HOMELESSNESS IN LOWER HUTT

MAY 2018
Acknowledgement
We are indebted to the organisations and individuals who contributed to the Homelessness in Lower Hutt research. We are particularly grateful to those households that were homeless, both for their time and for sharing their experiences.

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Recommended reference:

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EXECUTIVE SUMMARY

1. PURPOSE AND METHOD
   
   At a workshop on 23 November 2017 Council asked officers to explore homelessness in Lower Hutt and whether Council should contribute towards addressing homelessness in the city.

   The research used a mixed methods approach. This included interviewing local organisations and people who are or have recently been homeless, a homelessness survey and analysis of data, and a workshop with providers to discuss findings, gaps, and possible approaches.

2. WHAT IS HOMELESSNESS?
   
   Homelessness means people who are living in insecure and often unsafe circumstances. For some people, homelessness means sleeping rough, or living in cars or vans. For others, it means couch-surfing or temporarily sharing housing with friends, family, or acquaintances. ¹

3. HOMELESSNESS IN LOWER HUTT
   
   Homelessness has a detrimental effect on people’s health and wellbeing, education, employment opportunities and income, as well as family relationships. In addition to the impacts on the individuals there are social and economic costs to society.

   Homelessness affects a wide range of households, including both working households and those without employment. Some households are particularly vulnerable. In Lower Hutt these households include young people, women with children, people with mental health problems, and people fleeing family violence. In many cases when people lose their homes, their initial response is still to try to find their own solutions e.g. stay with whanau or friends.

   Homelessness is caused by structural and individual factors. The structural factors include poverty, inequality, lack of affordable housing supply, and welfare and income policies. The individual level circumstances that can make people more vulnerable to homelessness include poor physical or mental health, alcohol and drugs issues, age, bereavement, financial problems, and relationship breakdown. Homelessness can be the consequence of a combination of problems, and people’s situations in Lower Hutt reflect the factors seen in New Zealand and internationally. The cost of private rental accommodation was identified as a significant issue. As the housing market, both rental and home ownership sectors, has become more competitive services in the city are seeing more working households experiencing difficulties accessing, affording, and retaining accommodation.

   i. Data
      
      The perception of service providers and Ministry of Social Development (MSD) locally is that homelessness and housing hardship in the city have been increasing between 2016 and early 2018.

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¹ Living situations where people with no other options to acquire safe and secure housing; are without shelter, in temporary accommodation, sharing accommodation with a household or living in uninhabitable housing. (Statistics New Zealand)
The available data is an indication of the scale of homelessness in Lower Hutt. The transient nature of homelessness, that includes people who are not in contact with services, makes it a difficult issue to fully quantify.

At the end of December 2017 MSD funded 44 transitional housing places in Lower Hutt. If these places were full for the transitional housing period of 12 weeks they would be able to support 176 households per annum. Further places were added in the first quarter of 2018. In addition to the number of households in transitional housing other homeless households are in temporary accommodation. MSD provides Emergency Housing Special Needs Grant (EH SNG) to help individuals and families with the cost of staying in short-term accommodation if they are unable to access transitional housing. This accommodation includes motels in the city and wider region. The number of EH SN Grants indicates a high level of accommodation needs. In terms of the ethnicity of households receiving EH SNGs in Lower Hutt, there is a clear indication that Māori are disproportionately affected.

As a household can receive more than one EH SN grant it is difficult to accurately quantify the number of households that are officially homeless each quarter. It may be reasonable to speculate that during the quarter ending in December 2017 the number of households in the system exceeded 200. Homelessness overall is higher.

ii. Services and processes
MSD is the lead government ministry dealing with homelessness assessments and procuring emergency and transitional housing. The Ministry has contracts with a number of accommodation and support providers in the city and also places households in motel accommodation either in Lower Hutt or other cities.

The limited capacity of services to deal with the number of households requiring help is the immediate major issue and there is an ‘all hands on deck’ culture with organisations, including non-housing organisations, putting considerable time and resources into working through people’s housing issues. While understandable in the short-term it is neither efficient nor effective and means that households cannot always access suitable services. Greater service capacity and an overall strategic response are needed to deliver effective outcomes for households.

iii. Housing supply
Lack of suitable housing supply was identified as the main cause of homelessness. The increasing cost of housing, driven by the restricted supply and increasing demand, mean that households experience difficulties accessing homes. As owner-occupation becomes more difficult the private rented sector has become increasingly competitive and, as a consequence, households earning low incomes are even less likely to be selected by landlords. Households that have other problems such as poor credit histories, health issues or addiction problems are even further disadvantaged. Landlords can sometimes discriminate against particular groups of people such as young people or those with mental health problems, but in the current market they also have a considerable choice of households and do not need to consider those seen as presenting any risk.
iv. **Preventing homelessness**
Most services are operating to support people when homelessness has already occurred. There is a lack of services that can support people with issues that are putting them at risk of losing their homes. This work requires additional resources and capacity e.g. to provide tenancy support on a range of issues, link people into suitable existing services, and work with landlords to prevent eviction.

v. **Temporary accommodation**
The city has some provision of good temporary housing which is provided with support services. Some additional temporary accommodation has been provided in the city in response to the growing needs over the past two years. There is little provision for young people, people with higher level mental health needs, or male households. The demand for assistance and shortage of housing options mean that individuals and families are regularly being placed outside their local areas in cities including Porirua and Upper Hutt.

Although the number of transitional housing places in the city has increased, hotels are regularly used as temporary accommodation. People are often in temporary accommodation including motels for longer than the emergency or transitional periods. As well as being economically costly they are often unsuitable for households because they lack space and have limited or no facilities for cooking and food storage which results in further costs to the family.

vi. **Housing advice and support**
Participants identified a need for a service that could provide advice and advocacy to people who are homeless or have housing related problems, meeting the requirement of government processes and making housing applications. For some clients, such as women who are homeless as a result of family violence or those with mental health problems, a central point of contact at MSD locally would be useful.

### 4. CONCLUSION

The research found that homelessness in Lower Hutt and the pressure on service providers have increased in the period since 2016. In addition to the people in the system, aspects of homelessness often remain hidden. Young people who move from couch to couch; the households living with whanau and people living in their cars or vehicles, as well as those sleeping on the street, are part of the hidden problem.

Beyond the numbers and reports of increasing needs are people’s descriptions of their lives and those of their children that capture both the practical toll that homelessness takes on health, education, financial resources and income, but also its emotional and psychological impact including on self-esteem and personal identity.

The study found that organisations have responded well to the pattern of increasing need and work well both individually and where possible collectively to support people who are homeless. While organisations are doing what they can there is a strong element of crisis management at both service...
provider and MSD level. Inevitably, limited capacity and the lack of accommodation and support affect
the availability of services for households and means that people’s needs are not adequately
addressed. In the short-term there should be more emphasis on working with and resourcing
providers to develop additional suitable temporary accommodation while at the same time exploring
interventions to prevent homelessness which would assist in reducing the need for temporary
solutions.

5. ROLE OF COUNCIL

We specifically sought views on Council’s role in contributing to resolving homelessness in the city.
Participants felt strongly that Council should acknowledge the problems of homelessness and housing
needs and contribute significantly to the response required. Overall, participants expressed the view
that, helping to reduce poverty and inequality, improving the supply of affordable homes and reducing
homelessness should be a key part of Council’s long-term planning process.

Their view was that Council could contribute to both directly responding to homelessness and to
enabling others to respond more effectively. The ways Council could contribute have been
categorised below.

Strategic working

Council could, in conjunction with key local partners, develop a homelessness strategy and contribute
to coordinating and resourcing the response. The homelessness strategy would incorporate
prevention, responding effectively to homelessness when it happens, and preventing repeat
homelessness

Homelessness prevention

Shifting the emphasis to preventing homelessness makes sense in terms of the impacts on people
and families, and in order to reduce the costs to society more broadly. Council’s role could be to
contribute to resourcing providers to deliver services.

Homelessness intervention services

The majority of participants believe that Council’s role is to support agencies to better fulfil the needs.
Contributing to service provision could include resources for:

- additional temporary accommodation for people with higher level mental health problems
- additional suitable temporary accommodation for young people, people with low to moderate
  mental health needs.
- additional capacity to enable agencies to support people in temporary accommodation.
- organisations to extend services e.g. by providing access to buildings, or supporting with the costs
  of renting building space.
Housing supply

Agencies see a key role for Council in providing housing and enabling the provision of more housing in the city. The emphasis should be on increasing the supply for households on low incomes who currently have difficulty accessing housing in the private rented sector or the social sector, as well as providing affordable homes to purchase. This could be achieved by in a combination of ways. Council could:

- build social housing;
- enable housing development on its own land, and provide land on long-term leases for other organisations to build housing; and
- continue to pursue work to develop a housing partnership with Housing New Zealand and government. The focus on partnerships could be extended to other organisations e.g. iwi.
1. **PURPOSE**

At a workshop about social and emergency housing on 23 November 2017 Council asked officers to explore homelessness in Lower Hutt and whether there is any role for Council in responding to homelessness. The purpose of this report is to inform Council about:

- homelessness in Lower Hutt, including the use of emergency and transitional housing;
- the current accommodation and support services that are available to people who are homeless; and to
- inform discussions regarding any contribution Council might make to addressing homelessness.

2. **INTRODUCTION**

There is often a perception that homelessness is confined to rough sleeping and that it affects single people - particularly single men. However, street homelessness is the acute manifestation of a much wider problem which means that people are living in a range of insecure and often unsafe situations. As well as the impact that homelessness has directly on the individuals concerned there are considerable social and economic costs to society both in the short and longer-term.

There are a number of structural and individual factors that can result in homelessness. These include poverty and lack of housing supply, as well as poor health, domestic violence, family or relationship breakdown, and substance misuse or addiction issues.

In Lower Hutt, as housing supply has failed to keep up with need and house prices and rents have increased, homelessness and housing hardship have also grown. Demand in the private rented market means that people have difficulty competing for homes while, at the same time, homeownership is difficult to achieve as house prices continue to increase. The growing need for social housing and lack of supply means that households must wait longer for suitable housing in this sector.

3. **METHOD**

The research used a mixed methods approach including:

1. Interviews with agencies about their services, data and information, and any improvements required to the response to homelessness in the city;
2. interviews with people who are, or who have recently been, homeless;
3. a brief survey disseminated online, through service providers, Safe City Ambassadors, Libraries, and other direct contacts conducted over a three-week period in February and March 2018;
4. data on homelessness from agencies and The Ministry of Social Development (MSD); and a
5. workshop with providers to discuss findings and gaps, and possible approaches.
Initial contact with households experiencing homelessness was mainly through service providers. Researchers interviewed four households including a family with six children, a couple who were expecting a child, a single man living in his car, and a single man living in hotel accommodation. Two other interviews were arranged but did not occur because households were unable to attend due to changes in their circumstances. Researchers also attempted to speak to other households who are sleeping rough, predominantly in areas of Petone, but interviews could not be arranged.

It is challenging to gather data on the number of people sleeping rough, sleeping in cars, or moving between friends and family. As part of the work officers considered conducting a count of people sleeping rough, and counting people sleeping in cars in areas of the city. A count only provides an indication of the problem ie, a snapshot on a particular night, but is a recognised method of gathering data on the acute nature of homelessness. Good local knowledge is required to inform any count of people sleeping rough and the best intelligence received was for the Petone foreshore area, from the industrial areas in the east to the western end near the State Highway 2 exit. An option to conduct a snapshot count in this area was tentatively explored through a contact made during the research but officers felt that there was not enough information or time to proceed with this. A number of references were made to other areas of the city where people sleep in cars and vehicles but this information was vague and others preferred not to provide locations in order to protect the privacy of people using those areas. It may still be possible to arrange a count in the future.

