

28 January 2020

Parliament of Victoria
Legislative Council, Legal and Social Issues Committee
Parliament House, Spring Street
EAST MELBOURNE VIC 3002

By online submission

Dear Legal and Social Issues Committee

Re: Inquiry into homelessness in Victoria

The Victorian Branch of the Royal Australian and New Zealand College of Psychiatrists (RANZCP Victorian Branch) welcomes the opportunity to provide a submission to the Inquiry into homelessness in Victoria.

The RANZCP is a membership organisation that prepares doctors to be medical specialists in the field of psychiatry, supports and enhances clinical practice, advocates for people affected by mental illness and advises governments on mental health care. The RANZCP Victorian Branch represents over 1600 members, including over 1100 qualified psychiatrists and around 400 members who are training to qualify as psychiatrists.

We would like to make the following comments about housing, homelessness and mental health in Victoria. Our comments focus on the mental health system in Victoria and how it intersects with housing, homelessness and mental health outcomes.

There is a complex relationship between housing, homelessness and mental health. Research, and anecdotal evidence from members, suggests that individuals are being discharged from inpatient units into homelessness or inadequate housing. It is our experience that when people do not have a safe, secure and stable home to return to, there is little opportunity for them to recover and they are likely to be readmitted to mental health services or face significant challenges to their recovery in the community. We have witnessed the traumatising effect the decline in appropriate housing services has had on consumers and those who work in the system who are all too aware of discharging into homelessness.

Given the period after discharge is most fraught with risk of suicide (Large et al., 2011) it is essential individuals are being discharged into an environment that is conducive to recovery. Increasing the availability of appropriate housing in the community is likely to reduce the strain on the inpatient system, and also allow individuals to focus on recovery. There is a great need for long-term rehabilitation options for people with severe, enduring mental illness in order to enable them to live in supported accommodation, if required. For those who need help to live independently, there are limited options for long-term accommodation.

Often Victorians enter the formal housing and mental health system at a point where their need is greatest. However, given the significant level of demand and variability in service provision across Victoria, individuals may face long waits to access mental health treatment. As the Victorian Auditor-General's Office (VAGO) report stated, there is a significant negative flow-on effect to other services if the mental health system is not functioning well, and this includes housing (VAGO, 2019). It is also concerning that where individuals have no fixed address, they are likely to face further barriers to care given access to Victoria's mental health system is determined by residential location.

The Victorian Government has several strategies and policies relating to housing and homelessness, as well as mental health. However, there is little integration across strategies and policies meaning there is no clear, interconnected action to resolve issues relating to housing, homelessness and mental health. Improved policy integration between housing, homelessness and mental health has been recommended as a system change which could have the potential to contribute to better housing and health outcomes for people with lived experience of mental ill health (AHURI, 2018). This is relevant for state-level policies, as well as between state and federal policies and governments.

As called for in our submission to the Royal Commission into Victoria's Mental Health System, we strongly recommend:

1. Development of a dedicated mental health, housing and homelessness strategy
2. Investigation of options and funding for long-term and medium-term rehabilitative options for people with mental illness who require a supported living environment.

Whilst the Royal Commission's Interim Report did not make recommendations relating to housing and homelessness, we hope to see this investigated further as part of the final report due in October 2020. The RANZCP Victorian Branch is strongly supportive of measures which improve the supply of affordable, appropriate and available housing in Victoria, as well as improve transition to and stability of tenure for those with mental ill health. Stable, safe and secure housing should be seen as a preventative measure and part of a suite of psychosocial supports necessary for an individual's mental health and wellbeing.

Should you have any questions relating to the contents of this letter, please contact Elena Slodecki, Policy Officer – Victorian Branch, at elena.slodecki@ranzcp.org or on (03) 9601 4992.

Yours sincerely



Dr Kerry Rubin
Chair, RANZCP Victorian Branch

References:

Australian Housing and Urban Research Institute (AHURI; 2018) Housing, homelessness and mental health: towards systems change. Available at: <https://www.mentalhealthcommission.gov.au/social-determinants/housing-homesless-and-mental-health>

Large M, Sharma S, Cannon E, Ryan C, & Neilssen O (2011) Risk factors for suicide within a year of discharge from psychiatric hospital: a systematic meta-analysis. *Australian and New Zealand Journal of Psychiatry*, 45: 619-628

Royal Australian and New Zealand College of Psychiatrists (RANZCP; 2019) Formal submission: Royal Commission into Victoria's Mental Health System. Available at: <https://www.ranzcp.org/royalcommission>

Victorian Auditor-General's Office (VAGO; 2019) Access to Mental Health Services. Available at: <https://www.audit.vic.gov.au/sites/default/files/2019-03/20190321-Mental-Health-Access.pdf>