

## Interview notes Karen - 9 December 2019

### Personal details

Karen

49 years

Income – Disability Support Pension plus rent assistance

### Current Housing

Karen lives in a 3 bedroom and 1 bathroom with extra toilet rear duplex in Innaloo. The house is managed by Uniting Care West and owned by the Department of Communities.

### Housing history

- Prior to 2001, Karen was housed under the Independent Living Program in a Wesley Mission property in Tuart Hill. Wesley Mission later merged with Uniting Care West.
- Karen suffered a spinal fracture in 2001, and later learned she has Multiple Sclerosis and a range of other medical conditions. At that point, wheelchair use was intermittent, but it got to the point where the unmodified house was not able to meet her requirements.
- Karen was transferred in about 2005 to a property on Wanneroo Road in Nollamara. This was an accessible unit in a triplex complex, the middle unit. While the unit itself largely met Karen's accessibility needs, there were ongoing issues with anti-social behaviour of neighbours, and a stalker. Karen felt like a prisoner inside the home, and unsafe outside it. As a result, Karen says all of her friends and some support workers stopped visiting her, and she became socially isolated.
- Karen sought to be transferred on many occasions but is not sure what precipitated the offer of an alternative property after six years.
- In 2011, Karen was transferred to her current property in Innaloo. While the property is not fully accessible, the location suits Karen well, and she intends to stay as long as she is able to. She is unwilling to risk being moved into an unsafe place to meet her accessibility needs. Some doorways are wide enough for her electric wheelchair, but some parts of the garden cannot be accessed by Karen. Karen has made some improvements to the garden of the property, as well as installing a patio at the rear. A ramp from the carport allows wheelchair access to the rear door, though Karen cannot enter via the front door. Lack of accessibility in the kitchen and bathroom affect Karen's independence.

### Services

Karen's services are currently provided by MSWA. She has an NDIS package. Karen uses this package for support coordination, personal care, therapy, social support, transport and meal preparation.

Karen's plan is partly self-managed but due to a lack of support coordinators she has elected to use MSWA for both services and support coordination. MSWA have recently provided a service agreement which makes

changes to the charges and terms of Karen's care. This concerns Karen, especially in the area of transport and she is currently seeking advice.

Her LAC from Mission Australia has been helpful in advising in this area and has also encouraged Karen to again enquire about home modifications.

## Requirements

- Wheelchair accessible home including bathroom and kitchen and outside spaces
- Safe and secure location
- Close to her mother who lives in a nursing home
- Close to services such as doctors and hospitals
- Hoist will possibly be required in the future

## Issues identified

- The bathroom and kitchen in her current home require modifications to make them more wheelchair accessible. Karen has approached Uniting Care West to fund these, but, as the house is owned by the Department of Communities, they are not prepared to fund capital works. Karen is unsure who might fund these (the Department of Communities?). It was noted that NDIS funding can be used for modifications if you own the home, but not in a rental.
- Although Karen wants to remain where she is, as her condition deteriorates she may have to consider another transfer. To date, her transfers have all been within Uniting Care West's portfolio, and she has previously been refused a transfer into the Department of Communities portfolio due to being 'adequately housed'.
- Karen will need an Occupational Therapist to assess her current and future circumstances in order to be able to apply for modifications or a transfer. Information on funding of modifications, and alternative housing options, are not obviously available.
- Public transport – Karen is more likely to use trains, as buses are difficult to access in an electric wheelchair. Karen has a train station relatively close to home, but her preparedness to use trains is weather dependent. She has temperature regulation issues which exacerbate her MS symptoms
- Karen funds some of her own therapy and has private health insurance to manage her varied health conditions. This means her finances are extremely stretched and nothing is left for contingencies.

## Interview notes Liz - 30 October 2019

### Personal details

Liz

Department of Communities - Housing (CDHP) in Daglish since 2016

Works at WA Individualised Services and volunteers with Women with Disability WA

Income – Disability Support Pension plus part time wage

### Current Housing

Liz lives in a three bedroom Department of Communities – Housing property in Daglish. Mostly she is very happy with this home, and considers it to be her ‘forever’ home. Liz has arranged for an electronic opening front door to be installed, as she cannot open doors herself from her wheelchair.

Liz would ideally like her home to be smart-wired, to enable lights and curtains to be opened and closed via applications or voice commands. Liz received alternative funding to have air conditioning installed at her past 2-3 properties as the Department of Communities would not fund this. Liz has also transformed her back yard from a ‘wasteland’ into a manageable space with raised garden beds and paving. Liz enjoys gardening and growing her own vegetables.

