DHS Homelessness Systems Review 2025

A submission from the Toward Home Alliance

November 2025

Executive Summary

This document represents the perspectives and experiences of the eight NGOs who are part of the Toward Home Alliance (THA).

THA's Alliance Management Team (AMT) and Alliance Leadership Team (ALT) came together to reflect on THA's journey, successes and learnings to-date. This document has been developed in consultation with and endorsed by the executives of each partner organisation.

About Us: Toward Home Alliance

The Toward Home Alliance (THA) consists of eight NGOs and the state government as an equal partner:

- Aboriginal Family Support Services
- Baptist Care SA
- Hutt St Centre
- Lutheran Care
- Mission Australia
- Sonder
- The Salvation Army
- St Vincent de Paul Society SA
- Department of Human Services (DHS) ***n.b. This document was developed without input from DHS, and is not intended to represent their views or opinions.*

Approximately 120 THA staff[1] work across 17 sites throughout the Adelaide CBD, inner and outer south and Adelaide Hills region.

Mission Statement

Working together, to prevent and end homelessness.

Values Statement

Integrity, Respect, Trust, Collaborative, Courageous, Creative

[1] employed across the eight organisations

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THA's view on Alliancing

The Toward Home Alliance (THA) brought together its Alliance Management Team (AMT) and Alliance Leadership Team (ALT) to discuss the DHS Homelessness Systems Review and determine how to capture and contribute THA's journey, successes and learnings to the Review.

The overarching sentiment was that THA's evolution and progress as an Alliance can be attributed to the buy-in from all partners, organisations and leaders; from the outset, the partners of THA wanted to be in an Alliance and signed up whole heartedly to the shared values of alliancing. Alliancing requires a commitment to core principles and behaviours, which are reflected across all levels of service delivery, design, decision making and leadership; as such, the model only works when everybody is on board with these principles, which include:

- Best for client and community outcome decision-making;
- Open book financial reporting;
- Transparent performance data and evaluation;
- Shared successes, risks and problem solving;
- Active and intentional resource sharing (hard and soft resources);
- No-blame culture; and,
- A commitment to continual self-reflection and improvement.

For THA, impact indicators of alliancing span both service and system level impact, and client and community level impact. THA has observed the following tangible results due to how we operationalised as an alliance.

NB: THA can only provide commentary and reflections on the effectiveness of alliancing for our catchment area and based on the experience of our own alliance. We acknowledge the unique experiences, challenges and requirements of service delivery across different regions and communities, particularly in country/remote areas and/or for state-wide services. The views expressed in this document are solely based on the experience of the Toward Home Alliance and our operations in the southern central Adelaide region, and are not intended as a whole-of-system/sector perspective.

THA: System and Service level impact

- **Aboriginal funding parity:** THA has maintained a commitment to Aboriginal case management funding parity – meaning that with Aboriginal people accounting for approximately 26% of people supported by THA, 26% or more case management funding is allocated to Wardli-ana (THA's Aboriginal specific service). Wardli-ana is delivered by Baptist Care SA (BCSA) and Aboriginal Family Support Services (AFSS); approximately 60% of Wardli-ana staff identify as Aboriginal. Through Wardli-ana, THA has role modelled new approaches to allyship - by mainstream agency BCSA providing shared, place-based infrastructure for colocation, service integration and spaces for learning and collaboration.

- **THA membership:** THA knows that homelessness services need to be willing to evolve to meet changing community needs. THA has changed considerably from where it began in 2021, both in terms of alliance members and service model. We have welcomed three new partners during this time: Hutt St Centre in 2022, Aboriginal Family Support Services in 2023, and the St Vincent de Paul Society (SA) in 2025[2]. The Alliance's single, flexible contract allows for funding to be reallocated when it is in the community's best

[2] THA had been sub-contracting SVDPSA's Whitmore Square crisis accommodation beds since commencement in July 2021.

interest, and is endorsed by THA's AMT/ALT. THA's willingness to identify and reallocate existing funding to accommodate the addition of three new partners in four years is a testament to our determination to work as a genuine alliance, with community impact at the forefront.

