

Submission to the Royal Commission into Family Violence

19th May 2015

Submission authorised by:

Donna Bennett

Chief Executive Officer

Hope Street Youth & Family Services

PO Box 129 Brunswick West Vic 3055

Submission compiled by:

Mandy Baxter

Service Development Manager

Hope Street Youth & Family Services

PO Box 129 Brunswick West Vic 3055



Overview of Hope Street Youth & Family Services

Hope Street Youth and Family Services Ltd ("Hope Street") is based in the Northern and Western regions of Melbourne, we are a specialist youth homelessness service. As a leader in the area of youth homelessness with over 30 years experience in delivering responsive services to young people in local communities, Hope Street provides both strategically targeted and holistic programs for young people including young families.

Hope Street is a targeted service for young people (16 – 25) who are at risk of or who are experiencing homelessness. We provide a range of services, both immediate and long term support including;

- 1. Youth Residential (Youth Refuge)
- 2. Youth Reconciliation (Counseling)
- 3. Boost Program (Youth crisis service with after hour response)
- 4. Youth Support Service (Providing one to one case management support)
- 5. Hope Street In Melton Program (10 unit supported residential program based on Foyer Model)
- 6. Hope Street In Whittlesea Program (11 unit supported residential program based on Foyer Model)
- 7. Homeless Youth Dual Diagnosis Initiative (Mental Health and Substance Use Youth Homelessness Sector capacity building program in partnership with Melbourne Health)

Context for this Submission

Young People's Experience and Impact of Family Violence:

Hope Street has welcomed the recent surge of awareness towards exposing the horrific reality of family violence in Australia. Whilst the Government, the Media and Social Networks report that on average, one woman a week is murdered as a result of family violence (and this in itself is unacceptable), Hope Street is witness to the accumulative harm that family violence creates - the number of near misses, the witnessing of family violence, the experience of family violence either as the primary victim or secondary victim as well as the trauma and disconnect it creates for young people. In our experience young people are often voiceless in the family violence space; largely the focus is on women or women and their children but not the adolescent child: the young person. Effective responses must be aimed right across the continuum of client cohorts and young people need to feature significantly in this response.

For the purpose of this submission, Hope Street will document and make recommendations to the Royal Commission into Family Violence on how to ensure that the lived experiences of the adolescent child who has been made homeless because of family violence are heard and appropriately responded too. Often this group of young people enter into homelessness alone and vulnerable. It is for this reason that this submission is being made to advocate for one of our most vulnerable and invisible victims of family violence within society: the adolescent child who has been made homeless because of their lived experience of family violence.



From our experience, family violence is listed as the primary factor as to why young people leave the family home and seek support from our services. We understand the lived experience of homelessness is not an isolated event. Young people who experience homelessness do so because of a number of factors such as:

- Family violence
- Family breakdown
- Mental health (self or family members)
- Misuse of alcohol and other drugs (either by the young person or family members)
- Familial Dislocation
- Overcrowded housing conditions/housing stress
- Socio economic factors (by both the young person or family members)
- Generational entrenched poverty
- Systemic failures the prevents participation in mainstream society (work, social,)

Many of the young people who Hope Street work with who have lived experiences of family violence also display many of the symptoms associated with accumulated and complex trauma. Research and knowledge, provides insight into how family violence shapes children's development. Based on neurobiology, attachment and disruption research and knowledge, there are clear impacts on children's brain, body, emotion, behaviour and relationships as a result of family violence. Specific indicators of the exposure associated with family violence can be:

- Disengagement from school
- Loss of employment
- Chronic levels of stress leading to hyper vigilance and emotional stress
- Isolation from friends and family
- Constant fear, tension and intimidation
- Disrupted sleep
- Separation from parent
- Separation from siblings
- Separation from extended family
- Onset of mental health conditions
- Drug and alcohol usage
- Limited cognitive skills
- Poor verbal skills
- Memory problems
- Difficulty focusing at school



- Poor skills development
- Excessive temper/aggression
- Demanding of attention positive or negative
- Regressive behaviours
- Acting out socially
- Poor appetite
- Headaches
- Stomach issues to name a few.



Snapshot Data

On the 16th of April 2015 a snapshot of data of supported clients was taken from all programs across Hope Street. The data illustrates the prevalence of the lived experience of family violence.