### Previous Housing

Liz had a stroke in 2006 which left her in hospital for 18 months. She rented privately for 2 years on release from hospital, until her savings ran out. She had some difficulties identifying an accessible home to rent and while she found something with wider doorways there were still steps at the entry.

While in hospital she was assisted to make a combined application for funding for support and housing. She was offered a two-bedroom house in Yokine in about 2009. This property was accessible and Liz had a door opener installed. She then applied for a transfer to a larger public housing property due to an increase in family size – she married and had a second daughter. She was offered a three-bedroom property in Nollamara and although she had safety concerns she accepted the home as she thought she may not be offered anything else.

Liz describes the next 4 years in this home as “hell”. The street she and her family lived on had 14 public housing properties and there were constant issues with violence, drug and alcohol abuse, drug dealing and anti-social behaviour. Liz complained to the Department and raised issues about placing vulnerable people, such as herself, close to these properties but felt that the Department did not care. She applied for a transfer within 8 weeks of moving in but did not move for four years

Liz believes she was offered her current house because she knows the occupational therapist from the Department of Housing.

## Services

Liz has perpetual funding from the Department of Communities, Disability Services. She uses this funding for support workers and equipment. She does not use the funding for therapy. Her suburb has been transferred to the NDIS but she is not in a rush to sign up as she is aware of the goal orientated process involved in NDIS and feels it does not suit her situation.

## Requirements

- Wheelchair accessible home with wide doorways, accessible bathroom, no stairs
- Automatic opening front door
- Smart wired
- Safe area
- Close to train or bus

## Issues identified:

- Very limited availability of accessible homes in the private rental market
- Limited stock of accessible homes in the social housing system
- Placing vulnerable people in higher crime areas
- Liz has a boarder living in her home rent free in exchange for informal support. The Department of Communities has increased her rent according to her lodger's income, which means that Liz now has to charge rent. She charges \$100 but this does not cover the increased rent.
- Liz has been told by the Department that she is not eligible to purchase her property. She would like to explore this option but because the stock of accessible homes is limited she feels the Department want to maintain ownership.

## Interview notes Tim - 5<sup>th</sup> February 2020

### Personal details

Tim and his wife have a son, Levi who is almost five years old (born April 2015). Levi was four weeks premature and had breathing difficulties at birth. He has a seizure at five days of age. As a result of these difficulties around his birth, Levi was diagnosed with Cerebral Palsy.

Tim and his family live in Albany. In addition to Levi, Tim has a three and half year old daughter and a 1 and half year old son.

Levi often gets sick and has been hospitalised regularly in both Albany and Perth. He has been PEG fed since he was two years old and cannot sit or walk. He has uncontrolled movements which make it difficult to hold him.

### Previous Housing history

Tim was born in Albany and was living with his wife in a private rental in Armadale when Levi was born. In 2016 the family relocated back to Albany and took up a private rental there. Tim became a full time carer for his son. Tim receives the Carers Payment and his wife accesses parenting payments.

The rental home leaked through the bathroom walls and mould was a problem. This impacted on Levi's health. The family was placed on the Department of Communities - Housing waitlist in 2017. At one stage they were offered a 3 bedroom disability home. It was not big enough to accommodate 3 children and was designed for an adult with disability so the family declined. The mould issue continued and the Local Area Coordinator (LAC) from the Department of Communities wrote a letter on behalf of the family stating that the need for a home was urgent. Advance Housing, a community housing provider in the Great Southern, was able to provide Tim's current home within a few months.

### Current housing

Tim and his family currently live in an Advance Housing property owned by the Department of Communities. They have been living there since January 2019. The home has four bedrooms and one bathroom and features a graded entry and handrails in the bathroom. However the front doorway is too narrow for a wheelchair to enter and Tim has built a temporary ramp to the back door for Levi to access the house. The internal doorways and hallways are too narrow and the bathroom cannot accommodate hoist. The bedroom are very small and it is difficult to move Levi around in his bedroom. Currently bathing Levi involves both parents as Tim needs to get in the bath with Levi and his wife needs to assist with lifting Levi in and out of the bath. This is becoming increasingly difficult as Levi gets bigger as well as unsafe leaving the other two young children unattended.

Advance Housing are aware of these issues and have assisted Tim to apply for a transfer to a five bedroom house. The family have installed air conditioners at their own expense as Levi cannot control his own body temperature and fluctuations in temperature can cause sickness. Tim reports that the process for permission to make minor modifications has been relatively simple.