- **Agile and responsive service delivery:** The flexibility for alliances to move operational resources within a single contract and across multiple organisations has allowed THA to respond to emerging challenges and community needs in an agile way. Examples include:
  - **Rough sleeping in council areas:** As visibility of rough sleeping homelessness increased in the Onkaparinga and Mount Barker Council areas, THA faced growing pressures from Council and community partners to provide a response. As a result, THA activated localised assertive outreach in these regions, which has been operating in Mount Barker for 3.5 years, and in Onkaparinga for 2 years.
  - **Wright Place:** A 10-bed short stay accommodation program for women aged over 45, delivered within existing resources through the utilisation of a Baptist Care SA owned property and alliance funding. The program provides an opportunity for healing, community and stabilisation, and has successfully supported the transition of over 30 women into long-term accommodation since starting in November 2023.
  - **Homeless Support:** An effective brief intervention service which supports approximately 1000 individuals annually. Homeless Support was designed to tackle a growing waitlist of people who were experiencing homelessness for the first time. It operates on the premise that not every individual requires intensive case management support, and works to empower people with the tools, resources and support needed to resolve their episode of homelessness.
- **Workforce attraction, retention and culture:** The THA workforce see themselves as a 'community', evidenced by quality staff attraction and high retention rates both within services, and as an Alliance. This is intentionally cultivated by shared training days, an annual staff conference, THA-branded merchandise, central brokerage and distribution, an alliance staff portal, resources and cross-segment staffing of key service responses such as inner-city assertive outreach.

THA: Client and community impact

- **Best-for-client outcome decision making:** THA intentionally centres decision making around the client or community impact, instead of individual agency preferences. This means that problem-solving and supports can be drawn from all segments/organisations across THA, regardless of which segment is lead agency for the client. This has resulted in THA being able to adopt and maintain a very high operating risk threshold when working with people with high levels of complexity and system barriers – due to sharing and coordinating supports and responses across multiple organisations. THA maintains a position that if people are eligible for a service, they are entitled to receive one. THA has rarely turned people away or chosen not to work with a client over the last 4.5 years (including those with multiple historical system or service bans). Prior to alliancing, if an individual service lacked capacity, capability or risk appetite to work with someone, the person's file would often be closed, resulting in the individual being responsible to navigate the system and find alternative supports themselves.
- **Culturally responsive service:** THA regularly receives feedback that its Aboriginal specific service, Wardli-ana is felt by Aboriginal people, community and staff as a "safe" place to work or receive services. This translates to Wardli-ana being actively sought out by Aboriginal people and services from regions outside

the THA catchment who are looking for an Aboriginal-specific response – a testament to the importance of investing in Aboriginal-specific services.

- **THA community and brand recognition:** THA has established itself as a recognised homelessness service across its region. This is demonstrated by 70% of referrals into THA coming directly from clients and community, rather than triage responses from other services or systems (e.g. Homeless Connect). Clients often report being supported 'by the Toward Home Alliance', rather than by any individual organisation or service provider; system partners across Health, Corrections and Housing report similarly. The THA model, as well as specific segments such as Wardli-ana, has garnered considerable interest from other states to inform their commissioning approaches.

THA also acknowledges that alliancing takes considerable patience, determination, perseverance and trial-and-error. THA's service model is underpinned by permissioning and a deliberate commitment from its individual partner organisations to work in genuine partnership. As THA was formed out of a competitive tender process, alliancing principles were the foundation for its development, necessitating considered and thoughtful partnerships with organisations who demonstrated genuine buy-in and values alignment. As one ALT representative remarked, "*alliancing is speaking to 'friends' rather than 'organisations'".*

Review parameters – concerns and omissions

THA is concerned about the lack of acknowledgement in the Review's Terms of Reference of:

1. **Context:** The dramatically changed landscape and external factors impacting and contributing to rates of homelessness in South Australia – particularly the severe deterioration of the housing and cost of living crises in SA over the last five years.

