Provided

Accommodation

The AHL has various categories it uses to distinguish its accommodation facilities. The Mac Silva Centre is described as a homeless hostel where youths and adults are assisted to live independently within the community. And the Tony Mundine Hostel is a place that facilitates access to tertiary education and training by providing accommodation and related facilities to meet their accommodation needs.

Community Hostel Grants (CHG) Program

The AHL provides funds to approved organisations to operate hostels that provide temporary accommodation for their local ATSI community. Grants can subsidise recurrent operating deficits, cover non-recurrent operating expenditure, and minor and major capital expenditure.

[look in Long Grassers Report]

Sources of Information

- Website: <http://www.ahl.gov.au/> viewed in early September.
- *Accommodation Guide 2004*, AHL Australian Government, 2004.
- *AHL Community Hostel Grants Program: Funding Guidelines 2001*.
- *AHL Annual Report 2002-2003*, AHL, ISSN 0313-2129.

No. 3 Organisation/Service Profile

Name of Organisation

Aboriginal Housing Company

Contact Details

104 Lawson Street (opposite Redfern railway station)
 Redfern NSW Australia 2010
 [Open between 10am and 5pm from Monday to Friday.]
 P.O. Box 374
 Strawberry Hills NSW 2012
 Tel: (02) 96989249
 Fax: (02) 93190475
 Email: info@ahc.org.au
 Website: <http://www.ahc.org.au/>
 Contact: Angela (Angie) Pitts
 Email: apit5926@marconi.arch.usyd.edu.au

Background Information

"The lack of affordable housing for Redfern's increasing Aboriginal population resulted in a group of Aborigines squatting in empty terraces on Louis Street in Redfern, in December 1972. ... Under a 'blind-eye' agreement with the owner-developer, the squatters organised themselves and formed a company. The Aboriginal Housing Company, the first housing collective in Australia, was incorporated on 25 July 1973 under the New South Wales Companies Act 1961 (now the Corporations Act.) as a company limited by guarantee. Subject to the legal constitution of the Company, an initial grant of \$530,000 from the Federal government allowed the AHC to purchase and restore the first 29 terrace houses. ..." (from website.)

Population Served by Organisation

"Presently, the Block is land dedicated for use by Indigenous Australians, and continues to be under the management of the Aboriginal Housing Company. This is an area enclosed by Eveleigh, Louis, Caroline and Vine Streets in Redfern ..." (from website.) There are currently 19 homes left on the Block as a result of the Redevelopment Stage 1 relocations resulting from the demolition of the dilapidated housing stock. However the AHC Redevelopment proposes 62 family homes consisting of 3-4 bedroom units.

Management and Administration Structure

The AHC is a community-based organisation incorporated as a limited liability company under the Corporations Act. [It] consists of three tiers of governance. Its grass roots membership is made up of Aboriginal and Torres Strait Islander community people from all walks of life. The members generally meet on an annual basis, or as required by law, to elect directors as representatives and generally monitor company decisions. The Directors on behalf of the members then meet monthly to steer the general direction of the company and to protect the interests of the community. Finally the AHC's management consists of an executive and administration component, both being responsible for the day to day operations of the company with direct accountability to both the Board and the members." (from website.)

Organisation Ideology

"The Aboriginal Housing Company's vision is to provide a clean, healthy and safe environment in which the next generation of Aboriginal children can live harmoniously and grow to achieve the quality of life, standard of living and well-being that most non-indigenous Australians take for granted. As the first Aboriginal housing association in Australia, the Aboriginal Housing Company strives to operate at best practice in its provision of high quality and culturally appropriate affordable housing, for the betterment of Aboriginal people." (extracted from Pemulwuy Project Profile 2000-2004.)

Services Provided

Pemulwuy Redevelopment Project

A redevelopment/reconstruction of 'the Block' is underway in several stages. The vision is "to restore a strong and healthy Indigenous community to Redfern with an emphasis on tradition, cultural values and spirituality" (from website). From 2000 to 2001 an analysis was conducted by the Principal Social Planner (Angie Pitts) and Project Manager (Peter Valilis) which culminated in the production of a Community Social Plan. The AHC then formed a Planning Team to ensure the

best reconstruction outcomes and "to investigate various land use mixes and produce redevelopment concept models" (from website). Along with the Social Plan, a Master Plan Brief will "provide a clear set of guidelines in relation to housing/health, liveability, cultural appropriateness and crime prevention to planners and builders who will become involved in the final redevelopment" (from website).

In November 2001 a series of planning workshops were held to "investigate topics such as town planning, health housing, community and public domain safety and environmental sustainability. These workshops were attended by community members and industry professionals" (from website). A set of recommendations was accepted by the AHC Board and formed the foundation for a series of audits. By mid-2003 the AHC was to have invited "design/construct consortia to participate in an open expression of interest forum" (from website). "On completion of the expressions of interest stage the AHC will evaluate the submissions and choose four applicants to tender for the final design and the eventual construction of the project. ... The AHC expects to begin construction of stage 1 of the project in 2004 with completion of the whole project by the end of 2006." (from website.)

Main Concerns & Issues for Aboriginal Homeless

Angela Pitts lists the following issues:

1. The key issues on the Block have been identified as drug and alcohol problems and the drug-related crime in the area. At the Block, many Aboriginal transients socialise and sleep rough, and it is usually the first point of contact for the transients to find family and friends, shelter, and to inquire about employment, medical and other services in Sydney. There is widespread use of a cocktail mix of drugs, mostly amphetamine based. This forms a lethal combination when mixed with alcohol. A main concern for the Aboriginal homeless is their vulnerability (health and safety) in this area especially if they have an alcohol and/or drug addiction. The Block has a history of overdoses, rapes and murders. Another main concern is also for the homeless youth who are at risk of becoming addicts and/or being targeted to become drug dealers/runners.
2. Another key issue is the lack of Aboriginal specific emergency accommodation and hostels for the Aboriginal homeless in the area, as there is a high transient population.
3. Other key issues include the lack of appropriate and affordable housing, and substandard buildings and the ill-effects on health.

Issues that can be tackled by this Organisation

The benefits of the Pemulwuy Redevelopment Project will include a direct housing and social advantage for the Aboriginal community, with greater access to the Aboriginal services and facilities in Redfern. The benefits of the redevelopment also include (but are not limited to): (1) improved services and activities for youth, and decreased youth at risk; (2) decrease in homelessness and homeless at risk (AHC proposes the building of an Aboriginal hostel as part of redevelopment); (3) greater coordination of drug and alcohol services and increased support; (4) decrease in criminal activity attributed to drug use; (5) discouraging drugs and drug-dealers; and (6) improved Aboriginal health and wellbeing due to improved housing conditions and a clean, drug-free environment. (Refer to Table 1: Direct and Indirect Benefits on pg 8 of the AHC Community Social Plan 2001.)

Sources of Information

- Website <http://www.ahc.org.au> viewed in early September 2004.
- The AHC's *Pemulwuy Project Profile 2000-2004* prepared by Angela Pitts and Peter Valilis.
- Pitts, A. (2001) *Community Social Plan: Pemulwuy Redevelopment Project, Redfern*. Redfern: AHC Ltd. [Viewable online at <http://www.ahc.org.au/splan>]
- Review of draft profile completed by Angela Pitts in early November 2004.

No. 4 Organisation/Service Profile

Name of Organisation

Aboriginal Medical Service Co-op Ltd (AMS)

Contact Details

36 Turner Street

Redfern NSW 2016

Tel: (02) 9319 5823

Branch at 132 Redfern Street (houses the Drug & Alcohol Unit)

Dental Service is temporarily located at South Sydney Hospital

Email: amsredfern@amsredfern.org.au

Open from Monday to Thursdays 9am to 6pm and on Friday from 10am to 5pm

Contact: Brad Freeburn

Email: bfreeburn@amsredfern.org.au

Background Information

Established in 1971, AMS was the first Aboriginal community-controlled health service in Australia. It was setup by Gordon Briscoe, Dr Ferry Grundseit, Dr Fred Hollows, and Colleen Smith and served as a model for other such organisations that appeared elsewhere around the country. Currently the AMS has a reputation for excellence and innovation that is recognised by the World Health Organisation, and is a member of the Aboriginal Health and Medical Research Council (AHMRC) and the National Aboriginal Community Controlled Health Organisation (NACCHO). Merrima, NSW Government's Aboriginal Design Unit is designing new premises on the site of St Vincent's Roman Catholic group of historic building, including a church, convent, presbytery and school (c1887).

Population Serviced by Organisation

As well as providing services to Aboriginal people in Redfern, the AMS helps people from the surrounding suburbs of Chippendale, Waterloo, Surry Hills, Alexandria, Woolloomooloo, and Erskineville.

Organisation Ideology

The AMS philosophy is that the crisis in Aboriginal health will not be mitigated unless substantial control is given over to the communities in which this problem exists, because people respond far better to a sensitive cultural approach and medical workers can arrive at improved solutions through understanding the cultural context in which illness is occurring.

Services Provided

Apart from GP consultations the Service offers pregnancy and women's health care; immunisations; hearing tests; diabetes and heart disease screening, monitoring and care; quit smoking counselling; aged care assessments; podiatry; ear, nose and throat care; children's health care; sexual assault counselling; and cultural awareness. There is also a dental clinic on the premises, as well as a mental health service, an eye clinic, and a drug and alcohol unit. The AMS has an Outreach Worker who contacts prisoners before their release and offers them assistance in planning their return to open society. The organisation has a referral service that also assists homeless people.