## Housing preferences

Tim indicated that an ideal home would feature:

- Five bedrooms, with a spare room being used to store equipment
- An accessible bathroom which can accommodate a wheelchair ideally as an ensuite to Levi's bedroom
- Wheelchair access at the front and back
- Ceiling hoists
- Large living area to allow a wheelchair to move around
- Covered access to a vehicle
- Wide doorways and hallways
- Temperature controls

## Options considered

Through assistance from an advocate at the Albany Community Legal Centre (ACLC), Tim has also applied for the Community Disability Housing Program (CDHP) waitlist. Advance Housing understood that this program was only available to adults with disability, however, they have applied anyway and are waiting for a response. Should they be successful it is not clear whether a suitable CDHP home will be available in Albany.

The advocate has investigated the possibility of accessing Specialist Disability Accommodation (SDA). However, SDA is only available to participants who live independently from parents.

Ideally the family would like to own their own home and Tim has investigated a Keystart loan but on the current family incomes would not be eligible for an amount which could fund the purchase of a home.

Tim has also investigated what would be done to the current property to modify it to meet Levi's needs. Tim feels that it would not be worthwhile as the extent of modifications would be extensive and would cost in excess of \$100,000.

## Issues raised

- No one takes responsibility for modifications to a DoC house
- Lack of options for funding when a child young and is living at home
- Lack of NDIS support
- Lack of availability of CDHP properties in regional areas

## Support

The family does not have much informal support apart from Tim's elderly father who experiences his own health problems.

## Services

Levi has been an NDIS participant since October 2019. The family are in the process of appealing their plan as they received much more support prior to transitioning to the NDIS. Levi receives 104 hours of therapy for the year and \$600 of consumables. The plan has no core support and no support for home modifications. It seems

# Interview Log

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that most assistive technology cannot be funded as the home is not big enough to accommodate hoists or a shower trolley.

The Department of Communities LAC has been helpful but has not been involved since transferring to the NDIS. Tim noted that the process to get permission to make The social worker at the Department of Communities – Housing has also provided assistance but has not been able to find a solution. The advocate at the ACLC is also providing extensive support.

## Interview notes Tom and Lynn - 29 October 2019

### Personal details

Tom and Lynn

Tom is 57 years old

Paraplegic and blind following motorcycle accident at 15 years

Working on casual contract at a disability agency and formerly worked at the Ministerial Advisory Council for Disability

NDIS and self-funded with assistance from an insurance payout

### Previous Housing history

Tom was born in the USA and moved to Australia to be with Lynn. He moved in 1999 and Lynn and Tom were married in 2000. They lived in Stoneville for 14 years in a 1970's home which has a number of accessibility issues. Some modifications to the bathroom and toilet were made with funding from the state government (possibly HACC). Doors were removed from the bathroom and toilet to allow for wheelchair access.

In January 2014, the house was destroyed in the Parkerville fires. Tom and Lynn were lucky to escape. It was difficult to locate accessible emergency and then temporary accommodation. The emergency accommodation was advertised as accessible and cost \$10,000 per month. This serviced apartment type accommodation near the Perth airport was not accessible. Attempts to find temporary rental accommodation were also difficult. Real estate agents did not understand what accessibility meant and showed Lynn and Tom many properties which were not accessible. It seemed that rental properties with accessible features were in extremely short supply. As time went on they got desperate and accepted an offer from a friend to rent a property in Mundaring. The unit was very small and extremely inconvenient for Tom's mobility and showering. The only option for modifications was to take doors off to improve accessibility. Tom needed to use a different wheelchair with no self-propulsion handles while in the unit.

During this period, Lynn and Tom were battling with the insurance company to reach a fair payout. Initially Lynn and Tom considered building on their Stoneville block but given that it was assigned a high fire rating (Bushfire Attack Level – FZ), a new house would need fire resistant features which would add significantly to the cost. Also, given Tom's mobility issues, Lynn and Tom were concerned that in the event of another fire Tom would not be able to escape. So the block was sold and Lynn and Tom began to look for an established accessible house to purchase. Again established houses with accessible features were in short supply and real estate agents had no understanding of accessibility. For example, they were shown properties with accessible bathroom features but with stairs at all entry points. Lynn and Tom planned to rent for 6 months before buying their own home but ended up in inadequate rental accommodation for 3 years.

## Planning for an accessible build

Having finally reached a settlement with the insurance company, Lynn and Tom began to plan for building their own accessible home. Firstly Lynn sought a suitable block. The main priority for the block was to be flat to allow for easy wheelchair access (although still needed to spend \$50,000 on levelling), to be in the Perth Hills area but have a lower Bushfire Attack Level than the previous location. After six months Lynn located a block in Mount Helena. She engaged Griff Morris from Solar Dwellings to design the home. As well as accessibility features, Lynn and Tom were keen to include fire proofing features and a solar passive design.