2. **Scope and role of homelessness services:** The intersecting nature of and drivers for homelessness, which are outside of the control of homelessness services, such as poverty, the cost-of-living crisis, the rental/housing crisis, colonisation and system inadequacies and failures.

3. **Funding and system capacity:** The funding for South Australia's homelessness system has reduced in real terms by at least 11%[3] over the past 4 years, despite the increase in persistent and chronic homelessness. With people staying in the system longer, and limited housing outcomes, services have been consistently asked to do "more with less", despite the resourcing challenges and subsequent workforce impact.

1. Context:

1.1. Adelaide's housing market is now ranked the 6th least affordable in the world, and the 2nd least affordable in Australia[4].

[3] SACOSS. (2025). *Homelessness Week 2025.* https://sacoss.org.au/homelessness-week-2025/

[4] Cox, Wendell. (2025). *Demographia international housing affordability: 2025 edition.* Chapman University. https://www.newgeography.com/files/Demographia-International-Housing-Affordability-2025-Edition.pdf

1.2. The rental market in Adelaide has experienced an 80% increase in average rental costs over the past 10 years (the highest of any Australian capital city), and a 29.9% increase in the past three years, with only 1% of listings being affordable for households on income support payments, and only 13% of listings affordable for households receiving a minimum wage[5].

1.3. Adelaide's rental vacancy rate as of August 2025 was 0.8%, and the state has consistently had one of the lowest residential vacancy rates in the country for the past 3 years[6].

1.4. South Australia has an undersupply of social and affordable housing, with the amount of public housing dwellings in South Australia slightly decreasing between 2022 and 2024[7], leaving the private rental market "to do the heavy lifting, despite being fundamentally unsuited to the task of providing long-term, affordable housing for people in need."[8]

1.5. South Australia has experienced an increase of at least 16.1% in the number of households experiencing rental stress since 2021, with the population of people with homelessness risk factors increasing by 32% since 2016[9].

The number of people experiencing persistent homelessness[10] in South Australia increased by 35% between 2019-20 and 2023-24, in addition to a year-on-year increase in unmet need for accommodation services for those experiencing homelessness, which has increased from 15.5% to 27.7% in the same period[11]. It is evident there are structural barriers impacting homelessness services' ability to rapidly rehouse people and reduce the length of time they experience homelessness.

2. Scope and role of homelessness services

2.1. THA acknowledges that homelessness services play a significant role in making homelessness rare, brief and non-recurring, and are committed to improving outcomes for those at risk of, or experiencing homelessness. However, there is a growing sentiment that homelessness services and the homelessness sector are responsible for not only supporting people at risk of, or experiencing homelessness, but reducing the demand and unmet need of the community. Homelessness is caused by poverty, the rising cost of living, the housing crisis, as well as the ongoing impact of colonisation which leads to a disproportionate representation of Aboriginal

[5] Anglicare Australia. (2025). *Rental affordability snapshot: Regional reports 2025* (16). https://www.anglicare.asn.au/wp-content/uploads/2025/04/Rental-Affordability-Snapshot-Regional-Reports.pdf

[6] SQM Research. (2025). *Residential vacancy rates, city: Adelaide.* https://sqmresearch.com.au/graph_vacancy.php?region=sa-Adelaide&type=c&t=1

[7] KMPG. *South Australian Housing Trust: Triennial Review 2021-22 to 2023-24.* https://www.housing.sa.gov.au/__data/assets/pdf_file/0009/1195416/South-Australian-Housing-Trust-Triennial-Review-2021-22-to-2023-24.pdf

[8] Azize, M. (2025). *Out of Reach: Australia's Rental Crisis and the Decline of Social Housing*. Everybody's Home. https://everybodyshome.com.au/wp-content/uploads/2025/07/Out-Of-Reach-2025.pdf

[9] Impact Economics and Policy. (2024). *Call unanswered: Unmet demand for specialist homelessness services.* Homelessness Australia. https://homelessnessaustralia.org.au/wp-content/uploads/2024/11/Impact-Economics-Call-Unanswered.pdf

[10] As per the Productivity Commission's definition of 'persistent homelessness': "the proportion of clients who experienced homelessness for more than seven months over a 24 month reporting period. The 24 month reporting period is retrospective, commencing in a client's last support month in the reference year."