4. WHAT IS HOMELESSNESS?

‘Living situations where people with no other options to acquire safe and secure housing: are without shelter, in temporary accommodation, sharing accommodation with a household or living in uninhabitable housing.’

For some people, homelessness means sleeping rough on the street, or living in cars or vans. For others, it means sofa-surfing or temporarily sharing housing with friends, family, or acquaintances. By its very nature homelessness means people are living in insecure and often unsafe circumstances and may experience a number of moves between friends, family, temporary accommodation, or rough sleeping.

Homelessness is caused by a number of structural and individual factors. The structural factors include poverty, inequality, lack of affordable housing supply, unemployment, and welfare and income policies. The individual level circumstances that can increase people’s vulnerability to homelessness include poor physical or mental health, alcohol and drugs issues, bereavement, experience of care, loss of employment or fluctuations in income, and experience of the criminal justice system.

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2 Statistics New Zealand
For many households the primary factor is the lack of housing supply which they can afford to either rent or purchase. However, homelessness can often be the result of interrelated structural and individual factors with structural factors more important in some cases and individual circumstances more prominent in others. For example, poverty is a strain on family relationships and a major factor in family violence which can lead to homelessness. ³

**Impact**

‘Homelessness is associated with enormous health inequalities, including shorter life expectancy, higher morbidity and greater usage of acute hospital services. Viewed through the lens of social determinants, homelessness is a key driver of poor health, but homelessness itself results from accumulated adverse social and economic conditions. Indeed, in people who are homeless, the social determinants of homelessness and health inequities are often intertwined, and long term homelessness further exacerbates poor health.’ ⁴

There is extensive literature in relation to the destructive effects of homelessness on individuals and society as a whole. Homelessness has a detrimental effect on people’s health and wellbeing, education, employment opportunities and income, as well as family relationships. In addition to the impacts on the individuals, there are considerable social and economic costs to society more broadly.

‘In New Zealand it costs about $65,000 to keep someone homeless, per year.’ ⁵

People who are homeless have much poorer health compared to the general population and homelessness can contribute to poorer life-chances and inequalities in the longer-term. The impact on physical and mental health is most severe on people who are sleeping rough, ⁶ ⁷ however there is a range of impacts on people in other homeless situations. Common mental health problems, such as anxiety or depression, are around twice as high among people who are homeless compared to the general population, with a much higher prevalence of more serious problems such as psychosis. ⁸

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⁸ Ibid.
Children and young people in homeless families can be particularly affected in terms of their health and wellbeing, emotional and behavioural impacts, disruption to education and therefore their educational attainment. The insecurity also leads to stress on family relationships.\(^9\)\(^10\)\(^11\)

Whilst homelessness can result from loss of employment or reductions in income due to insecure or under-employment, it can also be very difficult to retain employment when homeless e.g. because of moving to temporary accommodation which is further away from jobs, living in insecure situations with friends or relatives, as well as because of the impact of homelessness on health and well-being.

*Levels of Intervention*

Resolving homelessness requires intervention at three broad levels:

- homelessness prevention;
- dealing with homelessness quickly and effectively – ensuring that responses and services are available when people become homeless;
- to stop people becoming homeless again – helping people deal with the issues that led to or resulted in them becoming homeless. This can mean support with a range of issues and includes better supply of accessible housing.

Although prevention is a key intervention much of the action on homelessness still occurs when households are already homeless.

5. **HOMELESSNESS IN LOWER HUTT**

i. **Data**

Homelessness in New Zealand is difficult to quantify however research on the census shows that, in 2013, 41,000 New Zealanders were severely housing deprived. 4,197 of these households were sleeping rough and 8445 were living in non-private dwellings such as emergency accommodation and boarding houses, while 28,563 lived in crowded and other inadequate housing.\(^12\)

In Lower Hutt the number of homeless households increased by 41% between the Census in 2006 and 2013.

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\(^9\) Noble-Carr D., The experiences and effects of family homelessness on children, Institute of Child Protection Studies, ACU National for the ACT Department of Disability, Housing and Community Services, April 2016.


Table 1: Homelessness in Lower Hutt 2001 – 2013

<table>
<thead>
<tr>
<th>Year</th>
<th>Homelessness – people severely housing deprived (^{13})</th>
<th>Prevalence per 1000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>641</td>
<td>7</td>
</tr>
<tr>
<td>2006</td>
<td>646</td>
<td>7</td>
</tr>
<tr>
<td>2013</td>
<td>913</td>
<td>9</td>
</tr>
</tbody>
</table>

Prevalence has been higher in Lower Hutt compared to the other cities, except for Porirua, through all three censuses.

Table 2: Categories of severe housing deprivation in Lower Hutt 2013

<table>
<thead>
<tr>
<th>Lower Hutt - housing situation</th>
<th>Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Without habitable accommodation – including people living rough or in mobile dwellings</td>
<td>42</td>
</tr>
<tr>
<td>Non-private accommodation – including night shelters, women’s refuge accommodation, other types of temporary accommodation, and also hotels, motels, and boarding houses</td>
<td>196</td>
</tr>
<tr>
<td>Temporary resident in a severely overcrowded permanent private dwelling</td>
<td>672</td>
</tr>
</tbody>
</table>

Participants in Council’s research perceived that homelessness and housing hardship in the city have been increasing in the period since 2016. This is the view of the teams conducting the homelessness assessment at MSD, temporary accommodation and support providers, and organisations with a broader advice and support remit.

This study aimed to gather data in relation to the scale of homelessness in Lower Hutt. The transient nature of homelessness e.g. people sleeping rough, sleeping in cars or other vehicles, people moving between friends and/or whanau, makes it a difficult issue to quantify. While some agencies provided data, because of limited capacity, collection and reporting systems, it was more difficult for others to do so. MSD is also unable to provide data on the profile of households, reason for presentation, or length of stay in the accommodation for organisations with contracts to deliver transitional housing. However, data from several sources indicates the level of homelessness in the city:

- MSD data on transitional housing places in Lower Hutt and the Emergency Housing Special Needs Grants (EH SNG) provided;
- A brief homelessness survey over a three-week period between 20 February and 13 March 2018;

\(^{13}\) Ibid. Severe housing deprivation – conceptualising and measuring homelessness: 1. Living without habitable accommodation due to a lack of access to minimally adequate housing – this includes people living rough, mobile dwellings; 2. Living in a non-private dwelling due to a lack of access to minimally adequate housing – people living in night shelters, women’s refuge accommodation, other types of temporary accommodation. The category also includes boarding houses, hotels, motels etc. 3. Living as a temporary resident in a private dwelling due to a lack of access to minimally adequate housing – this includes extra people living on severely overcrowded private dwellings, excluding the hosts; 4. Living in rented or owned housing that lacks one or more basic amenities due to a lack of access to minimally adequate housing – no data is available for this category.
Data from agencies including those not funded to work on homelessness.

**Homelessness accommodation data**

As the need for temporary accommodation increased during 2016 and 2017 the government at the time slightly increased the number of transitional housing placements provided by organisations in the city. At the end of December 2017 there were 44 MSD funded transitional housing places available in Lower Hutt. If these places were full for the transitional housing period of 12 weeks there would be enough places to support 176 households per annum.

In addition to the number of households placed in transitional housing other homeless households are in temporary accommodation in the city. The Ministry provides EH SNG to help individuals and families with the cost of staying in short-term accommodation if they are unable to access transitional housing. This grant pays for accommodation provided by commercial or community providers, who are not contracted by MSD, for up to seven days at a time. This accommodation includes motels in the city and other areas of the region.

As the number of transitional housing placements with contracted services increased during 2017 by the December quarter, there was a decrease in the number of EH SNG being paid in Lower Hutt and across the country.  

The number of grants in the city indicates a high level of accommodation need. During each quarter the number of EH SNGs awarded in Lower Hutt was considerably higher than the number awarded for the Wellington sites of Newtown, Johnsonville, and Wellington city. During the June 2017 quarter, 46% of EH SNGs in the region were received by households in Lower Hutt. This percentage increased to 54% during the September quarter and was at 52% during the December quarter. 53.5% of the cost of EH SNGs in the region during the December 2017 quarter was spent on grants in the city.

**Table 3: Number of EH SNGs granted by Work and Income in the Wellington region over the last three quarters of 2017 and the amount granted**

<table>
<thead>
<tr>
<th>Wellington region</th>
<th>Jun-17</th>
<th>Oct-17</th>
<th>Dec-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work and Income site</td>
<td>Number of grants</td>
<td>Amount granted</td>
<td>Number of grants</td>
</tr>
<tr>
<td>Lower Hutt</td>
<td>123</td>
<td>$117,769</td>
<td>94</td>
</tr>
<tr>
<td>Naenae</td>
<td>113</td>
<td>$119,833</td>
<td>149</td>
</tr>
<tr>
<td>Wainuiomata</td>
<td>21</td>
<td>$18,590</td>
<td>18</td>
</tr>
<tr>
<td>Lower Hutt</td>
<td>257</td>
<td>$256,192</td>
<td>261</td>
</tr>
</tbody>
</table>

Homelessness in Lower Hutt

<table>
<thead>
<tr>
<th>sites – total</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Upper Hutt</td>
<td>Johnsonville</td>
<td>Newtown</td>
<td>Wellington</td>
<td>Porirua</td>
</tr>
<tr>
<td></td>
<td>109</td>
<td>13</td>
<td>111</td>
<td>20</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>$100,907</td>
<td>$7,600</td>
<td>$86,174</td>
<td>$10,902</td>
<td>$42,650</td>
</tr>
<tr>
<td></td>
<td>84</td>
<td>S</td>
<td>69</td>
<td>57</td>
<td>S</td>
</tr>
<tr>
<td></td>
<td>$84,106</td>
<td>S</td>
<td>$56,716</td>
<td>$22,929</td>
<td>S</td>
</tr>
<tr>
<td></td>
<td>58</td>
<td>S</td>
<td>55</td>
<td>21</td>
<td>S</td>
</tr>
<tr>
<td></td>
<td>$52,508</td>
<td>S</td>
<td>S</td>
<td>$8,913</td>
<td>S</td>
</tr>
<tr>
<td>Total</td>
<td>558</td>
<td>504,425</td>
<td>484</td>
<td>$390,606</td>
<td>352</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$268,930</td>
<td></td>
</tr>
</tbody>
</table>

*The numbers of grants do not necessarily indicate the number of households involved because a household can receive more than one grant. S: Some values are suppressed to protect client privacy. Regional totals do not add up to $268,930. This may be because of some suppressed values.

A range of age groups are experiencing homelessness in Lower Hutt with the 18 – 24 age groups particularly affected in the final two quarters of 2017. 28% of clients receiving a grant in the September quarter were between 18 and 24 years old while 25% of clients receiving grants were in this age group during the December quarter.