The home features:

- 3 bedrooms
- 3 bathrooms
- Doors of 900-1000ml width
- Wide hallways and wide entryway
- Bathrooms feature basins which have room for a wheelchair underneath, low cupboards, a shower shelf (for sitting while showering), rails, no hobs, cavity doors
- The ensuite bathroom has two doors (one to the walk in robe) to allow Tom to move through without having to turn his wheelchair
- Remote control retractable fanlights
- Low door handles and light switches
- Kitchen features, conduction cooktop (for safety), low oven, low roll top cupboards, higher kickboard and an increased benchtop over cupboard below, walk in pantry, wide distances between benchtops and island bench and a low “breakfast bar” table with space underneath to allow for wheelchair attached to island bench
- Level thresholds
- Access via garage
- Level paving around perimeter (not yet completed)

## Appliances

- Kettles which dispenses hot water rather than needing to pour
- Conductive cook top
- Ducted vacuum
- Top loader washing machine
- Low dryer
- Lazy susan style storage in corner cupboards

The home is designed for easy access but also to minimise the damage caused by wheelchairs.

Lynn and Tom eventually moved into their home in 2016. Outside paving and landscaping are not yet complete due to lack of funds.

## Issues raised

- No search function in real estate websites
- Lack of definition around the term accessible
- Lack of real estate industry knowledge of accessibility
- Lack of assistance from disability support agencies
- Lack of funding for accessibility features in new builds

## Support

Tom has informal support from Lynn.

## Services

Tom has NDIS funding with the majority used for assistive technology. My Supports manages his plan.

## Interview notes Amy – 10 December 2019

### Personal details

Amy

30 years old

Cares for her partner

Has lived in a family owned property in Padbury for 4-5 years

Works for Uniting Care West

### Current housing

Amy cares for her partner, who has been in a wheelchair for about the last 6 months, following a workplace injury earlier in the year. She has no movement from the waist down.

They currently reside in a home owned by Amy, her mother and her sister. The home is a 1970's 3x1 in Padbury. The property has a steep driveway, so is not practical. It cannot be sufficiently modified, and Amy's partner cannot access 2 of the 3 bedrooms. Currently Amy's partner cannot leave the property independently and can only access the bathroom as the door has been removed and replaced with a makeshift modesty curtain.

Amy works full time, and her partner is making a workers compensation claim. They searched for suitable rental accommodation in Padbury and surrounding areas (to be close to family support), but have been unsuccessful due to the shortage of suitably accessible properties.

### Future housing

They have recently purchased a 1990s house in Marangaroo, which is on a flat block and has tiled floors and wider than usual doors. The property will need bathroom modifications, sliding doors and small ramps fitted. The search for an accessible home was difficult, as real estate websites do not provide sufficient information. They 'got lucky' through the kind assistance of a real estate agent, who vetted appropriate properties on their behalf.

In time, and in the event of a sufficiently large workers compensation payout, they will consider purpose building a home, to get all of the features they require and allow for potential degeneration in Amy's partner's condition. One issue here is that NDIS seems to fund modifications to existing homes, but will not fund similar features in new builds.

Amy's partner is not currently eligible for NDIS due to the pending workers compensation claim, which is intended to cover salary, the cost of a wheelchair and some medical/therapy expenses.

There was also an issue with accessing information on what they were eligible for, from different agencies, in terms of funding and modifications. They were fortunate to have a family friend who assisted them with some accessibility modification information.

## Services

Amy's partner cannot currently drive and uses informal assistance to leave the house. She requires occupational therapy, physiotherapy, psychology and scrambler therapy which is currently self-funded or funded by workers compensation. Amy reports she has received no assistance or advice from any agencies. She contacted the Department of Communities, Disability Services but due to the compensation claim they were unable to help. Assistance with home modifications has come from friends who are knowledgeable in the area of accessibility modifications.

It is possible that Amy's partner's condition will deteriorate and further services will be required. At present medical and therapy services are a priority.

## Requirements

- Close to informal support
- Flat block
- Wide doorways
- No hobs, roll in shower
- Access to all bedrooms
- Close to shops and café
- Close to basketball court
- Able to accommodate two dogs

## Issues identified:

- Very limited availability of accessible homes in the private rental market
- Very limited availability of accessible homes in private sale market
- No functionality in real estate sites to search for accessibility
- Need to remain close to informal care provided by family who live in Padbury
- One of the major issues that arose from this discussion was the overlap between workers compensation and NDIS. It seems that eligibility for NDIS is affected by a pending workers compensation case, resulting in a situation where the claimant receive neither NDIS or WC money until the WC claim is settled. This can take some years.