[11] Steering Committee for the Review of Government Service Provision. (2025). *Report on Government Services 2025: Housing and homelessness* (part G). Productivity Commission. https://assets.pc.gov.au/ongoing/report-on-government-services/2025/housing-and-homelessness/rogs-2025-partg-overview-and-sections.pdf

people in the homelessness system. As such, homelessness services alone cannot solve homelessness or reduce system demand – doing so requires a long-term, cross-departmental and whole of government and community commitments to institutional and structural reforms that underpin a socially and economically well state.

2.2. At THA, we believe that homelessness is a failure across all systems – not just housing and homelessness. Homelessness services are frequently responding to people who have been passed from system to system – often experiencing barriers and trauma which not only exacerbate their circumstances, but preclude them from accessing the services and systems they require. While THA has strong partnerships with adjacent sectors and systems, we are aware that the homelessness system can't say no, or turn people away, and thus homelessness services often end up as the 'catch-all' for people who would not be homeless, or would not have homelessness as their main presenting issue if they were better supported by other systems.

3. Funding and system capacity:

3.1. THA has grappled with the funding challenges experienced by the sector over the past 4 years, which have resulted in frontline staffing reductions and pressure on organisations to absorb structural funding deficits. The landscape of South Australia's homelessness service funding is out of step with other states, which have increased their investment in homelessness services and supported accommodation options (see Table 1). Without adequate resourcing and infrastructure, homelessness services are severely limited in their ability to provide preventative and early intervention responses, which is essential to reducing demand on the crisis end of the system.

As such, THA urges the reviewers to assess homelessness services through the lens of service delivery, service innovation and service flexibility – focussing on whether homelessness services are well supported and adequately-funded to respond to the system demand, with mechanisms for agile responses as demand changes or increases (as it has in recent years), and effective infrastructure and reporting mechanisms to capture services and unmet need.

Review: Key Areas of Focus

1. Aboriginal people and communities

THA is committed to case management funding parity for its Aboriginal-specific service delivery segment, Wardli-ana. Wardli-ana case management funding is equal to, or greater than, the representation of Aboriginal community members accessing THA services. THA's approach to Wardli-ana and its service model has received considerable attention from stakeholders from other jurisdictions and states.

Wardli-ana supports the majority (approximately 65%) of Aboriginal people accessing THA's services. The purpose of Wardli-ana is to provide a culturally appropriate, Aboriginal designed and delivered service to people who are at risk of or experiencing homelessness within THA's region. Eligibility for Wardli-ana is for people who:

- Identify as Aboriginal;
- Choose to be supported by an Aboriginal service, which connects them to culture, community and is led by Aboriginal people;
- Are located within the THA catchment, or demonstrate connection to the area; and,
- Are experiencing homelessness or at risk of homelessness.

Wardli-ana is delivered jointly by Aboriginal Family Support Services and Baptist Care SA.

- **Colocation:** Leadership from both BCSA and AFSS embraced purposeful colocation as a way of building a cohesive, multi-disciplinary and united Wardli-ana team, working to prevent and end homelessness for Aboriginal people and communities. Enabling this is the Paya'adlu site on Wright St in the Adelaide CBD. Paya'adlu means "let's listen and learn together" in Kaurna language, and is an intentional space curated by Wardli-ana and all of THA for collaboration across the workforce and the benefit of community. While the Paya'adlu building is owned by Baptist Care SA, its 'identity' is purposefully communal. This means it is not organisationally branded and enables collaboration for staff across all of THA. Paya'adlu is an excellent example of organisations leading and collaborating with generosity for productive place-based responses and improved community outcomes.

i: Paya'adlu: a shared space for collaboration and working together to prevent and end homelessness

- **Team composition:** Wardli-ana comprises a multi-disciplinary team of case managers, Aboriginal homeless practitioners and Aboriginal Cultural Engagement Workers. Approximately 60% of Wardli-ana staff identify as Aboriginal.