**Table 4: Age of the client who received an EH SNG issued from Lower Hutt, Naenae, and Wainuiomata sites combined**

| Lower Hutt, Naenae and Wainuiomata sites | Quarter ending |
|---|---|---|
| | Jun-17 | Sep-17 | Dec-17 |
| Age group | | | |
| 18-24 | 31 | 74 | 45 |
| 25-29 | 11 | 23 | 16 |
| 30-34 | 29 | 54 | 41 |
| 35-39 | 44 | 33 | 18 |
| 40-44 | 40 | 29 | 14 |
| 45-49 | 50 | 20 | 23 |
| 50-54 | 19 | 11 | 7 |
| 55+ | 33 | 17 | 18 |
| Total | 257 | 261 | 182 |

*This is the age for all grants issued.

In terms of the ethnicity of households receiving EH SNGs in the city, there is a clear indication that Māori are disproportionately affected. This is an indication only as ethnicity is provided for the number of grants received and a household may receive more than one grant. 49% of clients who received the grants during the June 2017 quarter identified as Māori. This increased to 54% during the September quarter, and to 62% during the final quarter of 2017.
Table 5: Ethnicity of the client who received an EH SNG issued from Lower Hutt, Naenae, and Wainuiomata sites combined

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Lower Hutt, Naenae and Wainuiomata sites</th>
<th>Quarter ending</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Jun-17</td>
</tr>
<tr>
<td>Māori</td>
<td></td>
<td>126</td>
</tr>
<tr>
<td>NZ European</td>
<td></td>
<td>60</td>
</tr>
<tr>
<td>Other/unspecified</td>
<td></td>
<td>54</td>
</tr>
<tr>
<td>Pacific Island</td>
<td></td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>257</td>
</tr>
</tbody>
</table>

*This is the ethnicity for all grants issued. Ethnicity is voluntary and self-identified.

Providers reported that their transitional accommodation was busy and often at capacity. This is in addition to the EH SNGs paid by the Ministry to people who could not access the funded transitional housing places, either because the accommodation was full or the household did not fit the criteria. As a household can receive more than one EH SN grant it is difficult to accurately quantify the number of households that are officially homeless each quarter. It may be reasonable to speculate that during the quarter ending in December 2017 the number of households in the system exceeded 200. Homelessness overall is higher because of the households staying with whanau, friends, and in other temporary situations.

Homelessness Survey – 20 February to 13 March 2018

The survey was conducted during February and March 2018 and was disseminated through a number of channels including online, by service providers, Libraries, Safe City Ambassadors, and other direct contacts. The full results are available in Appendix 1.

Fifty-five people completed the survey and, although a small sample, its findings demonstrate both the range of households affected and the insecurity experienced.

- Thirty-two respondents were unemployed while 13 were either in full-time or part-time employment, and six were in education or training
- Twenty one were female and twenty seven were male
- Six people were between 18 and 24, sixteen were in the 25-34 age group, seventeen were aged between 35 and 54 years of age, while eleven were 55 years of age or older.
- The largest group (31) was single people while 15 were families with children and four were couples.
- There were a range of ethnicities with the largest two groups being New Zealand European (31) and Māori (20)
As well as the people who said they were sleeping rough or in a car/van, Figures 1 and 2 show that a number of respondents did not know where they were sleeping that night or during the next week.

Figure 1: Where will you sleep tonight?

[Bar chart showing distribution of responses]

Figure 2: Where do you think you will sleep for the next week?

[Bar chart showing distribution of responses]
Many respondents had moved between numerous different situations during the previous year. This included people who had rented accommodation for a while as well as people who had moved between friends and family, slept rough, lived in overcrowded situations, or in improvised shelters.

‘[I live in a] shelter made out of timber in the bush near Korokoro.’ (Single man, 45-54 years old)

Figure 3: Where have you stayed during the last year?

The reasons for homelessness reflect the structural and individual factors identified in the literature. Many of the responses indicated that there were several contributory reasons, including unaffordability of housing, loss of employment, lack of suitable housing in terms of size, design and location, as well as poor health, relationship breakdown, family violence, or other individual level factors.

‘I need a house as I have a bad heart and my health is no good and I’m sleeping in my car.’ (Single woman, became homeless due to physical health problems. Stayed with friends and now living in her car.)
Comments in the survey reveal the story behind some people’s situations, particularly regarding difficulties accessing housing and the impact on their family, including instances of families having to live apart.

‘I have applied for many houses in the last 3 month. Now I’m living in a batch at the back of my boyfriend’s with 2 of the 4 children I have. I have had to move my oldest to my mums… and to top it all off I don’t even have a toilet or shower here. I’m still looking for a house for my family and myself...’

(Couple with children – breakdown of family relationship)

For other households the reason is a straightforward lack of housing that they can afford:

‘When it takes 4 months for a full time person (sic) to be accepted as a tenant then the system is not working. I have managed to get a place for $375 a week [now] but I was looking at up to $450 per week. That would have been 80% of my wages.’ (Single woman with dependent children)
Data from agencies

Agencies also provided data to illustrate the homelessness problems in the city. It was not possible to get the data for one period of time across all providers however the data available indicates local needs and some of the impacts.

Oasis Network

Between 1 January 2017 to the end of December 2017 Oasis received 129 referrals to their emergency accommodation. 66 of these were accepted and 63 were declined. A considerable number of referrals were declined in 2017 because the health needs of the individuals were too acute and could not be met in the accommodation. There are not many alternatives for those declined but Oasis will refer to some providers in Wellington.

Due to the difficulty in placing residents in permanent accommodation the average time spent in the temporary housing exceeded 3 months. Oasis noted that it will not place people in poor housing as this is unlikely to be sustainable. 12 residents were placed into housing – 8 into private rented accommodation and 4 into HNZ housing.

VIBE

Between July 2017 and February 2018 VIBE assisted 32 young people who were homeless and in emergency accommodation.

Table 8: Vibe clients in emergency housing July 2017 – February 2018

<table>
<thead>
<tr>
<th>Number of households</th>
<th>Weeks in accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>1 – 3 weeks</td>
</tr>
<tr>
<td>10</td>
<td>4 – 5</td>
</tr>
<tr>
<td>6</td>
<td>6 – 7 weeks</td>
</tr>
<tr>
<td>8</td>
<td>9 – 26 weeks</td>
</tr>
</tbody>
</table>

The cost of accommodation varied between $375 and $1533 per week, depending on the type of accommodation provided. In seventeen cases the weekly cost of the accommodation was between $1253 and $1533. In eight cases the costs for the period in accommodation was over $11,000. The total cost of accommodation in this period was $252,335.

As well as the number of people involved, housing issues are often complex and take considerable time for agencies to resolve. A VIBE caseworker generally has a caseload of 35 people and workers can spend 10-15 hours per week with one person’s housing issues.
Barnardos

Each Barnardos social worker has approximately fifteen open cases. At the beginning of March 2018 the seven social workers had a total of 105 cases. Around fifty of these families had issues with housing or homelessness, including families living in emergency accommodation, poor and unhealthy housing, and overcrowded conditions.

Women’s Refuge

Between 31 January 2017 and 1 February 2018 there were 2,173 referrals to Hutt City Women’s Refuge. 1,750 of these were referrals from Police. The bednights within that reporting period for the residential service provided by the refuge was 669 and the average length of stay, excluding police referrals, was 79 days.

Citizens Advice Bureau (CAB)

In contrast to other agencies in the city the number of people approaching the CAB for assistance in accessing emergency accommodation decreased in 2016 and 2017.

Table 9: CAB enquiries for emergency accommodation

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower Hutt Citizens Advice Bureau</td>
<td>29</td>
<td>37</td>
<td>33</td>
<td>53</td>
<td>57</td>
<td>43</td>
<td>33</td>
</tr>
<tr>
<td>Petone Citizens Advice Bureau</td>
<td>2</td>
<td>22</td>
<td>13</td>
<td>10</td>
<td>20</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Grand Total</td>
<td>31</td>
<td>59</td>
<td>46</td>
<td>63</td>
<td>77</td>
<td>53</td>
<td>40</td>
</tr>
</tbody>
</table>

CAB New Zealand identifies two reasons for the decrease in enquires for emergency accommodation:

1. Following the publication of the Spotlight on Emergency Accommodation in November 2015, MSD has mostly stopped referring their clients who need emergency accommodation to CAB, having learned that the agency has no more access to accommodation services than they do.
2. It is likely that a combination of CAB interaction with the media, and the awareness of other agencies about its services have resulted in a reduction in the number of people who have nowhere to live seeking its help to solve that problem.

CAB New Zealand believes that people are now approaching MSD and other agencies directly.

First Community Trust

In the year between January 2017 and February 2018 the trust helped 174 people into accommodation, including both social and private rented housing. The Trust’s house has
accommodated 66 single women since June 2017 and the services provided by the trust have helped many of these households move-on to their own accommodation, mainly in the private rented sector.

**Hutt Valley District Health Board (DHB)**

The social work team at Hutt Hospital has seen increasing homelessness and housing hardship in 2017. Data gathered for a six week period between 12 September and 24 October 2017 showed 22 inpatients and 2 patients in the community required homelessness support. Over half of these patients became homeless during their time in hospital.

During the period social workers provided 191 hours of support on homelessness, and an average of 11.5 hours was spent with each patient. Twelve of the patients experiencing homelessness were receiving treatment for serious mental health issues. Patients in the sample spent an additional 237 days in hospital as a result of issues related to homelessness despite being medically safe to be released. The major issue facing these patients was the lack of appropriate accommodation.

ii. Who is homeless and why?

‘There is a real homelessness need in Lower Hutt...homelessness has increased and Lower Hutt is behind in recognising what it looks like. [People still] think of homelessness as being someone sleeping on the street and because of this it’s hard for people to understand that there is a serious homelessness problem.’ (Interview – Keri Anne Brown)

Homelessness affects a wide range of households in the city. This includes single people, couples, and households with children, as well as young people and older households. Some households are more vulnerable to homelessness e.g. young people, people with mental health problems, and people subject to the criminal justice system.15

The reasons for homelessness in Lower Hutt reflect the factors seen more widely in New Zealand and internationally. As well as the structural factors of poverty – loss of employment or income, short-term and precarious employment contracts, debts etc. and the lack of housing supply, there are many individual level reasons for homelessness, such as relationship breakdown, poor health, substance misuse or addiction issues, and family violence.

A major factor why households lose their homes is because of a breakdown in relationships within families and households. This can be between parents/caregivers and young people, and between partners, meaning that one party often has to leave the home.

‘I lost my job due to not having a suitable living condition.’ (A single woman aged 18-24 years old. Became homeless following relationship breakdown and cannot find a place to rent. Over the past year she has rented briefly, lived on the street, and stayed with friends.)

Many households become homeless as a result of tenancies ending either because landlords want the property for other uses, because the rent is unaffordable, as well as debt issues. The high and rising cost of private rental accommodation was identified as a significant issue. Poor health, both mental and physical health problems, and problems with drugs, alcohol, or substance misuse, can lead to and be exacerbated by homelessness.

As the housing market, both rental and home ownership sectors, has become more competitive services in the city are seeing more working households experiencing difficulties accessing, affording, and retaining accommodation.

‘There has been a change in the nature of homelessness because we are now seeing more working households in difficulty – sleeping in cars, [staying] with family and friends, etc. – [they have] no other challenges except that they can’t get housing, can’t afford it.’ (Salvation Army)

The situations for many are driven by low pay and intermittent hours of work and families are in overcrowded housing because of the lack of suitable supply and cost of rent.