Table 1: Hope Street - Family Violence Snap Shot Data 16th April 2015

		Support	Dent	Youth Reconciliation	Melton	Whittlesea	Table
Program	Residential 7	Service 14	Boost 20	Program 16	(Foyer) 19	(Foyer) 19	Totals 95
Number of clients currently in the program		8	9	13	19	9	54
Female (16 to 25 year old)		6	9 7	2	6	5	28
Male (16 to 25 year old) Accompanying children		0	4	1	3	5	13
1. How many of those clients assisted today have experienced family violence?	0	0	4	L	5	5	15
	4	7	9	13	9	9	51
Female (16 to 25 year old)		6	9 7	2	5	3	24
Male (16 to 25 year old)		0	4	1	2	3 1	8
Accompanying children Total	0 5	1 3		<u> </u>	2 16	13	83
	-	15	20	10	10	13	85
2. How many of those clients assisted today have been perpetrators of family violence?		2		0		2	
Female (16 to 25 year old)	0	2	0	0	0	2	4
Male (16 to 25 year old)		0	1	2	1	0	4
Accompanying children	0	0	0	0	0	0	0
Total	0	2	1	2	1	2	8
3. For how many of those clients assisted today do you believe family violence has been the primary factor of their current homelessness/risk of homelessness?							
Female (16 to 25 year old)	2	7	3	8	5	3	28
Male (16 to 25 year old)	0	6	3	2	3	1	15
Accompanying children	0	0	3	0	2	0	5
Total	2	13	9	10	10	4	48
4. For how many of those clients assisted today do you believe family violence has been one factor of their current homelessness/risk of homelessness?							
Female (16 to 25 year old)	4	7	9	13	7	9	49
Male (16 to 25 year old)	1	6	7	2	5	3	24
Accompanying children	0	0	4	1	2	3	10
Total	5	13	20	16	14	15	83



Analysis

The Prevalence of Family Violence experienced by the Young People of Hope Street

- > 87% of clients had experienced some type of family violence, comprising: 94% of female clients; 86% of male clients; 61% of accompanying children
- > 8% had perpetrated incidents of family violence: 7% of the female clients and 14% of the male clients
- For 50% of Hope Street clients family violence was the primary factor why they were currently homeless, comprising: 52% of female clients; 54% male clients; 38% of children
- For 87% of Hope Street clients family violence was one of the significant factors why they were currently homeless, comprising: 91% of female clients; 86% male clients; 77% of children

The above data illustrates the prevalence of family violence experienced by young people – it is clear there is an intersection between family violence and homelessness. Put simply young people become homeless because they are escaping the act of family violence in all of its forms. Family violence fills up our refuges, our counseling service, our outreach support and our case management services. Whilst attempting to address the immediate needs of shelter, food and safety, the short and long term affects of family violence on the social and emotional being of young people often having lasting consequences. Young people discontinue their schooling, they become socially isolated, they self harm, they self medicate, they find it difficult to build trusting healthy relationships and in many cases despite numerous interventions they continue on the journey into homelessness.

Research and knowledge, provides insight into how family violence shapes children's development. Based on neurobiology, attachment and disruption research and knowledge, there are clear impacts on children's brain, body, emotion, behaviour and relationships as a result of family violence. Specific indicators of the exposure associated with family violence can be:

- Disengagement from school
- Loss of employment
- Chronic levels of stress leading to hyper vigilance and emotional stress
- Isolation from friends and family
- Constant fear, tension and intimidation
- Disrupted sleep
- Separation from parent
- Separation from siblings
- Separation from extended family
- Onset of mental health conditions
- Drug and alcohol usage
- Limited cognitive skills
- Poor verbal skills



- Memory problems
- Difficulty focusing at school
- Poor skills development
- Excessive temper/aggression
- Demanding of attention positive or negative
- Regressive behaviours
- Acting out socially
- Poor appetite
- Headaches
- Stomach issues to name a few.

The significance of providing safe, supported and stable emergency and short term accommodation for the child adolescent leaving family violence

The Hope Street Youth and Family Services youth refuge model has proven its ability to respond effectively to the needs of young people who are homeless due to family violence. Youth Refuges provide safe spaces, stability enabling a young person to remain or re-engage at school and/or employment; food; access to resources such as phone, internet, computers to further access other resources; development of basic living skills; access to specialised services that are youth centred.

Based on ABS and local government data, Hope Street has highlighted the lack of supported crisis accommodation services for young people and specialist youth homelessness focused services in Growth Corridors. Hope Streets' recent research report, *Responding to Youth Homelessness in the City of Melton*, identifies the dire need for such services in the Growth Corridor of the City of Melton.