- **Smaller caseloads:** Wardli-ana receives approximately 26% of available THA case management funding[4] and supports approximately 65% of Aboriginal people supported by THA. This proportionately higher amount of resourcing per person for Wardli-ana (compared to other THA service segments) acknowledges the specific challenges and complexities that the Wardli-ana team experience as a dedicated Aboriginal service segment. A key learning of Wardli-ana has been the importance of preserving choice for both Aboriginal clients and staff, noting that approximately 25-30% of Aboriginal clients choose to be supported by non-Aboriginal specific service segments within THA.

2. Place-based responses

THA's tender was underpinned by the principles of place-based service delivery, with practical examples including:

- **Assertive outreach:** THA delivers structured and collaborative assertive outreach responses in the Adelaide CBD (twice a day, 365 days/year), City of Onkaparinga (fortnightly) and the Mount Barker Council area (fortnightly) to assertively engage with individuals experiencing homelessness in the community and environments they're residing in, such as streets, parks, and other public spaces. THA leads the service delivery component, however, all responses are centred in and governed with community, with Council and community partners as valued and active participants. This proactive approach enables assertive outreach staff to offer immediate support, build trust, and facilitate connections to essential services without requiring individuals to initiate contact themselves. Assertive Outreach is particularly effective in reaching individuals who may have difficulty engaging with traditional service systems due to past negative experiences, perceived or experienced discrimination, trauma, or a lack of transparency. At a systems level, Assertive Outreach also de-risks and helps manage community concerns and expectations. As a result of these collective efforts, Onkaparinga Council has recently initiated and endorsed an Advance to Zero project, with THA as a key implementation partner.

- **Co-located spaces:** THA believes in the value of shared spaces and resources, with THA staff being welcome to hot desk from and/or co-locate across partner sites. Two dedicated THA colocation sites are located at Southern Pathways in Christies Beach and Paya'adlu in the city. While these are Baptist Care SA owned sites, they have dedicated IT equipment and office space available for all alliance staff.

- **Adelaide Zero Project (AZP):** A multi-systems place-based collaboration with Council, DHS, SAHT, Health, Corrections etc. THA has designed its service system to drive AZP and ensure those who are most vulnerable in experiencing rough sleeping homelessness are visible and supported.

- **Wright Place:** THA identified an increase in single older women experiencing homelessness in the CBD, and activated Wright Place, a 10-bedroom short-term accommodation program to address this need. The on-site case manager and proximity of the site to the Baptist Care SA Westcare Centre enhances the place-based service provision, providing a safe, supported and secure housing pathway for older women experiencing homelessness.

- **Private rental sustainability pilot:** Delivered jointly by THA Prevent (Mission Australia), SAHT and private real estate agencies. The pilot focused on strengthening relationships with real estate agents, building their capacity to identify and support the referral of at-risk private rental tenancies to THA's Prevent service segment.

- **MOUs and Agreements with multiple Councils and community partners, to share information and work collaboratively.**