**Case study 1: Colin and Amy**

A young couple with children, who over the past year have been homeless and lived in a succession of temporary situations, including with whanau, friends, in overcrowded housing, in the car, and emergency housing. It took them six months to find a house, and in describing their current situation, Amy said ‘We only got it because he plays soccer with the landlord, [and] there are four of us in a two bedroom flat. [My] husband works part time. [We] still can’t afford to rent without my sisters board. Me and my husband sleep in the lounge.’

Homelessness places considerable pressure on every aspect of a person’s life. Insecure situations can affect mental and physical health; intra-household relationships can deteriorate and manifest themselves in arguments and physical violence. In line with previous research we found that homelessness disrupts children’s education and has detrimental impact on their overall wellbeing, as well as affecting people’s ability to retain or find employment.

**Case study 2: Nance and Tamati**

A married couple with six children.

Nance and Tamati and their six children became homeless because their landlord sold the house they
were renting and a technical error with the notice meant they only had two weeks to move out. At the time Nance worked full time and Tamati looked after the children. Neither of them had been homeless before. They had to move into emergency accommodation, in which the eight of them lived for six months in a single room with very limited cooking facilities. The stress of losing their home caused Nance to become seriously depressed and resulted in her having to leave her job.

*Describing this experience* Tamati said “not having a place to call home was really hard… if you don’t have a home you don’t know who you are”.

**The impact:**

Living for six months in a confined space had a very negative impact on the wellbeing of the family. The arrangements of the emergency accommodation in which they were staying meant they were unable to use the shared facilities, including only being able to use the communal bathroom, during certain times of the day. Because of this they spent much of their time in one room and, as they were staying there over the coldest months of the year they weren’t able to be outside at a park or a playground very often. This situation was particularly difficult given the age of their children, as they have both young children who needed space to play and young teenagers who needed their own space.

Living in these circumstances had very negative impacts on Nance’s mental health. When speaking with us about this experience Nance said “I wanted to end it all… but I pulled through for my husband and for my children”. Similarly, the situation also affected the wellbeing of their oldest children who began experiencing depression. In describing this impact on their children, Nance and Tamati told us “our kids were saying to us ‘what’s the point of living if it’s like this?’ These were questions our kids were asking that we didn’t have the answers to”. The situation also affected the children’s engagement at school.

**Where they are now:**

The family are now privately renting in Porirua. They are living in a house which has two double bedrooms and one small room which they have to use as an additional bedroom for two of their children. This means that while two children sleep in each of the larger rooms, Nance and Tamati have to sleep in the lounge. This was the only house Work and Income was able to find for them and they were informed that if they refused it they would be at the ‘bottom of the list’ and unlikely to be offered anything else. While grateful to be out of the emergency accommodation, the house they are renting is unsuitable. In addition to the overcrowding, they are paying 76% of their income on rent, meaning that they have only $150 each week to buy food, power, and pay transport costs and all other bills. Living in Porirua also places additional strain on their family as they are located away from their whanau, social support and their younger children’s school. The social support they were receiving, for instance through their marae, is harder to access and there is not a local Kura Kaupapa school that their younger children can attend. They do not own a car so transport is difficult.
Nance and Tamati are struggling to work through the damage losing their home has caused. The situation has had a particular effect on their eldest daughter, affecting her mental wellbeing, behavioural problems and disrupting her education.

Nance is currently unemployed and cannot really afford to work because most of the work she would be able to get is in Lower Hutt and they cannot afford the transport costs. They have calculated that in order to increase their income to more than what they receive currently, they would need to be earning at least $20.50 an hour (taking into account family tax credits), but with the minimum wage at $16.50, this is unlikely. They are currently “barely getting by” and feel trapped in a benefit/poverty cycle.

Losing their home was the beginning of a downward spiral for the family. As a consequence there have been serious impacts on their health and wellbeing, the children’s education, as well as their financial situation. Moving away from their local area has also meant losing their social support. The repercussions of losing the home are ongoing and with their limited means they continue to face substantial problems.

In many cases when people lose their homes, their initial response is still to try to find their own solutions e.g. go and stay with whanau or friends. While this can be positive, staying with whanau particularly for an extended period of time can place considerable strain on relationships. These situations are inherently insecure as people can be evicted without notice and routes through homelessness often include several such temporary solutions.

Case study 3: Nick

Nick is a single man who has been living in his car for the last year. He has been sleeping in his car ‘on and off’ for the last four years between renting privately and living with whanau.

Nick initially moved to Wellington with his then partner to assist whanau who were at risk of having their children ‘taken’ from them and placed in state care. They moved to support them to work through their family issues, attend counselling meetings and so on.

Shortly after this Nick and his partner separated and for a while Nick shared a flat with friends and then lived with his sister who would be away for work much of the time. Following a disagreement over Nick allowing a friend who was sleeping rough at the time to stay the night, his sister threw him out.

Since being evicted over a year ago he has been living in his car. Nick works here and there and, out of a desire to make a positive contribution, does voluntary work in his community. He can’t afford to rent privately so continues to live in his car.

Summarising his story Nick said “This is my lot in life, and I’m not happy but I am content. I look at it as though each day might be better than the last. In lots of ways I have it better than most because I have my car and my relationships in my community”.

DOC/18/87759
In-line with other literature some households in Lower Hutt are particularly vulnerable to homelessness. These include young people, women with children, people with mental health problems, and people fleeing family violence.

**Young people 16 to 24**

Young people are particularly vulnerable to homelessness. Often because of their age, many do not have the knowledge or experience required for independent living and they are often a low priority for landlords. A number of agencies mentioned that for young people, their age alone is a considerable barrier to securing accommodation, with several seeing this as deliberate discrimination by landlords.

One agency we spoke with told us they had been directly informed by a rental agent that due to the high demand for rental accommodation *they will rarely consider an application from anyone under 25*.

As young people in these situations have often had difficult and challenging childhoods and/or family relationships, they may also have behavioural issues that exacerbate their situations. The combination of these factors means young people often live temporarily with a succession of friends and in other unsuitable situations. For some young people their experiences lead to or exacerbate substance misuse or alcohol issues. Similarly, as many are at school or engaged in training, losing their homes makes it difficult to continue engaging with their studies and disrupts employment prospects.

**Case 4: Rob**

*Rob is 17 years old and still at high school. He became homeless after telling his parents and family that he is gay. They threw him out and with nowhere to go and no support Rob moved from friend to friend over several months, drinking every night and engaging in other destructive behaviour.*

For 16 to 17 year olds securing settled accommodation is particularly difficult as they are not able to sign tenancy agreements without a guarantor. In instances where young people are no longer able to live with their parents or caregivers they will often experience several temporary and unsafe living situations.

**Case 5: Jane**

*Jane is a 17 year old woman who is currently living in emergency accommodation at a local motel, where she has been for the last 11 weeks. Jane has had a difficult relationship with her family throughout her life and initially became homeless after a relationship breakdown with her mother. When she became homeless, Jane lived in her car which she parked in the driveway of her sister’s rented house. Jane felt she was able to live in her car while it was parked on private property as it*
Jane has been working with Vibe to try and secure permanent accommodation. However, because Jane is under 18 and is currently receiving a youth payment she is discriminated against by private landlords who are unwilling to consider her application. As her case worker at vibe said “It is often frustrating that Jane is dismissed before she could even get a look in at some of the rentals or flatmates wanted simply due to the fact she is young and on a Youth Payment. The frustration with this is that the fact she is on the Youth Payment actually guarantees her board or rent is paid directly to the landlord before she even receives her weekly payment”. Despite the significant difficulty Jane is having finding accommodation, there are no other options for her than to rent privately, as a single young person with no dependents she is unlikely to even make it on to the Housing New Zealand register.

*Case study provided by Vibe – Hutt Valley Youth Health Service and Regional Public Health.

Jane’s story is similar to that of many others. Many young people spend considerable time in temporary accommodation, often moving from one place to another, before they can find settled housing. With too few rental properties and a competitive market for what is available, this age group has little chance of securing a home.

**Single women and women with children**

Single women and women with children are groups which agencies are often assisting with homelessness. Although there are some services for women with children there are few available for single women without children. MSD notes that women, with or without children, is one of the largest groups in their caseload. While family violence is a factor, and MSD reports a growing number of these cases, there is also a range of other reasons.

Between December 2017 and February 2018 Kokiri Marae received around 20 enquiries from women with children who were homeless but the Marae refuge service was unable to assist because family violence was not a factor in the cases.

**People with mental health problems**

People with mental health problems are more vulnerable to homelessness as they can experience difficulties maintaining a home, dealing with rent and bills, and often coping with everyday situations. The administrative burden of the obligations to demonstrate to MSD that they are actively searching for private accommodation places considerable stress on these households. One of the agencies said that having to apply over and over again for houses that they have ‘no chance of getting’ is disempowering for people who are already particularly vulnerable.
Case study 6: Karen, Damion and Tessie

Karen, Damion and their daughter Tessie, lost their social housing accommodation. Karen’s poor mental and physical health created delays in the household approaching MSD for assistance and Karen and Damion lived in a tent for some time, while Tessie lived with whanau. They eventually moved into accommodation with whanau as a temporary solution.

MSD noted that a high number of people applying for homelessness assistance have mental health issues, albeit the types of health conditions are not described in detail. In one of our interviews with homeless households an interviewee referred to his perception of the level of mental health needs amongst people who are homeless in the city. Many of these people are not able to live independently and MSD does not necessarily have the capacity or knowledge to assist them properly or the services to which they can be referred.

‘Nearly half of our clients have severe mental health issues which our staff do not have the capacity to address.’ (Interview – MSD)

Case study 7: Ben

Ben has been homeless for approximately 16 months. He lost his home after experiencing a significant deterioration in his mental health which he referred to as ‘having a nervous breakdown’. This left him unable to work, which resulted in him and his flatmate being unable to afford their rent and to their eviction from the flat.

After becoming homeless Ben lived in his car for 11 months, however, he received a number of tickets from police for where he was parking his car, which he was unable to pay. Ultimately his car was seized due to non-payment of fines. After his car was ‘taken’ he had nowhere else to stay and was forced to sleep rough for a week, during which time he received no help from any agencies, including work and income.

Ben has spent the last five months living in a hotel, he receives $300 per week from work and income, however this is not enough to cover his accommodation costs of $350 per week at the motel. In order to make up the deficit in his payment, Ben does maintenance work at the motel. He is trying to find somewhere else to live but is unable to afford to rent privately anywhere. As he said “there’s nothing for single blokes in my situation”.

Ben is hoping that his health is improving and that he will soon be OK to return to work. For Ben the mental health breakdown he experienced precipitated a spiral of homelessness which so far has continued for 16 months.

16 It is not clear whether or not these are diagnosed mental health conditions.
Additionally, the stress of losing their home can cause considerable mental health issues for individuals and families. Organisations reported the numbers of people developing anxiety and depression, as well as illnesses associated with these such as eating disorders, because of losing their homes and the insecurity that follows is increasing. Several providers reported that people with mental health issues face discrimination from private providers, thereby making it even more difficult for them to secure sustainable accommodation.

One woman we interviewed told us that losing her home and being homeless with her husband and children caused her to develop serious depression which resulted in her leaving her job. Describing the impact of her experience she said:

‘I just wanted to end it…what’s the point of living if it’s like this.’ (Case study 2 – Nance)

Many people living rough or in cars seek to avoid contact with state and other services in order to avoid having their health – and other – problems recorded because of the perceived risk that this information could further limit their chances of accessing housing in the future.