## Interview notes Christopher and Sue - 10 July 2019

### Personal details

Christopher

28 years old

Studying at Joondalup TAFE two days a week

Working at Kmart three days a week

Income – Disability Support Pension and casual wage from Kmart

Christopher attended with his mother Sue

### Current Housing

Christopher currently lives at home with his parents in Perth's northern suburbs. Christopher is keen to move out of home with a flatmate, his friend Simon.

In the past Christopher and Simon did move out together for a trial period. They rented a two bedroom, one bathroom apartment in a complex of about 20, paying \$120 per week each. The apartment had a small enclosed courtyard and garden area and one entrance through the front door. Through this trial Christopher and his parents learnt a few lessons:

- Christopher needs to be within walking distance of the train station. In the rental trial, Christopher had to catch a bus to get to the train.
- Christopher and Simon need two toilets or preferably two bathrooms.
- For safety and emergency planning, Christopher needs at least two exits from his home.

There were many benefits to moving out. Christopher shared support hours with Simon so they could get a little extra help at home. Christopher developed some independence and had companionship with people his own age. The independence allowed Christopher to develop responsibility and his confidence grew. He and Simon did get to know their neighbours but were not living at the house long enough to seek assistance and feel part of the community.

### Aspirations

After the trial Christopher moved back home but he is keen to move out more permanently. His sister lives in an apartment in Innaloo and he has been practicing his independent living skills there for some months.

Christopher and his family are exploring options and an ideal home would have the following features:

- Two bedrooms – to allow for Simon and also for a support worker to stay overnight
- Two bathrooms
- Good ventilations for safety reasons and preferably no gas appliances or cooking

- Be located in the Northern suburbs within walking distance of the train station and relatively close to his sister and parents
- Enough support worker funding to allow for assistance to travel to activities and to prepare evening meals. An overnight support worker for the first month or so would allay the concerns of Christopher's parents in the transition period to independent living.

## Support

Christopher has informal support from family and friends, chiefly his parents and sister. Christopher's parents have chosen work which allows them to assist Christopher during the day with transport, medical appointments and management of daily life. Christopher's mother works night shift as a nurse and his father has his own business and works from home.

## Services

Christopher is funded for 10 hours of support to assist him with daily living through Department of Communities, as he is yet to transition to the NDIS. Christopher has a support worker who assists with travel, some evening meals and independence training. Christopher also participates in a number of community-based activities

## Christopher's work, lifestyle and commitments

Planning for a suitable home needs to take into account Christopher's commitments, activities, friendships and lifestyle. Christopher is able to get ready and have breakfast in the morning fairly independently but needs help with preparation of evening meals and transport assistance to and from activities.

Activities include attending a Day Centre at the City of Stirling, studying at TAFE in Joondalup, going to the gym, working twice a week at Kmart, attending the RISE network and a series of other activities like bowling, swimming, playing golf, meeting with friends and attending church.

## Future plans

Christopher would like to gain work as a handyman and do woodwork. His parents would like for him to have security of tenure and to plan for the management of his support when they are not around.

## Interview notes Lesley - 2 September 2019

### Personal details

Lesley

Carer for her husband, Charles, who is 76 and has tetraplegia. Charles experienced spinal cord damage in 1994 which left him with a permanent disability.

Lesley retired 15 years ago from the public service (aged 55 so as to access superannuation), and to be full time carer for Charles.

### Housing history

Lesley and Charles at one stage owned their own home and then lived in a private rental in Port Kennedy and later in Mandurah. At a later point Charles' mobility started to decline and he required a wheelchair accessible home. The Kaisers were on a waiting list for two years. They were shown a number of properties and although they were listed as accessible there were issues with them (no wheelchair access to some doors, no double carport to allow egress from a vehicle without getting wet). Lesley wrote to the Minister and the Kaisers were soon after offered their current home in Waikiki.

### Current housing

The current house on is a Community Disability Housing Program (CDHP) home. It has three bedrooms and largely meets Charles' accessibility needs. Lesley states that they moved into the home immediately which did not allow time for refurbishment and that the resulting need for maintenance is difficult to arrange. The Kaisers have had a transfer application in with the Department of Communities for about 12 months, to move closer to family support. They have been offered one property which was not suitable, and their grounds for declining the property were accepted by the Department. Lesley is also looking into aged care properties but feels that people are allocated this housing based on who they know rather than needs.

### Support

Lesley provides informal support to Charles. They are also supported by children.

### Services

Charles has a level four aged care package which took two years to come through.