3. People experiencing rough sleeping

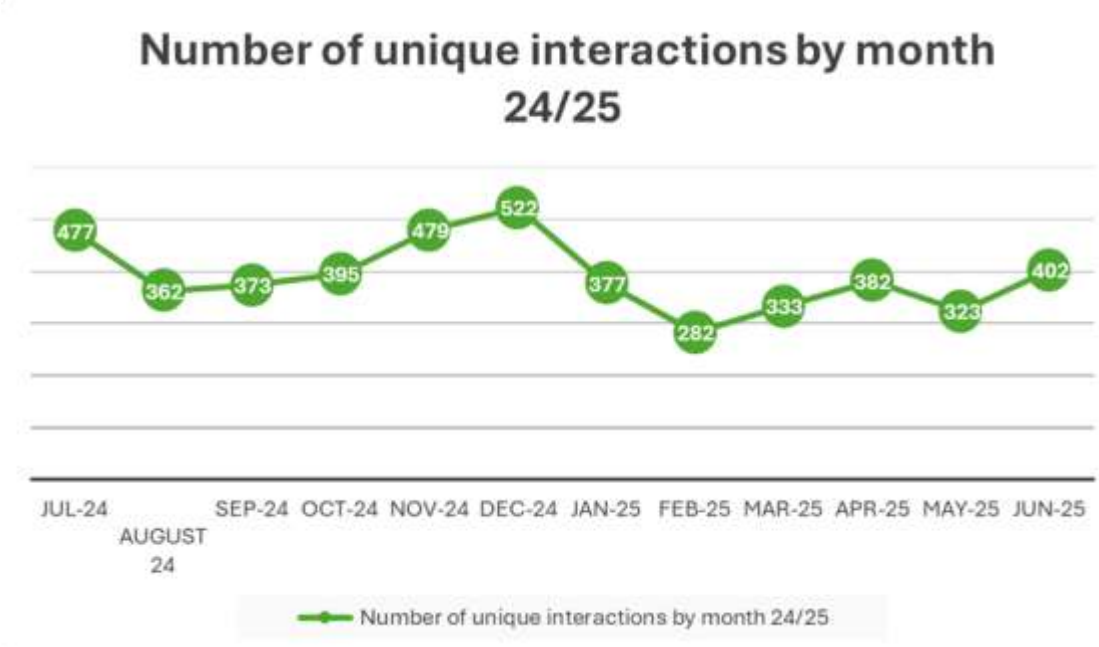
THA has dedicated service responses to meet the needs of people experiencing rough sleeping across its region, including:

- **Dedicated assertive outreach responses and by-name lists** (informal and formal) across the region's largest council areas of Adelaide, Onkaparinga and Mt Barker. THA also has strong relationships with all councils across its region, and participates in local forums, providing assertive and targeted outreach responses as they are identified.

  Collectively, these efforts represent a monthly staffing commitment of over 360 hours per month, scaled up with seasonal code responses during winter and summer, highlighting the alliance's capacity to respond to increased vulnerability and environmental risk.

  Due to the nature of Assertive Outreach and the limitations of case management systems in capturing more informal interactions with people, service delivery data is not recorded within H2H and thus not reflected in THA's data. A review of the THA Assertive Outreach dataset for the Adelaide CBD in financial year 2024/25 indicates a total of 4707 unique interactions with individuals experiencing primary homelessness within the Adelaide CBD (this is in addition to service data recorded in H2H).

Figure 1: Assertive outreach interactions, Adelaide CBD



THA has continuously reviewed its outreach response to ensure it is meeting the needs of clients and communities and is grounded in practice wisdom. These reviews have resulted in increased collaboration with stakeholders and system partners and practice innovations (such as 'outreach packs' of essential items distributed during periods of extreme weather).

- **Tenancy sustainment:** Understanding that people with long-term and persistent experiences of homelessness, particularly prolonged rough sleeping often need additional, sustained supports to maintain a successful tenancy. THA has shifted its practice and resourcing to respond to this by:
    a. Providing case management and tenancy supports to Integrated Housing Program[12] (IHP) tenancies for as long as needed (despite approximately 70% of IHP housing properties being located outside the THA region). THA is also committed to only closing clients when agreed in collaboration with SAHT and once tenancies are rolled over to the regions; and,
    b. Realigning the eligibility criteria of its Prevent service segment to provide additional tenancy supports if and when an IHP tenancy becomes at risk.

4. Young people

Young people experiencing homelessness has been a point of focus for THA since its formation, as represented by internal reviews and strategy development undertaken over the past four years. Actions taken by THA to strengthen our youth focus and practices across the alliance include:

- An MOU with SYC to support THA Access workers having a consistent weekly presence at the Foundry, providing walk-in intakes and advice for young people experiencing homelessness.
- Prioritisation of young people for intakes and case management.
- Prioritisation of young people for housing allocations, and identification of available properties as suitable to young people.
- Partnership with a Community Housing Provider for a shared housing pilot, to assist young people in gaining rental experiences and references, as well as capacity and knowledge of living in share housing.
- Presence and participation in the statewide youth homelessness strategic and operational groups.