**People fleeing family violence**

Family violence is a major cause of homelessness as women living with domestic violence can be forced into becoming homeless as they are no longer able to live safely in their home. They are particularly vulnerable and need considerable support to find safe accommodation. A number of agencies involved in the research reported that clients have fled situations of domestic violence only to have to return because they had nowhere else to live or even in some cases to stay on a temporary basis.

‘One woman left her home because of domestic violence. She stayed at a camping ground, then a motel, and the camping ground again. She couldn’t get a house because of the cost of the rent and ultimately returned to her ex-partner and a potentially unsafe situation in order to share the costs of accommodation.’ (Interview – Barnardos)

Accommodation and support providers report that services for households becoming homeless as a result of fleeing violence are under considerable pressure with MSD noting that those fleeing violence is a major component of their caseload. The issue places further demands on emergency accommodation provision particularly as hotel accommodation is often considered unsuitable for these households. While homelessness as a result of family violence is a large part of MSDs caseload, some agencies feel that that the ministry does not always respond adequately. Agencies expressed concerns about women being placed in unsuitable accommodation, in relation to either the location of the person abusing them or in terms of poor security in the temporary placement and the risk of their abuser finding them e.g. many expressed concern about the ease of finding someone placed in a motel as opposed to a refuge/safe house.
‘A woman may be living somewhere they are away from their abuser, but living nearby or their abuser knows where they live, so they need to apply to HNZ for relocation, but even in situations where there is a high risk abuser, that is there is a risk of fatality, these situations still aren’t being prioritised.’

(Interview – Lower Hutt Women’s Refuge)

Family violence and homelessness is particularly challenging for women with children and, in addition to the impact of violence in the home, children in these households also have to deal with becoming homeless and living in temporary accommodation.

**People released from prison**

Prisoners being released are, as a group, vulnerable to homelessness. In our research locally ex-prisoners were not identified as one of the highest need groups. However a number of agencies referred to their vulnerability and they are part of the agencies’ caseload. Settled accommodation is important to help this group find work, re-establish themselves in the community, and it helps reduce recidivism. First Community Trust provides accommodation to some people released from prison. For example, during April 2018 their temporary accommodation was providing housing for two women who had been released from prison while one female ex-prisoner had just moved into rented accommodation.

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17 [https://cdn.auckland.ac.nz/assets/arts/documents/compass_seminars_2016_homes_for_ex_prisoners.pdf](https://cdn.auckland.ac.nz/assets/arts/documents/compass_seminars_2016_homes_for_ex_prisoners.pdf)

18 Out of Gate – Prisoner re-integration service. Under this scheme contracted by the Department of Corrections, prisoners are supported by Navigators before and after their release. ‘They assess the needs of prisoners before their release and establish a release plan, focussing on housing, employment/training, health and wellbeing as well as family, social and cultural connections. Our Navigators walk alongside and support prisoners following their release.’
iii. Processes and services

**Homelessness assistance process**

MSD is the lead government ministry dealing with homelessness assessments and procuring emergency and transitional housing. MSD conducts the homelessness assessment that decides whether or not an individual is homeless, eligible for assistance, and whether assistance is government funded or will require the household to contribute to the cost. The Ministry has contracts with five providers in the city, including Koraunui Marae, First Community Trust, Oasis, Salvation Army, and Emerge Aotearoa. The accommodation provided includes multi-occupancy houses, and hotel/motel provision both in Lower Hutt and other areas of the region, and contracts also include the provision of support for households. As at December 2017 MSD had a target to deliver two transitional housing places in Lower Hutt in addition to the 44 places currently available.

While there is considerable pressure on MSD’s services in relation to emergency and transitional housing, some organisations also reported that the homelessness processes have improved during the last 18 months e.g. clear referral process, the investment into emergency and transitional housing, and working relationships between community organisations and the ministry. However, several participants identified deterioration in services to some clients such as people fleeing violence and those leaving health care. This was particularly in relation to removing the single points of contact for clients. The levels of need in the city also far exceed the availability of temporary accommodation, support, and permanent accommodation available. This means that the Ministry and local organisations are unable to assist people effectively.

With increasing demand for accommodation and support it has become more difficult to find accommodation and more people are placed in other cities in the region e.g. Porirua and Upper Hutt. Motel costs are reportedly more expensive in Lower Hutt than in other areas. Motel accommodation for a family in Lower Hutt can cost approximately $2,500 a week but current demand means that there aren’t suitable alternatives. It is reported that some business owners increase their rates for households using their premises for emergency accommodation.

As the housing supply situation deteriorated, the previous government provided increased funding for emergency and transitional housing and also encouraged people to approach MSD for assistance. The ministry believes that this has meant more households seek government assistance rather than finding their own solutions. However, it is also likely that the pressure on housing, the number of people experiencing homelessness and housing hardship, and the time it takes to find settled accommodation means that the needs overwhelm temporary whanau or other solutions. The view in the wider sector is that people continue to attempt to find their own solutions e.g. staying with families – often in overcrowded housing or unsuitable conditions such as garages – and/or friends first but that the scale of the problem and the difficulties in accessing settled accommodation means that these options become exhausted over time.
Dividing housing functions between MSD and Housing New Zealand (HNZ), with MSD assessing homelessness and administering the social housing register and HNZ managing housing and allocations, causes some problems for people and organisations. In terms of the register HNZ is now one provider, albeit by far the biggest, among other social housing providers. A household needs a high priority in Band A to have a good chance of being allocated a house and their position and time on the register is also affected by the needs of other households. There is reportedly little support for people applying for social housing or navigating government processes and it is difficult for them to know their position on the list or ascertain an estimate of how long they may have to wait. For many it is mainly an online process and people do not always have the literacy skills or documents required to complete the application. Although separating the assessment and allocation process appears logical in that it removes subjectivity, some people expressed dissatisfaction with the process and noted that HNZ appears to be more inaccessible to people than may have historically been the case. In terms of the allocation process HNZ does have some discretion over which household from the top priority households on the register they accommodate and where. In order to try to ensure that accommodation is sustainable they will look at a household’s needs and the available properties eg, type of area and profile of other households in that area. It may be that organisations and individuals are unaware, or have not been informed, that the allocation process in practice is flexible in this way.

**Local services**

A major part of the research was interviewing organisations in the city that either provide accommodation and support services or that deliver advice, support services more generally e.g. in terms of education/training, employment, health, or legal advice, and who deal with housing or homelessness issues as a result.

**Table 9: Temporary accommodation provided in the city**

<table>
<thead>
<tr>
<th>Provider</th>
<th>Capacity</th>
<th>Households</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oasis</td>
<td>A unit with 15 spaces in Naenae</td>
<td>Single men</td>
<td>Transitional housing – men with lower or medium mental health problems and/or addiction issues</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>T House – 8 rooms</td>
<td>Single people and couples. The accommodation is linked to a parenting programme.</td>
<td>Transitional housing</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>4 houses</td>
<td>Families – single people with children or couples with children.</td>
<td>Transitional housing</td>
</tr>
<tr>
<td>Location</td>
<td>Description</td>
<td>Targeting</td>
<td>Type</td>
</tr>
<tr>
<td>------------------------</td>
<td>--------------------------------------------------</td>
<td>----------------------------------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Koraunui Marae</td>
<td>A 5 bedroom house</td>
<td>Women and children</td>
<td>Transitional housing</td>
</tr>
<tr>
<td></td>
<td>A 6 bedroom house</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community First Trust</td>
<td>Two houses:</td>
<td>Women</td>
<td>Transitional housing</td>
</tr>
<tr>
<td></td>
<td>11 bedrooms</td>
<td>Families – with children</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6 bedrooms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kokiri Marae</td>
<td>Safe house – 4 rooms with space for up to 15 people</td>
<td>Women with children</td>
<td>Emergency – family violence</td>
</tr>
<tr>
<td></td>
<td>Women’s refuge accommodation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women’s Refuge</td>
<td>18 bed spaces</td>
<td>Women and women with children</td>
<td>Emergency – family violence</td>
</tr>
<tr>
<td>Emerge Aotearoa</td>
<td>Support to households in two hotels:</td>
<td>A range of households</td>
<td>Emergency and transitional</td>
</tr>
<tr>
<td></td>
<td>The Fernhill Hotel, and Hawkes Hotel, Upper Hutt.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>A number of houses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Emerge Aotearoa has 34 houses in the region a number of which are in Lower Hutt. Data on the number of houses in the city was not provided.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>YMCA</td>
<td>106 rooms</td>
<td>Single people or couples – only some of these are available to households in emergency situations.</td>
<td>Lower cost accommodation – can be for short, medium, or long-term</td>
</tr>
</tbody>
</table>

*The table does not include other motel accommodation which is used on a regular basis.

In addition to the above provision some households are referred to providers in Wellington such as The Nightshelter for men and Wellington Homeless Women Hostel, and to providers in Upper Hutt such as the Lighthouse home for girls which has capacity for six young women, as well as the Upper Hutt Housing Trust which has one nine bedroom house.
As well as providing accommodation, organisations also provide a range of support services for people experiencing homelessness. The support is a key part of contracts with MSD and includes social support, working on financial capabilities, counselling, support with health or addiction issues, and help with accessing move-on accommodation.

Most accommodation providers are locally based and include national organisations such as Salvation Army, YMCA, and Emerge Aotearoa. Emerge Aotearoa is a national organisation that provides a range of support. The organisation has a contract with MSD to provide support to households in emergency housing in the Wellington region and this includes two motels in the Hutt Valley as well as in Porirua and Wellington.

A number of other organisations also have a key role in helping people who are homeless. These include VIBE, Citizens Advice Bureau, Barnardos, Youth Inspire, and local health agencies. Although these agencies focus on issues such as employment, education and training, advice provision, services for children and families, and health, through their work they regularly assist people who are homeless or have housing problems. Increases in homelessness and lack of capacity among accommodation and support providers, mean that these non-housing organisations spend considerable time and resources trying to resolve homelessness and housing issues.

The majority of intervention by organisations in the city occurs once people are homeless. A number of agencies are engaged in homelessness prevention services, for example Oasis can provide support for people in their homes if the referral is received early enough and Koraunui Marae provides support to help households sustain their housing. Emerge Aotearoa deliver homelessness prevention services in other areas of the country and believes there should be more emphasis on this aspect locally.

‘Keeping people in housing rather than finding them emergency housing etc. would make economic as well as social sense.’ (Interview – Emerge Aotearoa)

Dealing with the range of causes and consequences of homelessness and housing hardship requires effective joint working between agencies. Organisations are generally working together well to deliver coordinated services to people who are experiencing homelessness and have good knowledge of the help available from other agencies. There are potentially some gaps e.g. there was less awareness that Salvation Army was targeting fathers with children in some of its accommodation, and some interviewees referred to a need for a strategic approach and better coordination of services.

However, the limited capacity of services to deal with the number of households requiring help is the major issue and there is an ‘all hands on deck’ culture with organisations, including non-housing organisations, out of necessity putting considerable time and resources into working through people’s housing issues. While this is an understandable response in the short-term it is not an efficient way of working longer-term, depends on non-housing organisations intervening regularly beyond their remit, and means that households in the city cannot always access the services they need. Greater service capacity and an overall strategic response are needed to achieve better outcomes for people, and Council could contribute to both of these aspects.
iv. Housing supply

‘Housing shelters isn’t the answer – they [people] need a home that they can call their own, and security.’ (Interview participant)

One of the themes in relation to housing supply was the importance of home. Organisations referred to the difficulties that people experience in continuing with aspects of their lives when they do not know where they are staying that night or are living in temporary situations. Similarly, people who are homeless, as well as describing the practical difficulties faced, also referred to homelessness affecting their sense of personal identity and self-worth.