The provision of specialist youth focused, safe, supported and stable accommodation with access to resources achieves the following outcomes with young people who are homelessness as result of family violence:

- Engagement with school (school retention)
- Engagement with employment and training opportunities
- Access to longer term housing options
- Experience of positive and non judgmental interactions with adults that is empowering
- Experience of youth focused rights based services
- Living in a violent-free environment
- Enhanced overall wellbeing
- Enhanced community connections



Expansion of youth centred specialised support services attached to youth refuges

Hope Street's Youth Refuge Model encompasses a youth centred wrap around response to empower young people to transition to the next step in their experience of life away from family violence. Hope Street provides a Youth Reconciliation Worker, a Youth Focused Health Nurse and a Dual Diagnosis Worker in recognition of the complexity and supports that are required for young people to move away from homelessness and family violence.

This is achieved via:

- > Specialist programs located on site to provide immediate access and response to young people
- Qualified and experienced youth homelessness staff 24/7
- Systems, policies, procedure, practices that are highly honed and responsive to the perceived and actual needs of young people at risk of harm
- > Provision of a youth only client environment that instills equity and equality, youth friendly space and a greater sense of safety
- > Provision of after hours response enabling young people to contact the service and return to the service 24/7
- > Model of service delivery that is enhanced by specialist programs providing specialist responses including crisis and trauma informed responses.

Outcomes achieved from the above interventions include:

- Improved health outcome including specialist health care via access to general as well as specialist health services
- Improved family relationships via mediation
- Enhanced self worth
- Improved psychological development leading to improved cognitive processes, communication and improved behavior
- Access to drug and alcohol services
- Access to longer term housing options
- Enhanced overall wellbeing
- Enhanced community connections

Young People who enter the homelessness service system are actively precluded from accessing key forms of social housing

In the last 10 – 20 years we have seen a burgeoning of housing associations and other community housing providers. These are portrayed by social policy as the future for social housing.¹ There is a strong expectation that Community Housing Providers will cater for most people in the community who are unable to access Office of Housing properties or affordable private rental.

It has been the experience of Hope Street that young people are precluded from accessing key forms of social housing due to the housing criteria and government policy. A demonstration of this is that during the 2013-2014 period only 1% of young people from our crisis accommodation programs successfully accessed community housing. Young people are being denied access to this model of tenancy. The primary reason for this appears to be because income level of young people who access the Homelessness Service System is too low to cover the rental charge sought by social housing providers. The full Centrelink Youth Homelessness Allowance is more than 40% below the Henderson Poverty Line.



Case Study

's Story

came to Hope Street **and a**'s attention as he was the friend of a current client of the Hope Street in **and a** Program. **and** had not linked in to services in the past and had hopped out of school after years of interrupted attendance. **and** was now **and** had been falling through the gaps in the system his whole life.

's father left the family home when he was and not long after 's mother brought a new man into the home and had more children. When he was went in-between parent's houses, and at the age of started spending nights on the street and in abandoned houses. The stated he remembers his parents fighting when he was little, he remembered hiding under the bed and holding a pillow over his ears. He would eventually hear the front door slam and this was when he would emerge from under the bed. He said he would wonder around the rest of the house to inspect the damage, a hole in the wall here, a broken glass there, a knocked over chair, mum crying smoking a cigarette. The does not remember what the fighting was about he knows it seemed to happen after they were drinking and they drank a lot and often. When they told remembers he were separating he thought that he would not have to see them fight again and he was right, he never witnessed another fight between them. However this was not the end of the end end the end end the end end the end end the end

remembers falling asleep in school and not being able to concentrate. He remembers not having food in the house, and having to teach his sisters how to hide under the bed to get out of the way of the arguments at his mother's house. **The started hitting method**. The members having bruises a lot and said he never understood how the teachers did not see. How nobody saw him. At his father's house things were no better. Eventually **the started drinking and ended the relationship and left the area.** He also left **the started behind to live with his mother, step father and methods** sisters.

Eventually was invited to join in the parties with his mother. From the age of , where would offer him alcohol and drugs. and said he took them at the time he thought he was grown up and cool and he thought it was nice having a buzz and spacing out, he liked not having to think.

was kicked out of the home at for the last time, fights had been escalating as the started to talk back to protect himself and his step father had decided he was worthless and a troublemaker. To disconnect from any form of supports from 's mother and step father started rumors around the community and among the extended family that was a thief and used heroin (this was not true). If the started family washed their hands of him believing his mother. If has no one. He started couch surfing and ended up living at a girlfriend's house, where once again he witnessed family violence between his girlfriend's mother and stepfather.

Once was picked up by the Hope Street in **Example** Program, he was provided with the first safe stable housing he had never experienced. The stable housing allowed **example** a place to learn what it was like to feel safe and not have to worry about his safety while inside a house. This was foreign to the safe shows were meant to be safe spaces but for him Home and Family always meant hurt, anger, violence, a place that was unsafe a place where he needed to be ready to defend himself.