Main Concerns & Issues for Aboriginal Homeless

According to Brad Freeburn homelessness is being created through domestic violence, unassisted prison release, and the treatment mentally ill people receive from the medical and government establishment. The AMS deals with all these people, as well as those who are affected by substance abuse. Freeburn states that there is a need for a Youth Centre to encourage young people off the streets. An unsuccessful proposal was prepared by the AMS. Aboriginal country people will frequently arrive in Sydney around 4:30pm on Friday afternoon with few resources and no accommodation plans, and seek help at the AMS offices in Redfern.

Sources of Information

- Website http://www.vibe.com.au/health/health_medical_redfern.asp viewed in early September 2004.
- Website <http://www.gadigal.org.au/main.php?option=medical&itemid=65&parentid=contemporary> viewed in early September 2004.
- Interview with Brad Freeburn of the AMS Drug & Alcohol Unit conducted on 31 May 2004.

No. 5 Organisation/Service Profile

Name of Organisation

Anglicare

Contact Details

Head Office

18 Parkes Street

Parramatta NSW 2150

Tel: (02) 9895 8000

Postal Address

PO Box 427

Parramatta NSW 2124

Websites: <http://www.anglicare.org.au/index.html>

& <http://www.anglicare.asn.au/index.shtml>

Email: communications@anglicare.org.au

Welfare Services

Surry Hills

Tel: (02) 9331 3482

St John's Church

120 Darlinghurst Road

Darlinghurst NSW 2010

Tel: (02) 9360 6844

Email: admin@stjohnsanglican.org.au

Contact: Penelope Read

Tel: 02 9360 6844

Fax: 02 9360 1759

Email: admin@stjohnsanglican.org.au

Background Information

Anglicare, the urban mission and welfare arm of the Sydney Anglican Church, has been serving people in need for nearly 150 years. Its "services include emergency relief for families in crisis; foster care and adoption for abused children and those with special needs; counselling and support for children and youth with disabilities; migrant services; aged care through both nursing homes and community services; opportunity shops providing low-cost clothing; emergency services in times of disaster and chaplains in hospitals, prisons, mental health facilities and juvenile justice institutions." (from Anglicare org.au website.)

"Anglicare Australia was formed in September 1997 and subsequently many Anglican caring organisations around Australia adopted the name Anglicare. But the history of Anglican caring work began ... with the formation in 1857 of the organisation that was to become the Anglican Home Missions Society in Sydney, the predecessor to Anglicare NSW." (from Anglicare asn.au website.)

Population Serviced by Organisation

St John's Church in Darlinghurst primarily serves the street community of Kings Cross and Darlinghurst – a diverse mix of young and old, those living in supported accommodation and those on the street, those with mental health or dependency issues. It also provides community assistance for people who need emergency financial help, food or prescription vouchers, and support in developing skills to cope with lifestyle changes or management.

Further welfare services are provided from Surry Hills for families and young people in crisis.

Management and Administrative Structure

"Increasingly, Anglican caring work is being organised on a diocesan basis and there is now at least one Anglicare Australia member agency in each of the 23 Anglican dioceses in Australia." (from Anglicare asn.au website.)

St John's is an example of a parish based agency with all administrative and management functions occurring within the organisation in the broader context of the pastoral activities of the church.

Organisation Ideology

"The purpose of [Anglicare Australia is] defined in its constitution as: "To lead and support the Anglican Church in pursuit of the gospel imperative of justice and care." (from Anglicare asn.au website.)

Services Provided

Anglicare provides a range of what it calls Welfare Services out of Surry Hills. These include Emergency Relief, Children & Family Services, and Youth in Crisis.

St John's Church in Darlinghurst

St John's provides a variety of services and programmes. The counselling service provides short and long term counselling on a means-related fee-paying basis. A free Legal Counselling and Referral Service provides advice on legal issues. Daytime projects in Rough Edges include:

- Monday Club – an art based club, which provides community and a meal in an interest-based group;
- Community Assistance and Partnership Programme, where appointments with social workers are given to people needing emergency assistance and longer term support;
- Computer Club- enabling access to computers and the internet for participants;
- Rough Edges at night is a drop in centre where patrons have an opportunity to socialise, have a meal and access information about other services.

Main Concerns & Issues for Aboriginal Homeless

Alcohol is a primary issue for Aboriginal homeless. The main services that St John's is approached for are assistance with finances and clothing, and referrals for beds.

Issues that can be tackled by this Organisation

St John's, in its philosophy of taking the whole person's needs seriously, has strategies and resources for tackling all of the above issues, sometimes directly, and at others through partnership with and referrals to other service providers.

Sources of Information

- Website <http://www.anglicare.asn.au/index.shtml> viewed in late August 2004.
- Website <http://www.anglicare.org.au/index.html> viewed in late August 2004.
- Website <http://www.stjohnsanglican.org.au> viewed in mid-November 2004.
- Review of draft profile completed by Penelope Read (St Johns) in early November 2004.

No. 6 Organisation/Service Profile

Name of Organisation

Barnardos Australia

Contact Details

Redfern-Waterloo Intensive Family Support Service (IFSS)

174 Redfern St

Redfern NSW 2016

Locked Bag 3

Redfern NSW 2016

Tel: (02) 9698 9577

Fax: (02) 9698 9019

Email: ifss@barnardos.org.au

Senior Manager: Deirdre Cheers

Email: dcheers@barnardos.org.au

Kathleen Clark

Email: kclark@barnardos.org.au

Background Information

"Barnardos is Australia's leading children's charity providing services which successfully help prevent and reverse the effects of abuse, neglect and homelessness on children and young people. ... Barnardos operates Children's Family Centres, permanency programs for 'out-of-home' care, adolescent services and advocacy work." (from website.) It was incorporated in Australia in 1995 and maintains links with the international organisations (Barnardos UK, Barnardos Ireland, & Barnardos NZ).

Redfern-Waterloo Intensive Family Support Service

This project has initially received two year contract funding (2003-2005) from the NSW Premier's Department, via the Redfern Waterloo Partnership Project (RWPP) [see relevant profile]. The \$1.03 million in funds have been administered via the NSW Department of Community Services, under the Community Services Grants Program (CSGP). The project is being evaluated by UNSW, and has made regular reports to the Redfern Waterloo Partnership Project, in addition to the required CSGP reports to DoCS.

Population Serviced by Organisation

The Redfern-Waterloo IFSS provides services to families caring for dependent children and young people aged 0-17 years, living in Redfern and Waterloo.

Management and Administration Structure

Barnardos Australia is a Company Limited by Guarantee, and a registered charity. Barnardos' governance structure consists of a Board of Directors to whom the Chief Executive and Director of Welfare report. Eight (8) welfare Senior Managers are responsible for approximately sixty (60) direct welfare programs, supported by a centralised administrative structure for accounts payable and payroll (all other administration functions are provided on a localised basis).

Organisation Ideology

"Barnardos believes that services should be delivered to children in their own communities [and] are also best managed so that a flexible range of services is offered to meet the changing needs of children and their families. ... [The organisations'] children's services are based on permanency planning principles. ... Permanency planning principles underlie all Barnardos programs and services, which are designed to achieve a balance between prevention of child abuse and keeping children with their own families (that is preventing entry to the "care" system), restoration of a child to the care of their own parents as first and immediate priority if they have been removed from family and placed "in care", and permanent foster care and adoption for children who have been removed by the Children's Court because of severe child abuse and neglect. Children are kept in the least intrusive type of service so as not to be moved further away from their family's care than necessary." (from website.)

The guiding principles for all Barnardos services and staff are to keep the child and young person central, strengthen families, relate respectfully, value the knowledge of the importance of identity, pursue social justice, invest in the future, and be persistent for change.

Services Provided

Redfern-Waterloo Intensive Family Support Service

"A service delivery model targeting vulnerable families via assertive outreach, intensive home visiting support, community outreach and interagency links/partnerships combined with flexible links/partnerships and use of brokerage funds." (from ACWA presentation No. 1.)

Main Concerns & Issues for Aboriginal Homeless

Deirdre Cheers lists the following issues and concerns regarding the Aboriginal homeless population and Barnardos' experience with their situation:

- Aboriginal couples without children: there is very little emergency accommodation available for this group; couples are frequently forced to separate in order to find emergency accommodation; this causes stress as they are frequently adults who are highly vulnerable and who find it difficult to cope or manage on their own.
- Aboriginal families who have accrued significant debt whilst in public housing are another vulnerable group, as the Housing Department will not house them directly, only offer to pay the bond for private rental.
- Aboriginal people on Newstart allowance are not viewed by Real Estate Agents as having reliable income (as Newstart can be cut off if recipients do not attend the required number of job per week); this disadvantages them in applying for private rental. As attending job interviews when you are homeless is difficult, this creates a vicious cycle of and connection between unemployment and homelessness.
- Families presenting to DoCS as homeless often have their children placed in care, this is inappropriate and not in keeping with the current NSW Care and Protection legislation that requires children and families to be kept together as first and paramount priority.
- There is a lack of readily accessible information for Aboriginal people about housing rights, and what they can expect from the NSW Department of Housing in particular situations; this is compounded when information must be given over the telephone rather than "face to face". Aboriginal people often give up and remain homeless as a direct result.
- As regards Aboriginal youth and young adults who are homeless: the Department of Housing requires that a support network plan is in place specifying the roles played by agencies in supporting homeless young people, and if no such plan is in evidence then housing is not made available; this is not always appropriate, as Barnardos is aware of young adults who have good independent living skills and therefore do not require support, just accommodation, yet without a support plan they are refused housing.
- Aboriginal people report to Barnardos that they regularly encounter racism when dealing with both private housing providers and also the Department of Housing, for example they are told that properties are unavailable, then when Barnardos advocates for them a vacancy is there.
- In summary, NSW urgently requires a "whole of government" approach to Aboriginal homelessness.