‘Not having a place to call home hit us hard. If you don’t have a home you don’t know who you are.’ (Case study 2 - Tamati)

‘It’s really hard being homeless, it makes you feel worthless.’ (Case study 8 – Steve)

A safe, secure, suitable home is important to people’s identity, and enables them to get on with life e.g. concentrating on family, education or training, employment, or looking after their health and wellbeing.

‘Housing comes up all the time and you can’t begin working on other things if the person doesn’t have accommodation, is living in temporary situations and doesn’t know where they’ll be staying that night.’ (Interview – VIBE)

Lack of suitable housing in the city is the main cause of homelessness. Poor housing supply has long been identified as a problem and with both national and local government slow to respond, prices and rental costs are an issue across the housing market.

‘[I am] self-employed but struggling to pay a massively increased commercial lease, as well as rent, with prices doubling almost overnight. I know there are a load like me living in buses or converted storage sheds.’ (Single man, working full-time, became homeless due to relationship breakdown and lack of affordable housing. He has slept in a workshop, a friend’s place, and a car.)

The increasing cost of housing means that households experience difficulties accessing homes. As owner-occupation becomes more difficult to access the private rented sector has become more competitive and, as a consequence, households earning low incomes or that have debts or other problems are even less likely to be selected by landlords.

There is a perception that neither Housing New Zealand (HNZ) nor to an extent Council have sufficiently prioritised the community’s housing needs and supply of suitable housing in the city. HNZ has demolished areas of housing but, because of resource constraints, needs in other areas of the country, and competing with the private sector for construction workers, rebuilding has been slow and means that now there is even more pressure on this part of the housing sector.

Participants noted that Council could be much more active in working to improve supply through building houses and use of its own land, as well as working in partnership with government and others.

The social housing register in the city has increased each quarter over the last two years which means that securing HNZ housing or that of other social housing providers is also difficult. Additionally, there is less turnover of HNZ stock than has previously been the case. In March 2018 HNZ reported that it had only fourteen available properties in the Hutt Valley.

Although HNZ is increasing its housing supply in the city, with several hundred consents for dwellings granted during March and April 2018, there is recognition that these developments on their own will not be enough to meet the needs. MSD reports that there are currently 8553 public housing units in the Wellington region. The Ministry has a target of 9060 units by June 2020. The majority of the public housing in the region is in Lower Hutt.

While recognising the lack of temporary accommodation to deal with current needs, there is a consensus that the main problem is a lack of permanent housing i.e. housing to which people can gain access immediately or after a period in temporary housing. The lack of supply means people stay in temporary situations for longer which compounds the negative factors associated with insecure housing.

‘We can get people emergency accommodation – not always but often – but where are they supposed to go after that? There is nowhere to transition people to...[so] people take housing in Upper Hutt and Porirua where they have no social support [from family etc.].’ (Interview – Barnardos)

There is considerable demand for private rented sector housing and this means that this sector is more difficult for people to access. People with low incomes have greater difficulty competing in the market while those who have other problems such as poorer credit histories, or health issues or addiction problems are further disadvantaged. Young people on low incomes also have difficulty competing for housing. Landlords can sometimes discriminate against particular groups of people such as young people or those with mental health problems e.g. seeing them as unreliable, less likely to pay the rent than others, more likely to damage the property, but in the current market they also have a considerable choice of households and no need to consider those they see as presenting any type of risk. See Box 1: Demand – social and private renting, and house prices.

‘If you have low-income or debt you can be shut out of the rental market, because there is so much competition for rentals [that] landlords are in a position to completely disregard people who present any sort of risk. There is a big cohort of people in low-income jobs who just can’t afford the cost of renting anymore.’ (Interview with Keri Anne Brown)

21 Public housing in Wellington Region, (Ministry of Social Development, 31 December 2017)
Areas such as Wainuiomata, which have previously been seen as affordable both in terms of rental costs and home ownership, have increasingly become more unaffordable as people begin to look further afield than Wellington and other suburbs in the Valley. As the demand has increased the options for people on lower incomes have diminished and they are forced into worse situations.

Similarly, although some housing is being built in areas of the city this is often expensive, and will not benefit people on lower incomes. Supply will need to increase significantly to impact on affordability and, as indicated in literature including studies by the Productivity Commission, building is often at the more expensive end of the market.

### Box 1: Demand – social and private renting, and house prices

The number of households on the social housing register in Lower Hutt has increased each quarter from March 2016, reaching 246 households at the end of December 2017. The register includes the households that have registered and are considered eligible for social housing. It does not therefore include households that are ineligible but still in housing need or many of those that are moving between friends and family. The lack of housing support and advocacy also means that some people have difficulty making applications and navigating the processes.

#### Figure 5: Housing Register – Lower Hutt 2014 – 2017

There is also an indication that more households have higher level needs. Of those on the register in December 2017, 176 were in priority band A. This is 36% higher than the number at the end of September. The majority, 125 households, requested 1 bedroom properties.

Rents in the private sector

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22 The figures do not include the number of households on the Transfer Register which has also been increasing.

Data for December 2017 shows that mean weekly rent costs increase by 2.2% compared to the previous quarter and 9.5% between December 2016 and December 2017. There were increases at ward level across the city:

Table 7: Percentage increase in mean weekly rents between December 2016 and December 2017, and the rents in December 2017

<table>
<thead>
<tr>
<th>Ward</th>
<th>Percentage increase</th>
<th>Mean rent in Q4 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western</td>
<td>8.7%</td>
<td>$411</td>
</tr>
<tr>
<td>Harbour</td>
<td>2%</td>
<td>$394</td>
</tr>
<tr>
<td>Central</td>
<td>9.9%</td>
<td>$333</td>
</tr>
<tr>
<td>Northern</td>
<td>14%</td>
<td>$339</td>
</tr>
<tr>
<td>Eastern</td>
<td>9.3%</td>
<td>$375</td>
</tr>
<tr>
<td>Wainuiomata</td>
<td>10%</td>
<td>$350</td>
</tr>
</tbody>
</table>

Data on the bonds lodged for private rented housing shows that there is a low turnover of properties. New bonds lodged as a proportion of active bonds were 5.5% in September 2007 and 2.7% in September 2017. This implies that tenancies in the sector are stable which is positive but also that there are very few properties available for people seeking homes.

House Prices

Median sale house prices continue to increase – 1.6% higher compared to the end of the previous quarter in September and 12% higher across the city compared to the end of December 2016. Strengthening household growth and a lower number of new dwelling consents indicates a mismatch between demand and supply in the city.

The price cost ratio in the city reached 1.606 in 2017, indicating that the supply of land/sections is not keeping up with the demand and that the price of land is disproportionately increasing house prices.

Strong house price growth continues, particularly in Wainuiomata, with a 20% increase compared to December 2016.

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v. Preventing homelessness

Most services are operating to support people when homelessness has already occurred. There is a lack of services that can support people with issues that are putting them at risk of losing their accommodation. Prevention work would require additional resources and capacity e.g. to provide tenancy support, link people into suitable services, and work with landlords to prevent eviction.

Emerge Aotearoa delivers tenancy support services in Auckland but doesn’t currently have the resources to deliver this type of service in the Wellington region. Similarly, in the context of family violence, little work is done locally to engage with abusers and prevent violence occurring. Women’s Refuge identified that a focus on abuse prevention would help prevent women in some situations becoming homeless.

‘If we were able to work [more] with abusers and help reconcile relationships/prevent violence occurring it would help alleviate pressure on housing need.’ (Interview – Lower Hutt Women’s Refuge)

Organisations referred to the Housing First intervention model, which is currently being used in Auckland and is being introduced in Wellington and Lower Hutt. Housing First is reported to achieve favourable results in breaking the cycle of homelessness. The intervention works on the premise that it is easier for people to address their issues once they have accommodation. It prioritises moving people into suitable housing quickly and then provides them with the support they need.

In terms of developing tenancy support HNZ is currently considering conducting a small-scale pilot project with Hutt Valley DHB in which HNZs intensive tenancy managers could provide intelligence on tenancy issues. The support services however, would need to be provided independently of the landlord. In international examples many support services are provided by organisations that are independent of the landlord as it is easier to engage with the household, provide objective advice and support, and avoids conflicts of interest.

vi. Temporary accommodation

The city has some good temporary housing which is provided with support services. This includes accommodation with support for people with mental health problems, and for women and women with children, and also families with children. Additional temporary accommodation has been provided in the city over the past two years. There are a number of MSD funded providers and people are also placed in accommodation such as motels both in Lower Hutt and other areas of the region. There is little provision for young people, people with higher level mental health needs, or male households.

In some cases the temporary housing used is unsuitable because of the lack of appropriate support and the vulnerability of some households. This can be the case for example if households have mental health problems and require specialist support to make the placement sustainable. In one

26 Housing First https://www.housingfirst.co.nz/
case highlighted by the DHB, a woman with anxiety and issues of cognitive decline was placed in accommodation. She soon became more anxious and staff members at the accommodation were unable to reassure her. She had to return to hospital the next day and was there for a further two months because she had nowhere to go.

The demand for assistance and shortage of housing options mean that individuals and families are regularly being placed outside their local areas in cities including Porirua and Upper Hutt. MSD is dealing with a high level of needs and has little choice but to place people where it can. However, this displacement creates a number of problems. One of the key issues is that people are often separated from their support networks, including the services they use and the help of whanau on which they are often dependent. Additionally, in a number of cases, people are placed into locations that are unsuitable, due for example to their own past or present gang affiliations or those of their family.

Case study 8: Rachel and Simone

Rachel a single mother and her child Simone, who has acute health needs, lost their home. Before they became homeless Rachel’s mother had looked after Simone while she was at work as they both lived in Petone. However, when they became homeless they were moved to Upper Hutt where Rachel’s mother was no longer able to look after Simone. This lack of childcare meant Rachel was no longer able to work.

Agencies reported that people had ended up moving back into very overcrowded situations because it was unmanageable for them to be away from their support networks. For some, being separated from their support networks had a detrimental impact on their mental health, particularly in relation to causing or exacerbating anxiety.

Relocating from their local area is particularly difficult for school age children. In many instances when children are moved away from the area in which they go to school the logistics of getting them there, as well as the transport costs, means that the children often do not go to school. Similarly, when children have to move schools as a result of homelessness this can cause disruption and the loss of relationships with friends and teachers during an already stressful period. This in turn can result in truancy and further disengagement.

Motel accommodation

Although the number of transitional housing places in the city has increased slightly, motels are still regularly used as temporary accommodation. Because of both the level of need and a lack of housing, people are often in temporary accommodation, including motels, for longer than the expected emergency or transitional periods. As homelessness increased in 2017 so did the use of hotel/motel accommodation and people from the city are placed in motels locally and in other areas of the region. MSD has a contract with Emerge Aotearoa to support households in a number of motels.
While hotels or motel accommodation are used in response to homelessness in New Zealand and a number of other countries, it is generally accepted that this type of accommodation should only be used in emergency situations and for short periods.\(^{27}\) As well as being economically costly they are often unsuitable for households because they lack space, have limited or no facilities for cooking which results in further costs to the family, and lack space for children to play and do homework for example. Households can also become isolated and detached from support networks, family, and schools.\(^{28}\) More broadly, because of the demand for services, people with a range of needs e.g. mental health, drugs/alcohol, etc. are often placed in the same accommodation which can create potentially dangerous situations. Many motels have bars which, as well as being a concern for agencies in terms of the safety risks for children, can cause difficulties for people who are vulnerable to and trying to deal with addiction issues.