### Requirements

- No steps, no hobs
- Wheelchair accessible bathroom
- Handheld shower
- Wide doorways

- Lower light switches
- Pull-out bench
- Kickboard attached
- Ramps to doors
- 3 bedrooms

## Issues raised

- It is very difficult to arrange maintenance and modifications to the house. The third party contractors who manage maintenance do not have enough skills or understanding.
- Some “accessible” Department of Housing home are not actually accessible.
- The Kwinana and Fremantle Department of Communities (Housing) offices do not speak to each other.
- Complex application process and lots of forms, both for housing and to apply for Disability Support Pension.
- Every case is different, and the assessment process needs to be more flexible and less compartmentalised. Government departments need to listen more to people, and not just try to fit them into categories.
- Access to information about available housing and support services could be improved.
- Paperwork and evidence required could be simplified, or at least better explained.
- Department of Communities “occupancy standards” (number of bedrooms) do not allow generally for extra rooms for family to stay.

## Update

Lesley and Charles have withdrawn their request to transfer to a property in Fremantle as the homes tend to be older and in need of repair. They are still experiencing issues with the proper maintenance of their current property.

## Interview notes Rob - 14 June 2019

### Personal details

Rob

37 years old

Studying nursing at Curtin University

Income – Disability Support Pension plus Education Supplement

### Current Housing

Rob currently lives in a Foundation Housing managed 2 bedroom, 1 bathroom apartment in Wellington Street in Perth City accessed under the Independent Living Program (ILP). He has been in this accommodation for nearly 5 years.

Rob lived in government homes and foster care as a teenager. He indicated that his name had been on the Department of Housing waitlist since he was sixteen but given various changes of addresses his details were not kept up to date and he never received an offer of a home.

When he became very unwell he spent about two years living on the streets. He was not in contact with his family at this time. At one point during this time he was admitted to Graylands hospital for 30 days and received a diagnosis of paranoid schizophrenia. While on the street he was offered a position at the Foundation Housing hostel in Willian Street, Perth and also spent some time in another Foundation Housing lodging house in Mount Lawley. While the hostel got him off the street it was not a suitable environment. Rob was not happy with sharing with other people, as there were often people knocking on the door and sharing their problems.

Rob is very happy with his current home and credits stable housing to turning his life around. He would not have returned to education and enrolled at university without a stable home.

The positives about his current home include access to public transport. He lives just opposite the bus and train station. He also has a spare room to store extra belongings.

He does report some issues with his home. These include:

- No parking on site which means that friends and family don't visit him
- Construction taking place next door which causes noise early in the morning and during the night.
- The whole building has cockroaches and he cannot get rid of them. He believes cockroaches caused a malfunction in his microwave. He suggested that the owners need to do a full pest treatment to the building. This has been reported to the owners (Department of Communities) by the interviewers.
- He does not mingle with other residents. They tend to have their own problems and want to share them. For example, his next door neighbour sometime punches the walls. Other residents put signs on their doors saying don't knock as I have no money because some residents knock on doors seeking money.

- There is no supermarket nearby. Rob does his shopping at Innaloo and brings it home on the bus which is inconvenient.

The process to gain housing was long but he credits a case worker from Royal Perth Hospital outpatients with assisting him. The Case Worker wrote the application for ILP and listed Rob as priority and followed through and once that was done, he was offered his current home in a few months. He said that staff at the hostels had led him to believe he has been added to a priority waitlist while he was staying there but it always turned out that he was not actually on the list. He characterised this as “teasing” and said it happened to a number of his friends from the hostel. People believe they have been added to a list when in fact they have not. He said the case worker from Royal Perth Hospital had followed through and this was what he needed.

His current tenancy agreement is a periodic agreement (i.e. does not have an end date) so Rob has secure tenancy for as long as he maintains his tenancy obligations.

## Aspirations

Rob is happy to stay in his current home for now. When asked about his ideal home he mentioned he would like a place with a backyard and larger more spacious rooms (his apartment is quite small).

## Support

Rob is now back in contact with his mother and stays with her every weekend. She has provided financial support to purchase furniture.

## Services

Rob has had support from Partners in Recovery (PIR) and a Foundation Housing Tenancy Support worker. His PIR support worker recently suggested he needs to transfer to the NDIS. Rob does not want to change and he sees the NDIS as support for people with physical disabilities. He said the Foundation Housing worker may no longer be available to him. Rob's chief needs are around financial help to purchase essentials for his home and study (i.e.: computer, desk, and microwave).

## Future plans

Rob is planning for the future and would like to make sure there is room for an extra person if he enters a relationship. Once he finishes his degree and starts working he may apply to transfer to a larger home.

## Interview notes Sally 11 September 2019

### Personal details

Sally

51 years old

Son Caleb is 28 and has cerebral palsy (spastic quadriplegia). Caleb has an intellectual disability is PEG fed and is non-verbal.

Sally currently lives in rental accommodation in Bassendean. Caleb lives in supported accommodation in Swanview.