Issues that can be tackled by this Organisation

Barnardos supports homeless Aboriginal families with dependent children and young people on an individual client basis via the Redfern Waterloo IFSS, providing direct support and services in addition to advocacy for securing both temporary and permanent accommodation and housing support. On an organisational level Barnardos adopts an advocacy role via submission writing at both State and Federal government level, at every available opportunity. This is part of Barnardos commitment to improving the lives of all Australian children.

Sources of Information

- Website <http://www.barnardos.org.au/barnardos/html/index.cfm> viewed in early September 2004.
- Website http://www.barnardos.org.au/barnardos/html/redfern_waterloo_ifss_1.cfm viewed in early September 2004.
- Online PDF (August 2004 Association of Children's Welfare Agencies Conference *Knowledge into Action*) viewed in early September 2004 at URL http://www.acwa.asn.au/Conf2004/acwa2004papers/25_Clarke.pdf (Powerpoint presentation made by Clarke of Barnardos). (ACWA presentation No. 1.)
- Online PDF as above viewed in early September 2004 at URL http://www.acwa.asn.au/Conf2004/acwa2004papers/13_Cheers.pdf of presentation made by Barnardos Senior Managers Deirdre Cheers (South East Sydney) and Vivienne Cunningham-Smith (South Coast). (ACWA presentation No. 2.)
- Online Powerpoint presentation delivered at the Intensive Family Services 5th National Practice Symposium held in Sydney in 2004, by Kathleen Clarke and Deirdre Cheers of Barnardos Australia. Viewed at URL http://www.burnside.org.au/content_folder/content/INTENSIVE%20FAMILY%20SERVICES%205th%20NATIONAL%20PRACTICE%20SYMPOSIUM.doc in early September 2004.
Review of draft profile completed by Deirdre Cheers (Senior Manager Barnardos South East Sydney & the LAC Project) in early November 2004

No. 7 Organisation/Service Profile

Name of Organisation

Centrelink Redfern
NSW Government

Contact Details

Centrelink Customer Service Centre + Youth Service Centre
Cnr George and Redfern Streets
Redfern NSW 2016
PO Box 1200
Strawberry Hills NSW 2012
Department CEO – Pat Turner
Contact: Donna Craig
Email: donna.craig@centrelink.gov.au

Population Serviced by Organisation

The Redfern Centre services the Hornsby to Uladilla region. Aboriginal homeless people ask for assistance on a daily basis and Centrelink must respond.

Management and Administration Structure

There are 17 specialist staff members working in NSW Centrelink.

Organisation Ideology

Centrelink adheres to the principle that those parents or relatives who have the residential custody of a family's children receive payment.

Services Provided

Providing referrals to other relevant agencies is one of the tasks performed by Centrelink for the homeless who contact it seeking assistance. The government agency also provides outreach services, such as with CDEPs. Centrelink attempts to take a holistic approach by dealing with families rather than individuals only. It is possible to arrange weekly payments instead of fortnightly, however staff are concerned about bringing a person into later hardship by forwarding advance payments.

Centrelink offers an early payment in situations where people or families are attempting to return to a home community. There are a number of restrictions on these payments and they favour people who are returning for funeral or schooling. There is difficulty in getting young Aboriginal men to apply for unemployment assistance. They are intimidated or otherwise reluctant. Centrelink staff regularly visit Aboriginal organisations to discuss this issue and attempt to break down the barrier.

FaCS staff provide policy advice and direction to Centrelink. One of the difficulties customers face is that family payments can be covered by up to seven separate pieces of legislation.

Sources of Information

- Interview with Donna Craig and Gavin Mate (Manager of Centrelink's Aboriginal Service) conducted on 31 May 2004.

No. 8 Organisation/Service Profile

Name of Organisation

City of Sydney Council

Contact Details

City of Sydney
Town Hall House
456 Kent St
GPO Box 1591
Sydney NSW 2001
Contact: Felicity Reynolds (Senior Project Coordinator, Homelessness)
Email: freynold@cityofsydney.nsw.gov.au
Daniel Thorpe (Social Planning Coordinator)
Email: dthorpe@cityofsydney.nsw.gov.au

Homelessness Services Section

Tel: (02) 9265 9667 or 9265 9389 (during business hours)
Email: homelessness@cityofsydney.nsw.gov.au
Website: http://www.cityofsydney.nsw.gov.au/cs_homeless_persons.asp

Homelessness Brokerage Program

Tel: (02) 9265 9087 (HPIC)

Homeless Persons Information Centre (HPIC)

Operates 9:00am to 10:00pm Monday to Sunday
Tel: (02) 9265 9087 or 9265 9081 (within Sydney)
Fax: (02) 9265 9639

City Street Outreach Service

Tel: (02) 9211 6454

Background Information

The City of Sydney amalgamated with South City Sydney Council, and the suburbs of Glebe and Forest Lodge from Leichhardt Municipal Council, on 6 February 2004. The area of inner metropolitan Sydney now serviced by the City of Sydney includes:

Sydney city	Zetland
The Rocks/Millers Point	Redfern
Haymarket	Waterloo
Pymont/Ultimo	Beaconsfield
Glebe/Forest Lodge	Rosebery
Camperdown	Darlinghurst
Chippendale/Darlington	Surry Hills
Newtown	Paddington/Centennial Park
Erskineville	Elizabeth Bay/Rushcutters Bay
Alexandria	Potts Point/Woolloomooloo

Prior to the introduction of the City Street Outreach Service in July 2000, limited outreach services existed for homeless people in Central Sydney. Aside from ad hoc mobile transport and/or food services, there was no targeted service provision for people sleeping on city streets or in public spaces. (CoS, n.d.)

Population Serviced by Organisation

The City of Sydney provides a range of community services and programs to more than 141,000 residents across the LGA, as well as approximately 350,000 workers and 450,000 visitors who enter the City each day.

The City's homelessness services are provided to both residents of the LGA and people from across NSW. Specifically, the HPIC is a state-wide service while the Homelessness Brokerage Program focuses on people within metropolitan Sydney and inner Sydney in particular. The City Street Outreach Service operates solely within the CBD area of the City

of Sydney, alongside the Homelessness Action Team Support and Outreach Service (HATSOS) operated by the Department of Housing.

The City's external staff, for example, parks officers and City rangers, work closely with homeless people and local homelessness services to ensure that people who are sleeping on the streets are treated with respect and dignity and are offered assistance in relation to accommodation, support and health services, where appropriate.

Management and Administrative Structure

The Council is governed by 10 recently elected Councillors, including Clover Moore MP, the Lord Mayor. The Councillors set the policy directions of Council while the General Manager is responsible for the day to day administrative operations. There are approximately 1500 staff within the City of Sydney, split into the following departments:

- Community Living
- City Development
- City Planning
- City Works
- General Manager's Unit
- General Counsel

Organisation Ideology

The City of Sydney's operations and philosophy reflect the aim of the NSW State Government's 'Homeless Persons Protocol', a key principle of which is the right for people to be in a public place. Also implicit in this policy is the idea that people may sleep in public places and should not be harassed or moved on from these places. (F.R., 26/9/02, 1/10/02.) Police are to be called if a homeless person is a risk to themselves or others. The Police in turn are required to take the person to a relative or carer as the first priority, failing this, to an Intoxicated Persons facility.

The City's draft Homelessness Strategy outlines Council's key principles and responsibilities and specifies that its dealings with people who are homeless will be undertaken in a compassionate and supportive manner.

Services Provided

Homeless Persons Information Centre (HPIC)

HPIC began service delivery in 1984 with a limited telephone service. Since then, it has grown in stages as demand for its services has increased. It is operated directly by the City of Sydney and is jointly funded by the City of Sydney, the NSW Department of Community Services and the NSW Department of Housing. (CoS, n.d.)

The HPIC is a telephone-based service that assists homeless people and agencies working with homeless people by providing: immediate advice and information, referral to crisis accommodation and referral to support services. It provides professional assessments and referrals for clients seeking accommodation and support services within NSW. The centre is in constant communication with welfare service providers throughout Sydney and NSW. HPIC can make referrals for individuals, couples and family groups over 18 years of age. HPIC Referral Officers prefer to speak to the client directly, allowing clients to express their own needs and experiences and give their permission for staff to disclose personal details in making a referral to other services. Clients are also able to contact the service anonymously and information will be provided, but referrals cannot be made. (from website.)

One way by which the Centre is advertised is with a graphic postcard that contains: brief explanatory information; relevant phone numbers; names of other agencies with which it can liaise (Mission Australia, St Vincent de Paul, Salvation Army, Anglicare, Wesley Mission, YWCA); as well as the types of services that are on offer, all said to be within walking distance in the central city area (accommodation, food, transport, showers, laundry, health services, clothing, legal services).

