



The deaths of people living on the street and in the parklands aren't counted - Peter Sandeman

WHEN Anglicare-SA's head of homelessness services Olive Bennell and I started working to end homelessness in the Adelaide parklands five years ago, we focused on 16 long-term homeless Aboriginal people and their friends.

We wanted to help them access safe accommodation and health care to treat their chronic health conditions.

We failed.

We couldn't change the system.

Fifteen of those homeless people died and the fate of the remaining person is unknown.

Very little is known about the deaths of homeless people. The deaths of people living on the street and in the parklands aren't counted.

Unvalued and forgotten, except by other street people and their workers, the deaths of homeless people are a hidden tragedy.

The cold weather reminds us just how tough living on the street can be.

The University of Western Australia, with the Australian Alliance to End Homelessness, identified 56 street homeless people who died last year in inner-city Perth.

Street people die young. Their average age of death was 47 years compared to average life expectancy of 83 years.

If the Perth CBD experience is extrapolated nationally then about 424 street homeless people die in Australia each year. Including about 20 street homeless people in South Aus-

tralia. In the US these deaths are termed "deaths of despair" due to drug overdoses, suicide, mental health, and alcohol-related diseases among people who experience compound social and economic disadvantage. In short, poverty.

We all know that JobSeeker is far too low.

And a chaotic life on the street means you can't search for the jobs that just aren't there for many other people.

Part of the problem is that navigating the silos between different parts of the homeless, health and human-services systems is just too hard.

It's hard to detox from alcohol or drugs if the sobering up and rehabilitation services leave gaps putting you back on the street.

It's hard to access medical care if health services can't find you because you don't have stable accommodation.

The new state government Homeless Alliance model offers a better opportunity to meet the challenges of people living on the street, as well as the wider homeless populations. Jointly funded homeless services are the first step towards well co-ordinated access to housing and care for homeless people.

Hutt Street's Aspire program demonstrates that long-term tenancy support enables street homeless people to escape homelessness.

Housing First means the use of scarce hospital resources and emergency housing and recidivism are all reduced, gen-

erating ongoing savings.

We need to really value the lives of street homeless people.

Better co-ordination of housing and care will save and change the lives of homeless people. This is the yet-to-be-fulfilled potential of the new Homelessness Alliances.

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