### Current Housing

Caleb lives in six bedroom, two bathroom home in Swanview run by Rise Network. He shares the home with three-four other residents who all have high support needs. Sally believes the home was built for Rocky Bay. It is fully accessible with large bathrooms, lowered benches, wide doors and hallways and mobile hoists. The home also has a fire hydrant and sprinklers for fires which is an especially important safety modification for people who cannot escape a fire. One bedroom is used as an office for workers. Caleb has lived in Rise network accommodation for approximately nine years and in his current home for five years.

Caleb lived at home with his mother and two brothers in various rental homes until he turned 19. In these later teenage years Caleb became too heavy for Sally to lift (she sustained some permanent injuries) and she began to look for accommodation for Caleb. Her Local Area Coordinator at the time provided assistance in applying for a home (possibly through CAEP funding).

The home does not have ceiling hoists and staff utilise mobile hoists. Due to rules around restraint deadlocks cannot be used which Sally feels are needed for the safety of residents.

### Support

Sally visits Caleb at least three times a week and on Saturdays she and his brothers take Caleb out.

### Services

Caleb has had long term funding for support. Initially he received block funding through Disability Services Commission and now he has an NDIS plan of for 24/7 care as well as community access, equipment and therapy. All personal care needs are managed by the RISE network. The Ability Centre provide support workers to access outings to see music, theatre, animals, and sensory experiences. Sally has recently changed therapy provider from the Ability Centre to Therapy Focus and Caleb has physio, hydrotherapy and is trialling a new communication device.

## Aspirations

While Sally is broadly happy with the current accommodation, in the longer term she believes there might be a better option for Caleb. She is interested in the idea of a supportive community where Caleb could possibly live in a unit with support. She is investigating the “hub style” of living as modelled by Freedom Housing.

## Issues raised

- Sally expressed some concerns about the care being provided for Caleb in his home. Untrained agency staff have been used and they appear to have no understanding of alternative communication methods for people who are non-verbal.
- At times the straps on Caleb’s chair have been left undone and he has been slipping out of the chair when Sally arrives.
- The night shift is a sleep shift (this has recently changed as Sally and other carers suggested workers need to be awake overnight)
- Suitable housemates can be hard to find. Caleb has no choice about who enters the house. Some residents are higher functioning and perhaps not suited to the environment, others can be loud or display anti-social behaviour.
- The carer needs to be very involved to ensure care is provided. Sally felt she needed to visit at least once a day if not more and often had to make complaints
- The house lacks the feeling of being a home.
- Since a change in the structure of RISE some of these issues have been addressed and Sally does not have to visit as much.
- From a carer’s point of view it is good to have a person with disability living independently of the carer, this allows Sally to spend time doing planning, arranging appointments and recreation.
- Adequate funds to support her family have been an ongoing issue for Sally. She was unable to work when Caleb lived with her as his care was a full time job. Supporting Caleb has been costly (ie: wheelchair vans etc) and she has no super

## Other

Sally is currently providing a host family service to a 37 year old who lives in a caravan in her back yard through Family Support WA. The man has experienced trauma and sexual abuse and has some associated mental health issues. He is not able to maintain a private rental and does not really want to live in a house. Sally has been investigating options for him and thinks he would be happy in a liveable shed so he is able to have some privacy and work on woodwork projects. There are limited options for him but perhaps with a payout from the National Redress scheme and possibly access to NDIS he may be able to afford something small.

## Interview notes Wayne 28 August 2019

### Personal details

Wayne

Wayne has Multiple Sclerosis which affects his vision (optic neuritis)

### Housing history

Wayne lived on a large property in the Shire of Mundaring but sold the property as a result of his diagnosis. He is having difficulty finding an accessible home to purchase which has a suitable location (close to train station, near traffic lights for safe crossing). He has been searching for a home for 18 months and no home which meets needs. He is currently renting a two-bedroom unit in Woodbridge which is close to the train station accessible to shops. The complex has a ramp and lift but no accessible features within the unit.

### Support

Wayne has an NDIS package of support. He has been allocated 10 hours in his current plan for an Occupational Therapist to assist in purchasing a home which meets current and future needs.

### Requirements

- Walking distance to train station
- Audio road crossings to train station
- Close to medical and shopping facilities
- Non reflective surfaces
- Backyard
- Wide hallways and doorways
- Possible planning for future wheelchair use

### Issues raised

- Location is extremely important when people cannot drive. A home needs to be within walking distance of facilities and transport. Roads with moderate traffic flows need pedestrian crossings and bus routes are not always accessible if they are on the wrong side of the road and there is no safe crossing to access them.
- Lack of availability of accessible homes in locations close to train stations.
- Issues with NDIS home modification rules. NDIS will not fund more than one major modification but it is difficult to plan for all modifications which will be needed with a degenerative and unpredictable disease.
- In general Wayne has found that Local Governments are unresponsive in making local community facilities safe and accessible for people with disability and this has an impact on the available of good locations to purchase in.
- He has looked into building a home but the location of estates with reasonably priced blocks are not in locations which suit people with vision impairments.