HPIC is accredited under a national standards system for customer service. In 2000/2001, it responded to 41,397 calls. Of these, 34,542 calls (83%) were from clients requesting assistance, while the balance were calls from other agencies that were not client specific. The number of people seeking assistance from the Centre rose 14.7% in the 12-month period ending 30 June 2001. In 2000/2001, HPIC successfully assisted 84% of clients who sought crisis accommodation and support assistance. The total number of callers to HPIC for the 2001-2002 financial year was 44, 455. [Note: these are callers not individuals; some people phone HPIC more than once over a given year. The total number of callers who were recorded as being of Aboriginal or Torres Strait Islander background was 2,608 (ie 5.8% of all callers)]. (p.c. Felicity Reynolds, CoS, 23/10/02.)

Homelessness Brokerage Service

In the mid 1990s, the City of Sydney Homelessness Persons Information Centre (HPIC) identified an increase in the number of homeless people whose relatively low level immediate accommodation needs were not being met by the crisis accommodation sector. The Homelessness Brokerage Program was established in 1997 in an attempt to address this accommodation shortfall and service clients across Metropolitan Sydney, with a focus on Central Sydney. (CoS, n.d.)

This service assists people who are homeless to secure long-term accommodation, and where necessary, other support services to enable them to live independently. To achieve this goal, it provides short-term accommodation, food, transport and other support to homeless people, and those who do not require supervised accommodation. The Service is provided by the YWCA of Sydney (refer YMCA profile) under contract to the City of Sydney. It assists clients from across metropolitan Sydney, with a focus on the central Sydney area. Brokers assess the needs of the client in a face-to-face interview and negotiate an assistance package with them. Clients may receive free accommodation and support services for up to 14 days in one year. The service is available to single men and women, couples, and family groups, and may assist up to 160 people per month. The hours of service are 9:00am to 10:00pm every day. Referrals are made to the Brokerage Service by the Homeless Persons Information Centre. (from website.)

Since its inception, the Homelessness Brokerage Program has provided more than 7,000 assistance packages to clients. On average, the Program delivers more than 1,800 assistance packages per annum. In 2000/2001, a total of 2,158 clients were assisted, of which 891 clients accessed immediate shelter. (CoS, n.d.)

City Street Outreach Service

The City Street Outreach Service is a City of Sydney service provided by the Independent Community Living Association. The service provides outreach assistance to people who are homeless and sleeping rough in the City of Sydney local government area. The team is made up of professional workers who make patrols throughout the City, offering homeless people assistance to access housing, health services and other community services. The team works closely with local health and social service providers to ensure the best possible results for people who accept assistance. Since the service was established in 2000, it has made contact with more than 660 people. A significant number were assisted into both short-term and long-term housing and have been linked with other support services. The team works 7 days a week, between 8:00am to 10:00pm on weekdays and from 2:00pm to 10:00pm on weekends. It also responds to referrals. The service is fully funded by the City of Sydney. (from website.)

Main Concerns & Issues for Aboriginal Homeless

The key issues for Aboriginal people that have been identified by Council staff, through consultations with local people and organisations, include:

- A lack of culturally-specific accommodation, health and support services, including crisis accommodation and medium to long-term housing within the LGA, and detox/rehabilitation centres;
- A lack of Indigenous staff within local homelessness service providers adding to difficulties in reaching Aboriginal people who are homeless;
- High proportions of young people and women, including women with children, who are homeless and have special needs;
- High proportions of drug and/or alcohol addictions amongst the Aboriginal homeless population;
- Very poor physical health levels;
- Lack of trust within the Aboriginal community of Police, government and non-government workers; and
- Conflict and disharmony between non-Indigenous people and Indigenous people who are homeless. (p.c. Daniel Thorpe, CoS, early November 2004.)

Issues that can be tackled by this Organisation

Council is actively addressing the following issues for Aboriginal people who are homeless:

- Convening an Aboriginal Homelessness Workers Network to better coordinate the provision of services and accommodation options for local homeless people;
- Ensuring that Council cleansing and parks staff and rangers work in cooperation with homeless people and local services in the management of the public domain;
- Raising issues relating to Aboriginal homelessness in Redfern at the Street Outreach and Support Services Committees run by the Department of Housing; and
- Incorporating actions to address Aboriginal homelessness within the draft City of Sydney Homelessness Strategy. (p.c. Daniel Thorpe, CoS, early November 2004.)

Sources of Information

- Website http://www.cityofsydney.nsw.gov.au/cs_homeless_persons.asp viewed in late August 2004.

- Interview with Daniel Thorpe conducted on 31 May 2004 (Tel: 02 9288 5344).
- City of Sydney, [n.d.] The City of Sydney's Homelessness Strategy, URL http://www.cityofsydney.nsw.gov.au/pdf/catz_hp_homeless_strategy_0700.pdf viewed in late October 2004.
- City of Sydney 2002 *Improved Outcomes for Homeless People, City Homelessness Strategy*, An initiative of the City of Sydney, The City of Sydney [Local Authority], Sydney, February. [pamphlet.]
- Review of draft profile completed by Daniel Thorpe (CoS Social Planning Coordinator) in early November 2004.

No. 9 Organisation/Service Profile

Name of Organisation

CRASH (Construction Industry Relief and Assistance for Sydney's Homeless)

Contact Details

C/o I B Fell Housing Research Centre

Faculty of Architecture (G04)

University of Sydney NSW 2006

Tel: (02) 9351 4100

Fax: (02) 9351 3031

Email: fell@arch.usyd.edu.au

Contacts: Col James & Sue Clarke

Background Information

CRASH is a charitable research project associated with the University of Sydney and the I B Fell Housing Research Centre. It engages the private sector property industry and facilitates their support of homeless people with medium-term shelter in vacant buildings throughout the city of Sydney. The NSW President of the Australian Institute of Architects, and the convenor of the NSW Inter-government Task Force on Homelessness launched the project in early October 2002. The first meeting of its Advisory Committee was held in December 2002. A few years prior to this a settlement between South Sydney City Council and the Broadway squatters of the Sydney Housing Action Collective negotiated by Australand Holdings Ltd served as a catalyst for the formation of CRASH.

The CRASH (UK) organisation has played a recognised mentoring and inspirational role in the development of this Sydney-based project. Visits were made in 2003 by some CRASH (UK) officials, such as the Director and the Building Manager. There is an ongoing exchange of research findings and project news.

The CRASH project in Sydney has also been assisted by the UTS Community Law and Legal Research Centre and ESTP Inc (Empty Spaces, Temporary Places).

Population Service by Organisation

CRASH serves the homeless population of the city of Sydney. Its pilot projects have focused on 18 to 25 year olds, particularly students, but overall it aims to provide temporary accommodation for all types of homeless people. It also publishes a booklet that advises members of the property industry, such as builders and building owners, how everyone can benefit in specific and tangible ways from providing homeless people with limited access to vacant buildings.

Management and Administration Structure

The CRASH scheme is guided by an Advisory Committee, while the day-to-day operation of individual projects is managed by members of the I B Fell Housing Research Centre, which has established working relationships with the relevant local and State government agencies and members of the property industry.

Organisation Ideology

The CRASH project seeks to reveal to both homeless people and the property industry the benefits of renovating disused buildings for temporary accommodation, and to see such schemes take shape around Sydney. A key instigator of the project, Col James, was influenced by the Garma Festival held in Sydney in 2002. Garma theory involves reconciliation—a mixing of fresh and salt waters—to generate a matrix of values (Col James, 25/9/02).

Services Provided

The CRASH project seeks to provide small groups of homeless people access to safe, low-cost and independent accommodation, thereby breaking the cycle of homelessness. It may also provide employment opportunities through caretaking and labouring to renovate the selected buildings. The potential benefits to building owners include reduced insurance for occupied buildings, reduced 24hr security costs, rate relief and improved standing in the eyes of the community. Builders may also benefit in having access to a source of preliminary on-site labour, in being able to securely stockpile surplus materials and improve their relations with unions.

Sources of Information

- *CRASH News*. Issue No. 1, October 2003.
- Website <http://www.crash.org.uk> viewed in mid-October 2004. (No. 1.)
- Website http://www.arch.usyd.edu.au/nwfa/research/centres_ian.html viewed in mid-October 2004. (No. 2.)
- Pryor, L. "Home for Sydney squatters with fire in its belly." *Sydney Morning Herald*, 7 October 2003. Viewed at URL <http://www.smh.com.au/articles/2003/10/06/1065292527665.html?from=storyrhs&oneclick=true> in mid-October 2004.
- Col James, 25/9/02.

No. 10 Organisation/Service Profile

Name of Organisation

Crossroads Christian Ministry

Contact Details

115 Young Street

Redfern NSW 2016

Contact: Paster Ray Minniecon

Email: minnieconr@wva.org.au

Background Information

The Crossroads Christian Ministry is an Indigenous Australian church whose focus is on Aboriginal and Torres Strait Islander people in the neighbourhood of Redfern. It is part of Anglican Parish of South Sydney.

Population Service by Organisation

This ministry serves the Aboriginal people of the study area, particularly in Redfern.

Management and Administration Structure

"While being run by and for Indigenous people in a style that is responsive to their cultural needs and sensitivities, it is inclusive of and welcoming to all peoples. Ray Minniecon and Bill Simon have been employed as the Pastors since 2003, but both have been engaged in this ministry in Redfern for much longer than that." (website)

Services Provided

Ray Minniecon runs an Aboriginal Alcoholics program.