Agencies reported concerns particularly for young children, as motels are often located near busy roads and can be unfenced. Staying at a motel was also reported to pose risks for people fleeing domestic violence, as their abusers are sometimes able to find them. There have reportedly been a number of recent incidences where victims of domestic violence have been housed in motel accommodation where they have been found and assaulted by their abuser.

Case study 9: Steve and Elsie

Steve (24) and Elsie (17) are a young couple who have been homeless for seven months. During that time they have lived in two hotels and a cabin at a holiday park. They are currently living in a motel and Elsie is expecting a baby in a few months.

Current situation

This is Elsie and Steve’s second experience of being homeless. They lost their home in the South Island before moving to the Hutt Valley and moved here to stay with whanau. The couple became homeless again following a breakdown of their relationship with whanau. Steve and Elsie have been homeless for the last seven months and feel that their age is a significant barrier to securing accommodation.

The impacts

Being homeless and living in different motels and a caravan park has been very stressful for both Steve and Elsie and is particularly hard on their relationship. Steve told us that while some aspects of living in the motel are okay, it’s really hard not having a home – “the motel isn’t home, it never feels like home”. In discussing the impacts being homeless was having on both of them, Steve described us how much he appreciated the support they got from Vibe particularly for ‘helping keep their heads


\(^{28}\) Impact of homelessness among patients from the Hutt Valley District Health Board, (Hutt Valley District Health Board, September 2017)
above water’, he said “it’s really hard being homeless, it makes you feel worthless”. For Elsie the precariousness of their current situation, places an additional burden on her as it limits her visitation rights to her young son who is currently living with whanau in another area of the country.

In order to continue to receive the social support that they do, they must apply for rental accommodation every week. Elsie has applied for dozens of houses and been to the viewings, at which there will be between 20 and 40 other people, and has been turned down for every house, she said: “it’s like they don’t even look at the application, they just turn it down”. This experience is disheartening and stressful for both Elsie and Steve and as there is little indication of finding a home soon they are facing the prospect of having their baby while living at the motel.

The insecurity of their situation places considerable pressure on their wellbeing in addition to causing practical and financial problems. The limited facilities of the motel, particularly in terms of food storage and the cooking, means daily trips to the shops to buy food as it isn’t possible to buy in bulk and store items. Being homeless also makes it difficult for Steve to find employment and for them to prepare for the arrival of their baby. The lack of a stable home is currently placing a strain on Elsie and Steve as a couple and will become particularly difficult as they prepare to become parents.

Providers locally recognise the issues of using motel accommodation, and try to move people on to other housing as quickly as possible, but current needs and supply constraints mean its use is currently considered inevitable. The use of EH SNGs decreased in late 2017 but MSD locally reports it is experiencing a high level of need for temporary accommodation and this includes motels.

‘In an emergency situation it’s about getting people into some accommodation as fast as possible so they have somewhere to sleep. But living in a motel creates very bad long-term impacts. People become very disconnected in these situations but they are often the only accommodation option...’ (Interview – Emerge Aotearoa)

Organisations report that people living in motels as emergency accommodation are moved from room to room as the motel becomes busier or has had to leave if it becomes fully booked. Although this is the nature of the hotel business it serves to further emphasise the unsuitability of this type of accommodation for vulnerable households.

‘Emergency housing is a disgrace – the government desperately don’t want people to be labelled as homeless [street homeless] so they are putting them into completely unsuitable places that are often dangerous and out of the area which creates all sorts of issues. They can be moved every week often to different rooms in the same motel [and] this is very unsettling for families.’ (Interview – Keri Anne Brown)
**Temporary accommodation for people with higher level mental health problems**

There is insufficient temporary accommodation available for people with mental health problems, particularly those with higher level needs. MSD referred to a considerable number of people with serious mental health issues and difficulties finding accommodation without having care plans and assistance in place. Data from Hutt Valley DHB and the Te Whare Ahuru unit also identifies that individuals with often higher levels of mental health needs are particularly susceptible to homelessness and that there are limited accommodation options available for them. Interviews with the DHB and MSD revealed some differences in interpretation of the problem. MSD referred to receiving late referrals without care plans or support, and a growing culture of dependency amongst health service social workers who used to find accommodation for people but who now pass this responsibility to MSD whereas the DHB identifies the lack of accommodation and support available. It is likely that, although finding accommodation is not a core part of their role, in periods when accommodation was not under such pressure, social workers could more easily find accommodation for patients prior to their release from hospital.

Improving joint working between agencies e.g. through early referral protocols and so forth might enable better solutions to be found, however lack of suitable accommodation means it is currently difficult for many agencies to assist people with higher level support needs. One provider indicated recently that it rejects around 50% of referrals for accommodation because there isn’t enough support for more acute mental health problems.

**Temporary accommodation – for young people and general needs**

There is a lack of suitable temporary accommodation with support in general e.g. for young people and for single men particularly.

*‘It’s soul destroying having people come to social services to try and get help and we can’t help because we don’t have the resources [for what] they need’* (Interview – Kokiri Marae)

There is a possible lack of accommodation and support for people with higher level addiction needs. Although it is currently difficult to evidence the level of need, services required could include wet-house provision. Such provision is being considered in Wellington City.

**vii. Housing advice and support**

Several organisations identified a need for a service that could provide advice and advocacy to people who are homeless or have housing related problems.

Housing support for young people, in a range of different situations including those leaving state care appears to be a gap in the services available and can be challenging to deliver. Non-housing agencies working with young people, people in poor health, or with families and schools, are spending a considerable amount of time dealing with accommodation issues, finding temporary
accommodation, providing some support with independent living etc. Because of the impact that insecure housing and homelessness has on people’s health and ability to focus on finding employment or focusing on education, these agencies must put considerable resources into first addressing their clients housing needs before they are able to progress on to providing assistance as it relates to their core work.

A number of providers identified that for clients who are vulnerable a central point of contact at MSD would be useful. Women fleeing family violence are particularly vulnerable and have difficulties navigating the processes required to access assistance. People with higher level mental health problems could also benefit from help seeking assistance.

Some agencies report that there is a lack of housing support for people i.e. support in temporary accommodation, and support to link people to other services. Additionally, some people require support to meet the requirements of government processes e.g. understanding the documents and evidence required for social housing applications.

6. CONCLUSION

The research found that homelessness in Lower Hutt and the pressure on service providers have increased in the period since 2016. Structural reasons including poverty and lack of housing supply, in conjunction with a number of individual level factors, mean that households are entering the system and also that it takes longer to find settled accommodation.

Most providers of temporary housing with MSD contracts were able to provide only limited data on their services. MSD provided data on the number of transitional housing placements in the city and on the number of Emergency Housing Special Needs Grants paid nationally, regionally, and in the city. The Ministry was unable to provide data on the profile of households, reason for presentation, or length of stay in the accommodation for transitional housing contract holders. The data available provides an indication of the needs, and of the resources available to address homelessness in the city. However, the data does not capture the full scale of needs.

Data for the region and the country shows that the number of grants for emergency housing decreased in late 2017 after increasing during the year. Part of the reason for this may be the additional resources provided to pay for more transitional housing placements while there may also be seasonal variations in the number of grants paid. In addition to those households in transitional accommodation, during the last three quarters of 2017 a considerable proportion of grants for emergency housing in the Wellington region were paid to households in Lower Hutt. All age groups are affected with the 18-24 age group particularly affected. In-line with other literature the data also shows that Māori are over-represented in terms of emergency accommodation grants.
In addition to the people in the system, aspects of homelessness often remain hidden. Young people moving from friend to friend, couch to couch; households living with whanau and, at the acute end of the spectrum, the people living in their cars, improvised shelters and under houses or buildings, as well as those who are street homeless, are part of the hidden problem. We were only able to discover a limited amount of information about the situations in which people live and this was through direct contact with individuals who are homeless or people who knew of locations where people sleep rough.

As well as identifying the increasing caseloads of organisations and pressure caused by homelessness, the study provides a brief insight into the impact on individuals and families in Lower Hutt. Beyond the numbers and reports are people’s descriptions of their lives and those of their children that capture both the practical toll that homelessness takes on health, education, financial resources and income, and also its emotional and psychological impact including on self-esteem, sense of worth, and personal identity.

There is a range of organisations working to support people who are homeless and in housing need in the city. Organisations have in many respects responded well to the pattern of increasing need and work well both individually and where possible collectively to support people who are homeless. Similarly to developments in other towns and cities some services have recently been established by community groups in response to the local situation over the last year to 18 months. While organisations are doing what they can there is a strong element of crisis management at both service provider and MSD level. Inevitably, limited capacity and the lack of accommodation and support affect the availability of services for households and means that people’s needs are not adequately addressed. There is reliance on non-housing services to be directly involved in addressing people’s housing problems and intervention mostly occurs when people are already homeless, with little emphasis on homelessness prevention.

Whilst there are clear processes for homelessness assessments there are questions regarding the capacity and suitability of the temporary accommodation used, the impact of out of area placements and the effect of these on the personal support structures. These situations are driven by the scarcity of suitable accommodation and means that MSD has little choice other than to place people where they can. In the short-term there should be more emphasis on working with and resourcing providers to develop additional suitable temporary accommodation, while exploring prevention interventions such as Housing First and support for people in tenancies would assist in reducing the need for temporary solutions.

7. ROLE OF COUNCIL

It is recognised that the work required to reduce and prevent homelessness is the responsibility of a range of organisations working together to improve access to housing and service delivery.
'It is not a council problem, government problem, or community problem – it is everyone’s problem.’
(Interview with First Community Trust)

This research specifically sought views on Council’s role in contributing to resolving homelessness in the city. Participants welcomed Council exploring the issues and the participative approach to conducting the research. Many of the organisations and individuals at both the interviews and the workshop felt strongly that Council should acknowledge the problems of homelessness and housing needs in the city and contribute significantly to the response required. Overall, participants expressed the view that, to help reduce poverty and inequality, improving the supply of affordable homes and reducing homelessness need to be a key part of Council’s long-term planning process.

Participants identified that Council should be involved both in directly responding to homelessness and in enabling others to respond more effectively. If Council decides that it should become involved in particular aspects of addressing homelessness, further work will be required on the options and costs of interventions. The ways Council could contribute have been categorised below.29 30

**Strategic working**

The levels of need in the area, gaps in services, and so forth mean that the city should have a strategic approach to addressing homelessness. As has happened in other areas of the country Council could work with local partners to develop a homelessness strategy and contribute to coordinating and resourcing the response. Key partners in this work would include Regional Public Health, MSD, and local organisations delivering accommodation and support services. Further work on this aspect would mean exploring the ways in which other councils are working e.g. Wellington City Council. The strategy would incorporate prevention, dealing effectively with homelessness when it happens, and preventing repeat homelessness.