While with Hope Street was allocated a worker who specialised in youth focused case management. **While** and his Hope Street worker had regular case management meetings. **The strength** found it hard to open up at first, he found it difficult to list his strengths and voice an opinion. **The strength** reported being hyper vigilant for the first few months living alone, he was not use to the quietness. **While** was given calming/self soothing strategies; he was linked into trauma counseling through a mental health plan.

has decent living skills for his age as he had looked after himself from a young age. A part of the Hope Street in **Program** is teaching and developing young people's abilities to live independently in their own home (accommodation). **Second**'s idea of healthy food was microwavable and tinned food. **Second** soon learned other food options and how to prepare healthy meals via the program's living skills sessions. **Second** was able to settle into finding employment and training and found an apprenticeship.

learned what it was like to have stable supports around him. In the beginning if **the stable** made a mistake or did something wrong **the stable** would try to avoid the situation, deny anything had happened or become very defensive and scared. It took **the stable** a while to learn he would not be yelled at, hurt or belittled as he navigated and built himself a life. **The stable** has accomplished many things. **The stable** is still impacted on by his upbringing, he is still learning how to deal with conflict in a healthy way, he is still learning how to implement boundaries with people and navigate healthy relationships. He is still learning what it is to be a man as the role modeling he had showed men are violent, angry, jealous, controlling beings. **The stable** knows he does not want to be like the men and women who raised him and who taught him that home is not a safe space and family does not always mean protection and love.

has since reunited with some extended family and although he loves his mother (his father recently passed away) he stated he finds it difficult to connect to her as she denies his childhood was that bad as it was how she was raised and he just needs to toughen up.

The above case study demonstrates the accumulated affect family violence has on a child, then the adolescent. It is clear there are 'secondary' consequences to family violence. 'The above case study demonstrates the accumulated affect family violence has on a child, then the adolescent. It is clear there are 'secondary' consequences to family violence. 'The above case study demonstrates the accumulated affect family violence has on a child, then the adolescent. It is clear there are 'secondary' consequences to family violence. 'The above case study demonstrates the accumulated affect family violence has on a child, then the adolescent. It is clear there are 'secondary' consequences to family violence why teachers did not notice his bruises. The fact that the additional only came to the attention of Hope Street through word of mouth is a reflection on how multiple systems failed to identify and act in the additional of the second system at the second system at the second support to enable him to get himself stable and safe. Yet youth homelessness services are not identified as family violence services.

Whilst not captured in the above data, Hope Street believes it is critically important to highlight that a significant number of our clients have had no prior or little contact with the statutory system, particularly child protection. Yet the data and stories young people reveal to us, tells us of significant exposure and direct experiences of family violence. This suggests to us a fragmented system across all service domains, a system that is failing our young people. The youth homelessness system is currently providing a safety net for young people escaping or who have experienced family violence and whilst this system should be a provider of this support, it is critical more is done across all service systems.



Conclusion

Hope Street has welcomed the recent surge of awareness towards exposing the horrific reality of family violence in Australia. Whilst the Government, the Media and Social Networks report that on average, one woman a week is murdered as a result of family violence (and this in itself is unacceptable). Hope Street is witness to the accumulative harm that family violence creates - the number of near misses, the trauma and disconnect it creates for young people. In our experience young people are often voiceless in the family violence space; largely the focus is on women or women and their children but not the adolescent.

Hope Street recognises the unique needs of young people who experience homelessness. It is our hope the Royal Commission makes a significant change to the way in which policy and service delivery responds to young people who experience family violence and as a result are at risk or become homeless. Hope Street makes the following recommendations to the Commission:

Recommendations

1:	Creation of safe, supported and stable emergency and short term accommodation for the child adolescent leaving family violence:						
	Recommendation:	There are only 19 youth refuges in Victoria Hope Street recommends that this number is doubled targeting growth corridors and regional areas of Victoria.					
2:	Expansion of youth centred specialised support services attached to youth refuges						
	Recommendation:	All existing and new refuges to be allocated supplementary funding to provide specialist services as specified above.					
3:	-	overnment legislation, policy and funding formulating Social Housing be amended to allocate 50% of social housing stock to young people who experience omelessness and to young people who have accessed the Homelessness Service System.					
	Recommendation:	An investment and policy shift to create an additional 1000 new units of housing for young people who access the Homelessness Service System					
	Recommendation:	Federal and State Government work congruently together and provide the resources and funding to address funding shortages across family violence and youth homelessness services.					
	Recommendation:	The Youth Private Rental Brokerage program be expanded.					



ⁱ Social Housing – A Discussion Paper on the Options for Improving the Supply of Quality Housing April 2012, Dept Human Services, Victoria