Sources of Information

- Website http://users.bigpond.net.au/parsifal/South_Sydney_Anglican/south_sydney_anglican_church.htm viewed in early 2005.

No. 11 Organisation/Service Profile

Name of Organisation

The Gender Centre Inc.

Contact Details

75 Morgan Street

Petersham NSW 2049

[10am-5.30pm Monday-Friday]

PO Box 266

Petersham NSW 2049

Tel:(02) 9569 2366

Fax:(02) 9569 1176

Email: gendercentre@bigpond.com

Contact: Elizabeth Riley (General Manager)

Background Information

"In the very early 1980's, a small band of transsexual people held weekly support meetings at the Wayside Chapel, in Kings Cross, Sydney. A transgendered woman, Roberta Perkins, who had completed an honours thesis on transsexuals approached Reverend Bill Crews of the Wayside Chapel Crisis Centre to ask if he would consider the use of the chapel for a regular meeting place offering support to the transsexual girls of the Cross." (from gendercentre.org.au website.)

Apart from homelessness and discriminatory treatment as tenants, many transgendered worked as prostitutes and were vulnerable to violence, robberies and sexual assault. In the early 1980's many refugees would not serve transgender individuals. Drug dependence was also an issue in these people's lives.

"After consultation with Reverend Bill Crews and Reverend Ted Noffs together with Roberta Perkins, regular weekly support meetings for transsexuals commenced." (from gendercentre.org.au website.) In 1984 Roberta Perkins made a submission to the then Department of Youth Affairs & Housing that was accepted. Tiresias House was established in Petersham as a refuge for young transsexuals. "It was funded entirely by the NSW Department of Community Services (DOCS) through the SAAP program. Two 'annex' (semi-supported) houses located at Haberfield and Ashfield opened soon after." (from gendercentre.org.au website.)

"By 1993, DOCS and the NSW Department of Health entered into a joint funding agreement. This meant that Tiresias House was funded to provide services to minimise the effects of HIV/AIDS on the transgender community. These services included Outreach and a Community Worker position. At this time, Tiresias House was incorporated and renamed The Gender Centre Inc, to reflect the change in services and service philosophy." (from gendercentre.org.au website.)

Population Service by Organisation

After 1993, "[r]ather than targeting simply young transsexuals, the service began to target people with gender issues, which included people who identified as transsexual or transgender, cross-dressers and any other person who experienced issues, problems or difficulties relating to the gender assigned to them at birth." (from gendercentre.org.au website.)

Organisation Ideology

"The Gender Centre is committed to developing and providing services and activities which enhance the ability of people with gender issues to make informed choices. ... [It] is also committed to educating the public and providers about the needs of people with gender issues. ... [They] specifically aim to provide a high quality service, which acknowledges human rights and ensures respect and confidentiality." (from gendercentre.org.au website.)

Services Provided

The Gender Centre provides "a wide range of services to people with gender issues, their partners, families and friends in NSW. [They] also act as an education, support, training and referral/resource centre to other organisations and service providers." (from gendercentre.org.au website.)

Counselling

The Centre "[p]rovides counselling to residents, clients and partners, families and friends of people with gender issues. Also provides education, support and referrals to a range of specialist counselling." (from gendercentre.org.au website.)

Training & Education

"Training, support and workshops are available to employers, service providers, students and other people interested in gender issues. Topics covered include implications for staff and clients in relation to anti-discrimination legislation, EEO issues, workplace harassment and provision of goods and services as well as many personal aspects of the transgender process." (from gendercentre.org.au website.)

Social & Support Service

The Centre "[p]rovides social and support groups and outings. [It] also provides referrals for medical HIV/AIDS, education, training, employment, legal, welfare, housing and other community services to residents and clients living in the community." (from gendercentre.org.au website.)

"This service includes Drop-Ins, Workshops, Support Groups, Outings and Social Events which are organised at regular intervals throughout the year." (from gendercentre.org.au website.)

Outreach Worker

This worker is "[a]vailable to clients in the inner city areas on Thursdays from 10am to 5pm and Tuesday nights from 6pm to 2am. Also available to clients confined to home, hospital or jail (by appointment only)." (from gendercentre.org.au website.) The outreach worker also provides support, education and referrals to a broad range of drug and alcohol services" (from gendercentre.org.au website.)

Residential Service (incl. case management)

The Centre "[p]rovides semi-supported share accommodation for up to 11 residents of age 16 and above. Residents can stay up to twelve months and are supported to move towards independent living. During their stay they are also encouraged to consider a range of options available to meet their needs. A weekly fee is charged to cover household expenses." (from gendercentre.org.au website.) Those who find themselves in Centre housing are offered case management services.

Resource Development

"Resource Development provides a range of print resources on HIV/AIDS, medical and other information relevant to people with gender issues and their service providers. Information packages, fact sheets and other printed materials, including a free, quality bi-monthly magazine 'Polare' and specialised advertising supplement." (from gendercentre.org.au website.)

Sources of Information

- Website <http://www.gendercentre.org.au/> viewed in early December 2004.
- Website <http://www.nada.org.au/agencydetails.asp?AgencyID=1&Query=> viewed in early December 2004.

No. 12 Organisation/Service Profile

Name of Organisation

The Haymarket Foundation

Contact Details

165B Palmer Street
East Sydney NSW 2010
Tel: (02) 9331 1969
Fax: (02) 9361 5417
Email: hmkfdn@ozemail.com.au

Bourke Street Clinic

165A Palmer & 221–227 Bourke Street
East Sydney NSW

Background Information

"The Haymarket Foundation manages three discreet programs that provide a range of medical, welfare and accommodation services to the homeless and disenfranchised people in the inner city [Sydney]." (from nada.org.au website)

Population Service by Organisation

This foundation serves the homeless of inner Sydney.

Management and Administration Structure

The Foundation's head office employs a Chief Executive Officer and an Admin Assistant. Its clinic employs two doctors, two clinical nurse specialists, three welfare workers, and its residential drug rehabilitation centre employs a coordinator and one welfare worker. Its accommodation facility in Albion Street employs a Manager and Administrator and twelve welfare staff.

The Foundation is directed by a Board.

Services Provided

The Haymarket Clinic provides primary health care and welfare services. The Foundation's Bourke St Project provides a residential drug and alcohol rehabilitation program. And the Albion Street Lodge provides overnight crisis accommodation for substance abusers. It is a Proclaimed Place (Central) to which intoxicated persons can be taken by the Police under NSW state legislation.

"The Central Proclaimed Place [Albion Street] has become a model for drug and alcohol services of its kind throughout Australia and is nationally and internationally recognised for its excellent work. Unlike most honourable members who luckily enough have not had such a close association, I am in a special position to comment on this bill." (Mr Rozzoli to NSW Legislative Assembly on 7 June 2000 from website parliament.nsw.gov.au see below.)

Sources of Information

- Website <http://www.nada.org.au/agencydetails.asp?AgencyID=54&Query=> viewed in early December 2004.
- Website <http://www.parliament.nsw.gov.au/prod/parlment/hansart.nsf/V3Key/LA20000607052> viewed in early December 2004.

No. 13 Organisation/Service Profile

Name of Organisation

Hillsong Church and Foundation

Contact Details

City Campus

188 Young St

Waterloo NSW 2017

Email: city@hillsong.com

Tel: (02) 8853 5353

Fax: (02) 9310 7410

Redfern Centre

Email: redfern.emerge@hillsong.com

Phone: +61 2 9690 2532

Background Information

"Brian and Bobbie Houston are the senior pastors of Hillsong Church in Sydney, Australia, incorporating two major worship centres (Hills and City), a city-wide network of Connect Groups and contributing ministries and outreach services. ... They came to Australia in 1978 and joined the ministry team of Sydney Christian Life Centre which was pioneered in July 1977. ... In August 1983, they founded Hills Christian Life Centre ... Today Hillsong Church operates from a 21 acre site in a modern business park in the Hills District, and from a contemporary facility near the heart of Sydney's CBD. With a total of 17,500 on any given weekend, the reputation of the church continues to expand, having a dynamic influence and impact in the nation of Australia and internationally." (from website)

Population Service by Organisation

The Hillsong Church works with people from the study area.

Organisation Ideology

The church's Mission Statement is: "To reach and influence the world by building a large Bible-based church, changing mindsets and empowering people to lead and impact in every sphere of life" (from website).

Services Provided

The Foundation runs a range of community focused programs including its Street Teams or "... teams of volunteers who go into the local community doing random acts of kindness and offering practical help free of charge. House calls are made in disadvantaged areas - work includes cleaning, painting, gardening ... whatever needs to be done. Refuges and homeless areas are visited to build relationships and offer pathways to transformation." (from website.)

The Foundation also runs Mercy, which "... exists to see young women aged 16 to 28 years reach their full potential through participation in our residential based program. ... Each young woman participates in class time, life-skills training, recreation and counselling based on Christian principles.

The Foundation runs a Centre in Redfern that seeks help "people break out of a welfare/victim mindset and connect to their value and potential" (from website). The Hillsong Emerge Centres are about:

- "CONNECTING with people at their point of need through initiatives including Personal Support Programs, Emergency Relief, Shine Community Girls Group, and referrals from government and community service providers.
- BUILDING capacity in people and developing pathways through the specialised ministries within the Centre.
- CONTRIBUTING to the community by seeing lives valued, people working, generating income and volunteering." (from website.)