**Homelessness prevention**

Shifting the emphasis to homelessness prevention would be part the strategic approach. This makes sense in terms of the impacts on people experiencing homelessness, and in order to reduce the costs to society more broadly.

In practice, Council could consider working with partners e.g. Housing New Zealand, Emerge Aotearoa, and others, and contributing resources to trialling or piloting support services to prevent homelessness occurring. In terms of prevention there may also be a role for Council to explore supporting Lower Hutt Women’s Refuge to engage with abusers. To deliver this service the refuge requires access to premises away from the refuge itself.

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**Homelessness intervention services**

Organisations referred to Council becoming involved in the delivery of homelessness accommodation and support services, either through directly delivering these services or by supporting agencies in the city to increase the service capacity available. The majority of participants believed that Council’s role lies in supporting agencies to better fulfil the needs.

Contributing to service provision could include resources for:

- additional temporary accommodation for people with higher level mental health problems
- additional suitable temporary accommodation for young people, people with low to moderate mental health needs, and single men.
- additional capacity to enable agencies to support people in temporary accommodation.

Similarly, organisations identified that Council could assist in extending services by providing access to buildings, or supporting with the costs of renting building space. An example of this would be services by Lower Hutt Women’s Refuge that aim to prevent family violence and homelessness. Working on this aspect effectively means securing access to a building that is away from the refuge and its accommodation for women and children.

**Supply**

Insufficient supply of suitable housing was the most significant issue identified by agencies. Agencies see a key role for Council in providing housing and enabling the provision of more housing in the city. The emphasis should be more on increasing the supply for households on low incomes who currently have difficulty accessing the private rented or social sectors, as well as providing affordable homes to purchase. This could be achieved in a combination of ways. Council could:

- build social housing – this could either be delivered through greater resourcing of UrbanPlus Limited (UPL) or through another model of housing delivery such as a community housing provider. Agencies were critical of Council’s performance in delivering housing through UPL and of UPL’s limited remit, and felt that there should be greater focus on increasing supply for a broad range of households.
- enable housing development itself e.g. on its own land, and provide land on long-term leases for other organisations to build housing. Land trust initiatives can assist in the development of affordable housing options for households that cannot compete in the open housing market. Similarly, several organisations referred to options such as Council providing the land on which to locate the modular dwellings built by the Wellington School of Construction, Unitec, and other providers.
- continue to pursue the work to develop a housing partnership with HNZ and government. The focus on partnerships could be extended to other organisations e.g. iwi. For example, Porirua City Council is discussing a partnership with iwi and government to develop housing in the city.

Additionally, the revision of Council’s District Plan could enable the development of more housing through intensification in areas of the city.
# APPENDIX 1

## HOMELESSNESS SURVEY

### Introduction

Hutt City Council is exploring homelessness and the provision of and need for emergency and transitional housing in the city. The work we are doing will help Council understand the issue in the city and see how Council can contribute to addressing homelessness and housing need.

As part of this work we want to hear from people who are experiencing or have experienced difficult housing situations and homelessness.

The survey should take around 3 to 5 minutes.

If you provide your telephone number or email address at the end of the survey you'll go into a draw for a $100 prezzie card.

### Your situation

1. Where will you sleep tonight?

<table>
<thead>
<tr>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don't know at the moment</td>
</tr>
<tr>
<td>On the street – rough sleeping</td>
</tr>
<tr>
<td>Car</td>
</tr>
<tr>
<td>Friend’s place</td>
</tr>
<tr>
<td>With whanau</td>
</tr>
<tr>
<td>Marae</td>
</tr>
<tr>
<td>Emergency accommodation e.g. motel, nightshelter</td>
</tr>
</tbody>
</table>

   Other (please specify):

2. Where do you think you will sleep for the next week?

<table>
<thead>
<tr>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don’t know at the moment</td>
</tr>
<tr>
<td>On the street – rough sleeping</td>
</tr>
<tr>
<td>Car</td>
</tr>
<tr>
<td>Friend’s place</td>
</tr>
<tr>
<td>With whanau</td>
</tr>
<tr>
<td>Marae</td>
</tr>
<tr>
<td>Emergency accommodation e.g. motel, nightshelter</td>
</tr>
</tbody>
</table>

   Other (please specify)

3. Where have you stayed during the last year? (Select all that apply)

<table>
<thead>
<tr>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>With whanau</td>
</tr>
</tbody>
</table>
### Homelessness in Lower Hutt

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>With friends</td>
<td></td>
</tr>
<tr>
<td>Slept rough</td>
<td></td>
</tr>
<tr>
<td>Slept in car/van</td>
<td></td>
</tr>
<tr>
<td>Lived with parents/caregiver</td>
<td></td>
</tr>
<tr>
<td>Rented a place</td>
<td></td>
</tr>
<tr>
<td>Lived in overcrowded house</td>
<td></td>
</tr>
<tr>
<td>Refuge</td>
<td></td>
</tr>
</tbody>
</table>

**Other (please specify)**

4. **What do you think are the issues behind your situation? (Select all that apply)**

<table>
<thead>
<tr>
<th>Affordability of housing e.g. I can’t afford rent</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No suitable housing – in terms of size, design, location, or social support</td>
<td></td>
</tr>
<tr>
<td>Landlord selling the house</td>
<td></td>
</tr>
<tr>
<td>Breakdown of relationship with parents/caregiver, whanau, partner</td>
<td></td>
</tr>
<tr>
<td>Family violence</td>
<td></td>
</tr>
<tr>
<td>Physical health</td>
<td></td>
</tr>
<tr>
<td>Mental health</td>
<td></td>
</tr>
<tr>
<td>Problems including, substance, alcohol, or drug use</td>
<td></td>
</tr>
<tr>
<td>I’m never selected by landlords</td>
<td></td>
</tr>
</tbody>
</table>

**Other (please specify):**

### About you

5. **Age group**

<table>
<thead>
<tr>
<th>Age Group</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18</td>
<td></td>
</tr>
<tr>
<td>18 – 24</td>
<td></td>
</tr>
<tr>
<td>25 – 34</td>
<td></td>
</tr>
<tr>
<td>35 – 44</td>
<td></td>
</tr>
<tr>
<td>45 – 54</td>
<td></td>
</tr>
<tr>
<td>55 – 64</td>
<td></td>
</tr>
<tr>
<td>65 – 74</td>
<td></td>
</tr>
<tr>
<td>75+</td>
<td></td>
</tr>
</tbody>
</table>

6. **Gender**

<table>
<thead>
<tr>
<th>Gender</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td></td>
</tr>
<tr>
<td>Gender diverse</td>
<td></td>
</tr>
<tr>
<td>Prefer not to say</td>
<td></td>
</tr>
</tbody>
</table>

7. **Household type**

<table>
<thead>
<tr>
<th>Household Type</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Single person</td>
<td></td>
</tr>
<tr>
<td>Couple</td>
<td></td>
</tr>
</tbody>
</table>
8. What ethnic group do you belong to? (Please select all that apply to you)

- New Zealand European
- Māori
- Samoan
- Cook Island Māori
- Tongan
- Niuean
- Chinese
- Indian

Other (please specify):

9. What is your employment status?

- Employed full-time
- Employed part-time
- Unemployed
- Education/training – part-time
- Education/training – full-time

10. Is there anything else you would like to tell us?

11. Please provide your telephone number or email address if you wish to enter the draw for the $100 prezzie card. Your details will be kept confidential and will only be used for this competition.
SURVEY RESULTS

The survey was conducted over a three week period during February and March 2018.

1. Where will you sleep tonight?

2. Where will you sleep during the next week?
3. Where have you stayed during the last year?

4. Reasons for homelessness
Demography

**Age group**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>6</td>
<td>16</td>
<td>8</td>
<td>8</td>
<td>4</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Gender diverse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Gender**

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female</th>
<th>Male</th>
<th>Gender diverse</th>
<th>Prefer not to say</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>20</td>
<td>25</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Homelessness in Lower Hutt
Homelessness in Lower Hutt

**Household type**

![Bar chart showing household type distribution](chart1)

**Ethnicity**

![Bar chart showing ethnicity distribution](chart2)
Homelessness in Lower Hutt

Employment status

- Employed full-time
- Employed part-time
- Unemployed
- Education/training - part-time
- Education/training - full-time
- Retired - pension

The chart shows the distribution of employment status among homeless individuals.
APPENDIX 2

Providers script outline and prompts

Introduction

A councillor workshop on 23 November 2017 discussed social and emergency housing and the approaches to these matters at a national, regional, and city level.

At the workshop it was resolved that officers would explore options for any council involvement in emergency housing provision and social housing in the city and report back to Council in 2018.

Homelessness and emergency housing

Below is an outline of aspects we cover in meetings with agencies. Some will be providers of housing and housing services and some will be non-housing organisations and more general providers who deal with housing/homelessness as part of their work.

- What services do you provide?
- Is the service targeted at particular people or is it open to everyone?
- Funding received for accommodation services / housing support etc.
- Use of facilities/services.
- Data on the use of accommodation over the last 12 months.
- Overall perceptions of need for the services – unmet need. Level of use of accommodation and also needs that can't be accommodated.

Advice etc. providers

- Does the service pick-up people that are homeless or have accommodation problems? (including sleeping rough, staying at friends, staying in a car, staying in a shelter, etc.)
- Do you have data on the number of people that have been homeless or that have had accommodation problems that your service has seen/assisted in the last 12 months?
- What are the particular issues encountered in relation to accommodation?
- What do you think Council’s role, if any, should be in relation to emergency accommodation provision in the city?
APPENDIX 3

People who are experiencing homelessness

As part of the work to investigate and understand homelessness in the city it’s important to speak to people experiencing housing hardship/homelessness about their situation and the effects on them. People can give as little or as much detail that they want to.

1. Can you tell me about your situation? Use this to begin the conversation and include prompts on:
   - Where were you living previously?
   - What happened? Factors that led to your housing hardship/homelessness. Picking up on structural/individual factors.
   - How long have you been in your current place/situation

2. Have you approached/used any other services?

3. Have you found any difficulties/barriers to getting help, support, etc.?

4. Can you tell us about the affect the situation is having on you? If relevant, what about your family or children? Prompt carefully here eg, this is about how you feel and any effect on health and well-being.? How your children feel and any impact on them.

5. Have you been in this position or a similar position to this before?
APPENDIX 4

The following are the organisations and individuals that participated in the research.

Organisations:

- Barnardos Lower Hutt
- Challenge 2000
- Citizens Advice Bureau – Lower Hutt
- Citizens Advice Bureau – Petone
- City Safety Manager, Hutt City Council
- Community Action on Youth and Drugs (CAYAD)
- Emerge Aotearoa
- First Community Trust
- Housing New Zealand
- Hutt Valley District Health Board
- Hutt City Youth Council
- Kokori Marae
- Koraunui Marae
- Libraries – Petone, Naenae, and War Memorial
- Lighthouse Family Home for Girls
- Lower Hutt Community Foodbank
- Ministry of Social Development
- New Zealand Police
- Oasis Network Incorporated
- Regional Public Health
- Salvation Army Lower Hutt
- Te Awakairangi Health
- Upper Hutt Housing Trust
- Vibe
- Women’s Refuge Lower Hutt
- YMCA
- Youth Inspire
Wellington Homeless Women's Trust
Wellington Night Shelter

Individuals who participated in the research:

Jimmy Samu
Keri-Anne Brown
Leah Clark
Sisi Tuala-Le'afa