# Interview Log

## Update

Wayne has recently had to move from his rental. His landlord wanted to move back in and gave Wayne 60 days to find another suitable rental. Wayne was able to find another unit in the same complex. It has a more challenging layout than his previous rental but moving within the same complex was simpler than looking for another place further afield.

## Interview notes Michelle - November 2019

### Personal details

Michelle was a successful business women based in Indonesia and worked across the main financial hubs of South East Asia. In 2002 Tanya was a victim of the Bali bombing. Following this experience Michelle's physical and psychological health started to deteriorate. By 2015 she was so unwell that she returned to Australia to access the public health system. On her return she asked Centrelink for help.

Michelle is 60 years old, and has been receives Newstart

### Housing History

Michelle has lived in a hostel in Fremantle, managed by Foundation Housing, since 2016.

### Issues raised

#### 1. What they have experienced (good and bad) in the past?

Wasn't aware of social housing options. Saw Street to Home signs at Centrelink but didn't think she was entitled to it because she wasn't literally on the streets. She thought Homeswest had a long wait list and it wasn't worth it. "After returning to Australia from Indonesia, I was staying in an 8 person dorm at the YHA.", "I had to keep moving beds because, you were only allowed to stay for 2 weeks". "Then I moved to Sundancers backpackers in Fremantle". "I had a bottom bed of a bunk". "I was experiencing chronic pain and spent a lot of time in bed with a sarong hung down from the base of the top bunk I just had that little cubical".

"Street to Home helped me get into the hostel, I thought I'd only be here for 6 months". "I was on the second floor (before the Women's only floor was established), I had been without a room for a while so I was really happy to be able to shut the door and have the space". "At night the Lodge became quite scary". "I've never lived like that before".

"Information wasn't readily available about programs like Oz Harvest and Foodbank, homeless Healthcare". "Initially it was very intimidating, there were gangs on men who would roam the corridors". "Booting doors in was a common occurrence". "It became really unsafe, especially for women". "So a women's floor was established". "We've all got rolling pins and baseball bats at our door". "I've grown up with Family Violence, I've got a methodology of defending myself, my bag, keys, and I've got a lighter and a can of spray that I can turn into a flame thrower". "I do what I have to, to feel safe".

#### 2. What they might aspire to for the future (if anything – some people are satisfied with where they have landed),

"I'd like to move from the hostel but it's convenient here, I'm close to my doctor and the hospital and I feel safe". "I've had a few home invasions in private rentals from my abusive ex-partner in the past so it's important that I feel safe". I've got application with Dept of Housing in. On one hand having a ground floor apartment would suit my disability however, I also feel vulnerable on the ground floor. If I am to move on it would depend on my health and if it will get worse and needing somewhere that would need to be safe and accessible.

### 3. What they see as barriers for people with disabilities to accessing appropriate housing.

"Firstly there is stress and anxiety about applying for the DSP in the first place. I understand that you need checks and balances to stop people who don't need the DSP from accessing it but I felt like they were doing all they could to stop me from accessing it, rather than supporting me through the process, which took 3.5 years". The lack of access and options is huge for people with disabilities. Other barriers were the fall out and stress after leaving a violent relationship. I received bullying from Centrelink staff. I had to attend an AAT hearing, which I had no idea how to navigate or what to say. There was constant scrutiny of medical history, my life in Indonesia where I lived independently, but had people were looking after me. Applied for DSP but they just pulled it apart and was rejected. Process is extremely difficult. Navigating processes while dealing with past trauma was exhausting and exacerbated my condition. Very difficult to access to housing being a single woman with no children. I wasn't in crisis and found there were very few options. Stayed in back packers, around Fremantle due to the need to access Medical support around Fremantle. Should have gone to Singapore.

### 4. Possible solutions / things the government might do to alleviate or remove these barriers.

"It needs to be more housing accessible to those who genuinely have a disability". "A blanket approach to everybody doesn't work." "You're treated the same as someone with a sore back." "In the end I did get DSP, everyone understood through the AAT and Centrelink was on board, but it took a lot to get to that point". "I can't believe I'm on DSP, I'm still basically traumatized from it still". "As someone that wasn't born with a disability but acquired one in as an adult, you really see how more support needs to happen to help people into and transitioning through housing".