Sources of Information

- Website <http://www.hillsong.com/church/bin/view.pl?sitename=church&page=welcome> viewed in early 2005.

No. 14 Organisation/Service Profile

Name of Organisation

Homelessness Action Team Support and Outreach Service (HATSOS)
NSW Department of Housing

Contact Details

NSW Department of Housing

Redfern Offices

Poets Corner

55 Morehead Street Redfern 2016

Tel: (02) 9698 1284

McKell

55 Walker Street Redfern 2016

Tel: (02) 9698 1263

Surry Hills Office

The Pottery

Belvoir Street Surry Hills 2010

Tel: (02) 9319 9333

Waterloo Office

Drysdale

232 Pitt Street Waterloo 2017

Tel: (02) 9310 8666

Website: <http://www.hpa.nsw.gov.au/>

HATSOS

Tel: 1800 505 501 (free call within Sydney Metropolitan area except from mobile phones)

Background Information

The HATSOS is part of the Inner City Homelessness Action Plan that is guiding the NSW Government's efforts to change the lives of homeless people in Sydney.

Population Service by Organisation

HATSOS maintains a street presence throughout the inner city suburbs of Sydney, however it does have the flexibility to respond to priority areas as the need arises. Its top priority areas include: Woolloomooloo, Kings Cross, Redfern and Surry Hills. Specialist service staff and mechanisms for working with Aboriginal clients are being introduced.

Management and Administration Structure

The HATSOS is run by the NSW Department of Housing, on behalf of the NSW Government's Partnership Against Homelessness, with support from City of Sydney Council, the Department of Community Services, Premiers Department and NSW Health. [Note: the NSW Government's Partnership Against Homelessness is a network involving numerous government agencies, the Aboriginal Housing Office and the NSW Police.] The HATSOS compliments the outreach service provided by the City of Sydney Council.

Organisation Ideology

The HATSOS places the needs of its clients at the heart of its service.

Services Provided

HATSOS – Homelessness Action Team Support and Outreach Service

"The HATSOS is a one stop shop that helps homeless people who are sleeping rough in the inner city suburbs of Sydney make the move from the streets to appropriate long-term accommodation with the support they need. The HATSOS provides a specialised street outreach service that is linked to support professionals." (from website No. 1.)

The HATSOS Outreach Team is available from 7am to 7pm on Monday to Fridays (except on public holidays). It is the first point of contact for homeless people sleeping rough. Team members talk with homeless people about what they need and then assist them to locate a relevant service like temporary accommodation or meals.

The Support Team is available from 9am to 5pm on Monday to Fridays (except on public holidays). It works with people who have already come into contact with the Outreach Team, assisting them with day-to-day living skills, connecting them with community support networks, helping to establish long-term accommodation, and supporting arrangements with health and welfare agencies.

Sources of Information

- Website <http://www.ncoss.org.au/links/links.html> viewed in early September 2004 (Council of Social Service of NSW).
- Online pamphlet available at http://www.hpaa.nsw.gov.au/news_publications/HATSOS%20pamphlet%20-%20FINAL%20AUG%2003.pdf viewed in early September 2004 (NSW Dept of Housing).

No. 15 Organisation/Service Profile

Name of Organisation

Independent Community Living Association Inc (ICLA)

Contact Details

Head Office

Suite 76, Level 7

8-24 Kippax Street Surry Hills

P O Box K305 Haymarket NSW 1240

Tel: (02) 9281 3338

Fax: (02) 9281 3339

Website: <http://www.icla.org.au/>

City of Sydney Street Outreach Service

Suite 77, Level 7

8-24 Kippax Street

Surry Hills NSW 2010

Tel: (02) 9211 6454

Fax: (02) 9281 6817

Email: homeless@icla.org.au

Contact: Liz Giles (Team Leader)

Background Information

The Independent Community Living Association (ICLA) is a non-government association, providing a range of services to people with psychiatric and other disabilities in the community. It is incorporated as an association in NSW, and has been operating since 1984. Its residential and outreach services are funded through the NSW Department of Health; NSW Department of Ageing, Disability and Home Care; and the City of Sydney.

ICLA "was established in 1984 to aid a group of boarding house residents in Bondi who were facing eviction. ... [It] remained a small organisation for a number of years, employing around thirteen staff and struggling to remain within budget while providing the support required by [its] clients. The Management attempted to acquire funding through various sources in order to expand, and thereby achieve greater stability and resources. Due to ICLA's modest size and lack of profile, this was difficult to achieve, until 2000, when two funding submissions were approved in quick succession." (from website.) The City of Sydney Council provided funds for the Outreach Service and the NSW Department of Ageing, Disability and Home Care for residential facilities.

Population Serviced by Organisation

The organisation serves the entire NSW population. The ICLA's Outreach Service provides assistance to all homeless people with mental and physical disabilities in inner Sydney who require assistance to live independently. CSOS service boundaries fall within the area previously covered by the former City of Sydney Council before it amalgamated with South Sydney Council: Central Business District, Circular Quay, Millers & Dawes Point, The Rocks, Pyrmont, Ultimo, Haymarket, and The Domain.

Management and Administration Structure

A volunteer Management Committee, the nine members of which are elected annually by the organisation's entire membership, manages the ICLA.

Organisation Ideology

The ICLA's mission is "[to provide a holistic professional service facilitating the inclusion of [its] clients into the community of which they are a part" (from website). Its vision is of "a strong and vibrant community tolerant and accepting of individual differences with equal access to appropriate and effective resources to maintain good health and welfare (from website)."

Services Provided

City Street Outreach Service (CSOS)

ICLA was first contracted to operate an outreach service by the City of Sydney in July 2000. CSOS was established as part of the City's 'Homelessness Strategy' to assist its homeless people to access support and other services.

CSOS's service model is based on a case management approach to working with the homeless and the long-term homeless in particular. Their objective is to work with those individuals to address, and where possible, resolve issues that are keeping them entrenched within a cycle of homelessness. This is achieved and coordinated through Individual Support Plans (ISPs) which are developed in consultation with their clients and in collaboration with other services where and when appropriate. CSOS works with its clients to facilitate access to assistance across the spectrum of social services and advocate on their behalf where barriers to access exist.

CSOS also maintains regular contact with other individuals on the street who do not wish to engage in a support plan but who may request immediate/crisis assistance or with whom friendly relationships have been established.

CSOS operates seven days a week. Client contact with the service is voluntary.

Hours of operation

Monday and Wednesday	07:00 AM to 23:00 PM
Other weekdays	07:00 AM to 21:00 PM
Weekends / Public Holidays	09:00 AM to 17:30 PM

CSOS accepts referrals to work with individuals from various agencies in the area in addition to the number of persons engaged with on the street. The Team works with other services in the community, assisting clients to achieve outcomes of improved health, housing and welfare status. Referrals are made for:

- Accommodation services such as crisis, short-term, supported, community, and Department of Housing accommodation;
- Health services such as primary health, mental health, and drug and alcohol services;
- Welfare services such as material aid, counselling, and support services, Centrelink and the Protective Office.

Clients can be assisted on an immediate, short-term basis, or supported for long-term outcomes.

Sources of Information

- Website <http://www.icla.org.au/> viewed in early September 2004.
- Review of draft profile completed by Liz Giles (CSOS Team Leader) in early November 2004.

No. 16 Organisation/Service Profile

Name of Organisation

Kirketon Road Centre (South Eastern Sydney Area Health Service)

Contact Details

K1 is located above the fire station on the corner of Darlinghurst Road and Victoria Street, Kings Cross.

K2 is located at 38 Darlinghurst Road, Kings Cross.

KRC switchboard: (02) 9360 2766

Fax: (02) 9360 5154

Contacts: Anne O'Loughlin or Wendy Machin

Background Information

"The Kirketon Road Centre (KRC) was established in April 1987 as a NSW State Government initiative following [the] recommendations [made by] the Parliamentary Select Committee on Prostitution in NSW (Rogan Report 1986)." (From website.)

Population Service by Organisation

The Centre services: 'at risk' youth (clients under 25 years living a street-based lifestyle in Kings Cross), sex workers and injecting drug users.

Management and Administration Structure

The KRC operates as a satellite facility of Sydney Hospital and Sydney Eye Hospital, and is funded and managed by the South Eastern Sydney Area Health Service.

Organisation Ideology

The service aims to:

- "Prevent and minimise HIV/AIDS and other transmissible infections (including sexually transmissible infections and hepatitis) among 'at risk' youth, sex workers and injecting drug users", and
- "Treat and care for clients with HIV/AIDS and other transmissible infections among these target populations" (from website).

The "KRC provides an anonymous service and client confidentiality is rigorously maintained" (from website).

Services Provided

The Centre operates two outlets or service locations in Kings Cross. The first (K1) provides "a comprehensive medical, counselling and social welfare service including methadone access and needle syringe programs" (from website). The second (K2) is a satellite of the first and "provides a needle syringe service, health and social welfare advice, and assessment and referral to drug treatment and other relevant services" (from website). It is located at the centre of where sex work and drug sales are undertaken in Kings Cross. The Centre also "operates a mobile outreach service, which provides health education, needle syringe service and assessment and referral to drug treatment for hard to reach populations" (from website).

In addition to the assistance it provides in relation to sexual health and safe injecting drug use, the Centre provides general women's health checks, such as pap smears, as well as assistance with transgender issues, addictions, family planning and pregnancy, social welfare such as housing and income, and counselling for emotional problems.

The KRC also features a group room in which "individuals [can] explore issues with staff in a more informal setting. This informal use of the space is seen as part of KRC's outreach efforts. The group room is also used to conduct special groups (creative writing, music and art) and focus groups" (from website).

"An Aboriginal health education officer is employed to explore and address any specific needs with respect to HIV prevention, sexual health and illicit drug use that Aboriginal clients among KRC's target populations may have. The Aboriginal worker is also actively involved in community education efforts to sensitise mainstream HIV and drug services to Aboriginal-specific needs, and Aboriginal-specific services to needs with respect to HIV prevention, sexual health and illicit drug use." (from website.)

"KRC conducts regular education and training sessions for a variety of organisations on request. KRC also conducts a Needle Syringe Program and Outreach Training courses. These courses provide training in harm minimisation, basic drug information, blood borne virus transmission, developing outreach skills, occupational health and safety, overdose intervention and child protection issues. ... KRC runs a Health Promotion Program which provides health education and promotion activities through all units and services of KRC. The unit conducts these activities as co-ordinated campaigns, providing consistent information and advice to clients through all the services of the Centre. The health promotion program also develops written, multimedia and audio visual resources appropriate for clients and/or health care workers." (from website.)

K1 is open from 10am to 6pm on Mondays to Fridays. On Thursdays it is open from 10am to 3pm. On weekends and public holidays it is open from 10am to 1.45pm. K1's dental clinic is open on Mondays from 2pm to 4pm. K2 is open from 1.30pm to 10pm, 7 days a week. The Outreach service operates 7 days a week in East Sydney, Darlinghurst and Kings Cross.

Sources of Information

- Website <http://www.sesahs.nsw.gov.au/sydhosp/KRC.asp> viewed in early November 2004.

No. 17 Organisation/Service Profile

Name of Organisation

Mission Australia

Contact Details

Campbell House

19 Denham Street

Surry Hills NSW 2010

Tel: (02) 9380 5055

Fax: (02) 9331 8177

Email: nswcommunityservices@mission.com.au

Website: www.missionaustralia.com.au

Contact: Kay Elson (Project Manager, Campbell House Redevelopment & Operations Manager, Campbell House & Aged Care Services)

Email: elsonk@missionaustralia.com.au

Level 14, 97-99 Bathurst Street

Sydney 2000

Tel: (02) 9641 5011

Mobile: 0417 289 487

Fax: (02) 9641 5748

Missionbeat

Tel: 1300 306 461

11 Hunt Street

Surry Hills NSW 2010

Tel: (02) 9211 9070

Rawson Centre

19 Denham St

Surry Hills NSW 2010

Tel: (02) 9380 5055

Drummoyne Lodge

Drummoyne NSW 2047

Tel: (02) 9181 1986

Missionholme

47 Redfern Street

Redfern NSW 2016

Tel: (02) 9319 6304

The Crossing

Kings Cross NSW 2011

Tel: (02) 9357 1144

Lou's Place

Kings Cross

Tel: (02) 9358 4553

Women in Supported Housing

Tel: (02) 9358 6222

A Woman's Place

Potts Point

The Gateway – Men's Supported Housing Program

Tel: (02) 9740 6350

Fairfax House

Summer Hill

Tel: (02) 9799 8528

Charles Chambers Court

Background Information

This organisation began as the Sydney City Mission in 1862. In 1989 Mission SA joined with Sydney City Mission to create Mission Australia. Since that time Mission organisations from around Australia have joined forces and in 2000 all were incorporated under the banner of Mission Australia. Key to the growth of the organisation has been its stake in the privatisation of employment services by Federal government undertaken in 1998.

Population Serviced by Organisation

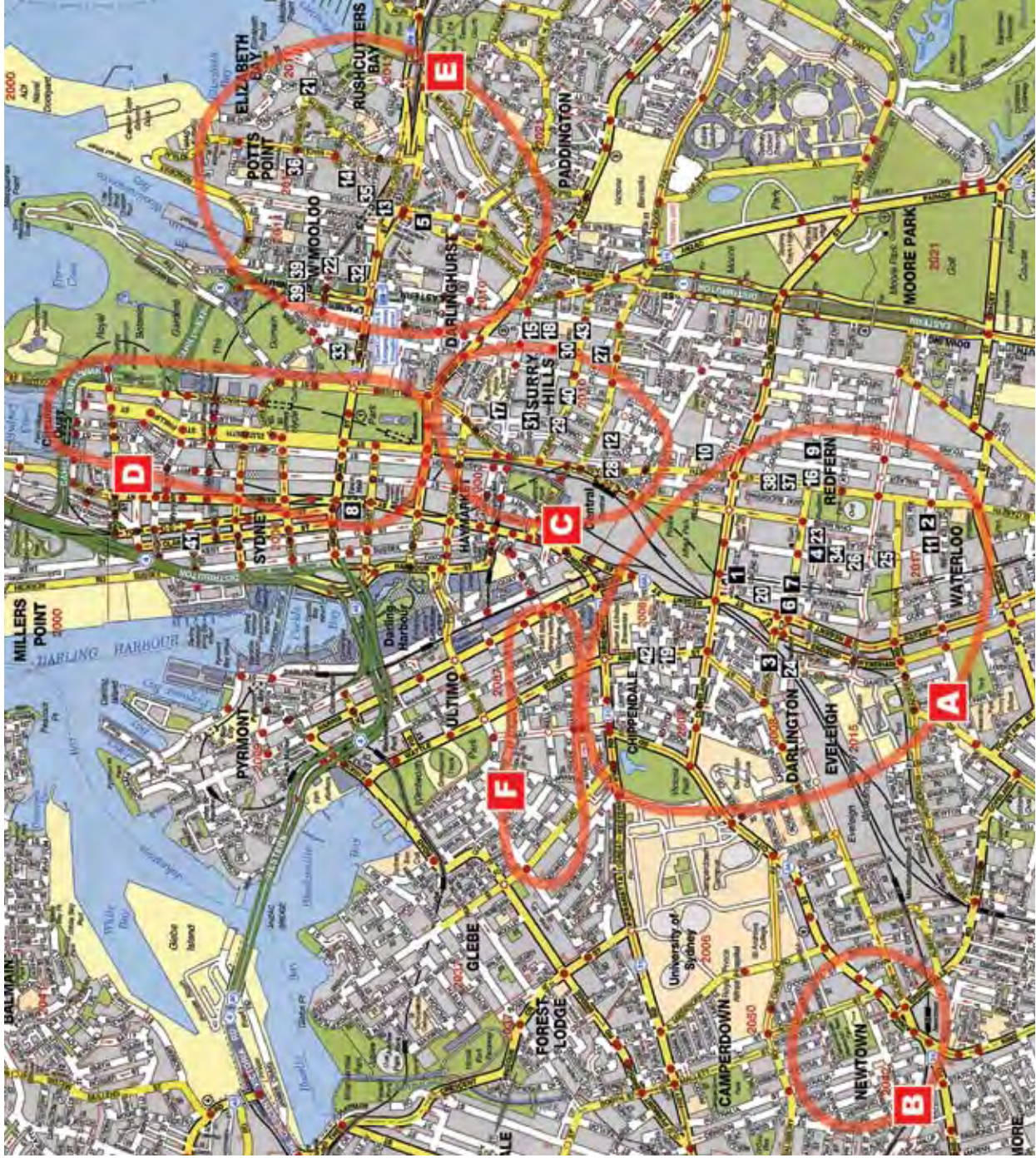
Campbell House does not service many Indigenous people, only 2% of its clients are Aboriginal. It has no specific Aboriginal Services.

[Mission Australia's 2003 Annual Report describes a comprehensive survey one of its Community Services and Research and Social Policy units carried out with Indigenous Australians to better understand their needs (p. 32).]



Figure 1: Map indicating the general boundary of the study area. (Source: Base map taken from UBD 2004 Australian City Streets.)

Figure 2:
Map of the inner Sydney study area showing the locations of services relevant to the Aboriginal homeless groups discussed in Chapter 4. [Note: A number of services that were identified in the Appendix 2 organisation profiles are located outside the area shown in this map.] (Source: Base map taken from UBD 2004 Australian City Streets.) [Refer to Figure 3 in Chapter 4 regarding letters A to F.]



- Legend**
- 1 Aboriginal Children's Service
 - 2 Mac Silva Centre
 - 3 Aboriginal Housing Company
 - 4 Aboriginal Medical Service Co-op Ltd (AMS)
 - 5 Anglicare - St John's Church
 - 6 Barnardos Australia - Redfern-Waterloo Intensive Family Support Service (IFSS)
 - 7 Centrelink Redfern
 - 8 City of Sydney Council
 - 9 Homelessness Action Team Support and Referral Office (HATSOS)
 - 10 - Surry Hills Office
 - 11 - Waterloo Office
 - 12 Independent Community Living Association Inc (ICLA)
 - 13 Kirkton Road Centre (K1)
 - 14 Kirkton Road Centre (K2)
 - 15 Mission Australia - Campbell House
 - 16 Mission Australia - Members Court
 - 17 RAAF Club
 - 18 Madgin-Gal Aboriginal Corporation - Drop-in Centre
 - 19 DCCS Community Service Centre
 - 20 NSW Police
 - 21 - Kings Cross Station
 - 22 - Wollomoooloo Station
 - 23 - Redfern Station
 - 24 - Redfern Shopfront
 - 25 Redfern Waterloo Street Tenancy Support
 - 26 REPIDU-Resource and Education Program for Injecting Drug Users
 - 27 Salvation Army - Oasis Youth Support Network
 - 28 Catherine Booth House
 - 29 William Booth House
 - 30 Inner City Community Services Centre
 - 31 Foster House
 - 32 Society of St Vincent de Paul - Matthew Talbot Hostel Village
 - 33 Redfern Drop In Centre
 - 34 Sydney Medically Supervised Injecting Centre (MSIC)
 - 35 Wayside Chapel
 - 36 Women's Refuge Resource Centre
 - 37 Youth Accommodation Association
 - 38 The Haymarket Foundation
 - 39 Albion Street Lodge
 - 40 The Station
 - 41 Sydney Swims Outreach Project (SWOP)
 - 42 Women's and Girl's Emergency Centre Inc.

Figure 3:
Map showing the territories of the six groups of Aboriginal homeless people occupying the inner Sydney study area, which were identified during research undertaken in 2004. Some of their common gathering places are also shown. (Source: Base map taken from UBD 2004 Australian City Streets.)

- Legend**
- A Redfern/Waterloo Mob**
 - 1 The Block
 - 2 Redfern Post Office & Redfern AMS
 - 3 Waterloo
 - 4 Victoria Park/Tent Embassy
 - 5 Redfern Park
 - B Newtown Mob**
 - 6 King Street
 - C Central Railway Station Mob**
 - 7 Surry Hills
 - 8 Central Station/Belmore Park
 - D City/Town Hall Mob**
 - 9 Hyde Park
 - 10 Town Hall
 - 11 Circular Quay
 - E Kings Cross/Darlinghurst Mob**
 - 12 Darlinghurst
 - 13 Kings Cross
 - 14 Woolloomooloo
 - 15 Potts Point
 - 16 Wayside Chapel
 - 17 Rushcutters Bay
 - F Broadway/Glebe Mob**
 - 18 Glebe
 - 19 Broadway

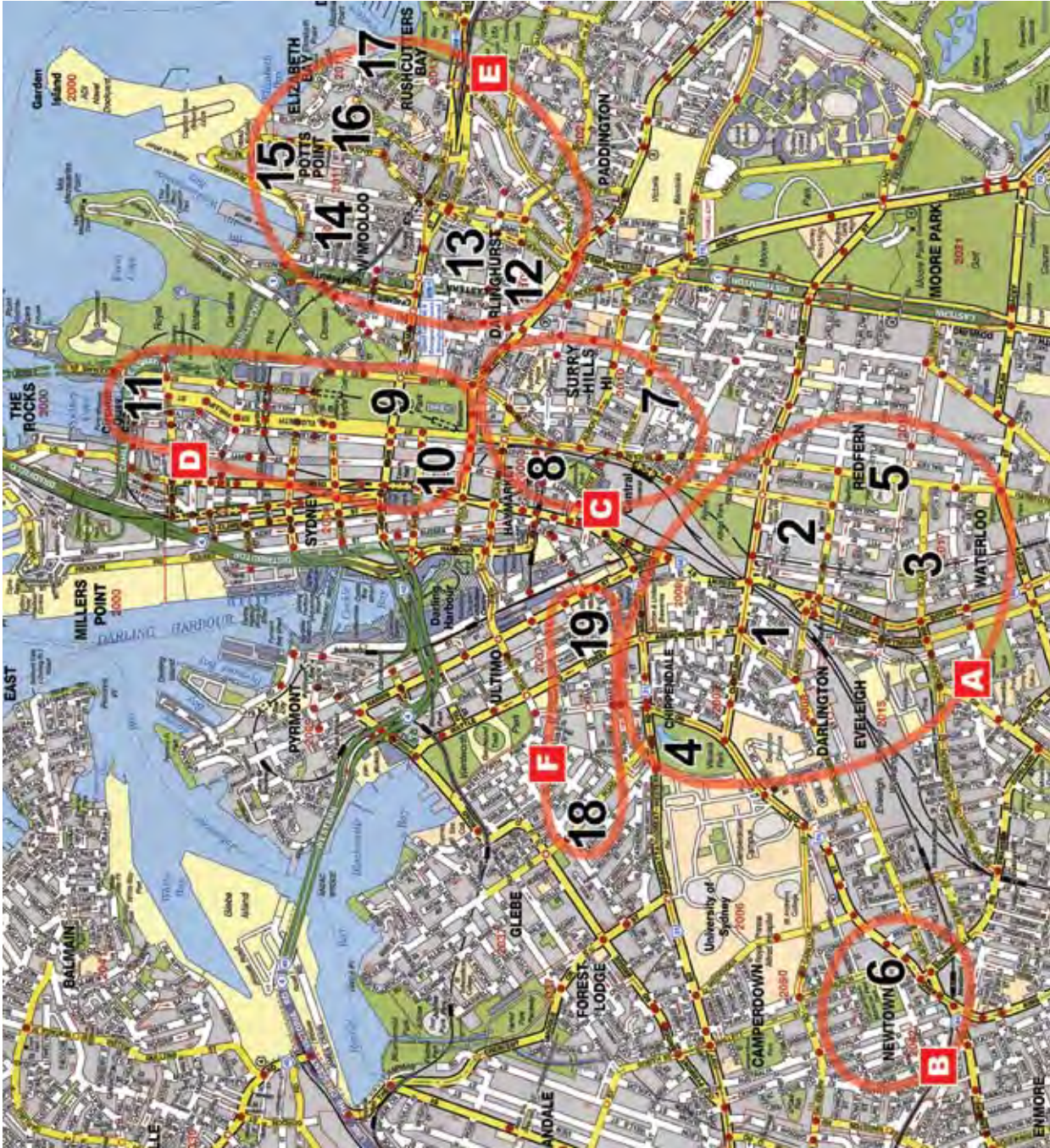




Figure 4: Places in NSW which Aboriginal homeless people in inner Sydney described as their communities of origin.

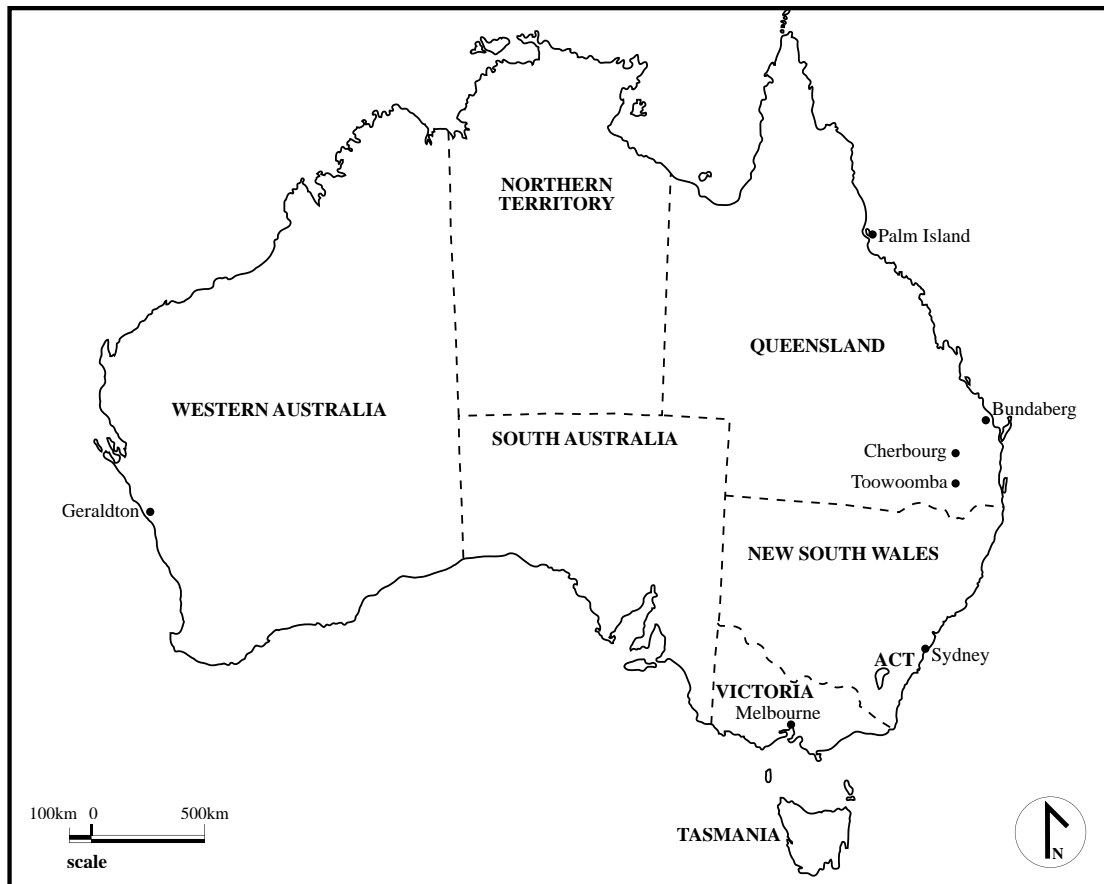


Figure 5: Places outside of New South Wales which Aboriginal homeless people in inner Sydney described as their communities of origin.



Figure A: Map indicating the general boundary of the study area. (Source: Base map taken from UBD 2004 Australian City Streets.)