In recent years, THA has seen a considerable increase in the number of young people transitioning into homelessness from the child protection system, as well as young people exiting youth justice (particularly Aboriginal young people). While THA is committed to supporting all people who are eligible for services, we are concerned about the impact on young people exiting institutional settings when homelessness services are provided as the only housing option. At times, THA has partnered with DCP and youth justice services to support young people, whilst encouraging more proactive approaches to exit/transition planning for young people in these systems, to avoid their entry into homelessness.

THA had previously considered the need for a youth-specific service segment and opted to embed youth practice wisdom across all segments through the appointment of youth 'champions'. While there have been improvements to youth-specific service delivery through this approach, THA is now revisiting the potential for a youth-specific service segment.

[12] IHP tenancies are those allocated to people experiencing rough sleeping in the Adelaide City Council region, via the Adelaide Zero Project.

5. Domestic, Family and Sexual Violence

The intersectionality of experiences of homelessness and DFSV is substantial. As is demonstrated through the findings of the DFSV Royal Commission, the eligibility criteria for SA's Domestic Family Violence Safety Alliance (DFVSA) services has narrowed sharply over the past three years; to the point that DFVSA only has capacity to support people in current crisis and assessed as high risk using the Domestic Violence Risk Assessment (DVRA). This narrow scope results in a widening gap in service availability for those experiencing DFSV, forcing homelessness services to respond to an increased number of individuals who are in need of a dedicated DFSV response[13]. Homelessness case managers are increasingly required to deliver a specialist DFSV response in a homelessness context. This is a risk on both a system and individual level; requiring upskilling and investment, such as undertaking DVRA training and safety planning, as well as an understanding of legislative requirements, etc., in addition to the impact on individual frontline staff who are responding to increased demand. THA is optimistic of the outcomes of the DFSV Royal Commission, and its essential role in boosting critically needed investment in DFSV and homelessness services to better support individuals and families experiencing DFSV.

Alliance Governance

Role and scope of the Alliance Senior Manager

THA identifies the Alliance Senior Manager (ASM) role as a key enabling function of alliancing; conditions needed to optimise the role include:

- **Bi-partisanship:** For the lead agency (employer of the ASM) to recognise and enable the ASM to work in a wholly collaborative, Alliance-focused way; in doing so, empowering the ASM to be bi-partisan and drive best for alliance and community-led thinking and decision making (rather than in the interest of an individual organisation). THA's lead agency, Lutheran Care embraced this philosophy from the start of alliancing, with the ASM accountable to the ALT, and not required to undertake or participate in non-THA related work for the lead agency – this has been instrumental to the efficacy of THA's ASM. Similarly, all THA partners have permissioned their operational leaders and workforce to prioritise and invest deeply in building service quality and culture based on alliancing values and priorities.

- **Executive support and Alliance-specific resourcing:** Due to the broad scope of the ASM role, lateral support through the provision and resourcing of an Alliance Executive Officer (AEO) and a Housing Access Lead have been essential to THA's ability to function as an alliance, and ensure the ASM can carry out their key functions of providing governance and strategic direction. For example:

    - **Alliance Executive Officer:** The AEO works closely with the ASM to fulfill the strategic intent and operational priorities of the alliance, including providing strategic, project and administrative support to the ASM and secretariat functions to AMT and ALT. Along with the ASM, the AEO is responsible for fostering a culture of collaboration, innovation and achieving outcomes across the Alliance. Within THA, the AEO role has provided essential support to the ASM through sharing of the workload, working as a solely Alliance-focussed team, and provided the opportunity for agile

[13] Such as men in same-sex relationships or transgender people who have experienced family, domestic or sexual violence, for whom there are limited or no appropriate DFSV services.

and responsive project management and support across THA segments, AMT and ALT (e.g. leading service evaluations, grant applications and acquittals, coordinating alliance-wide training and events, research and continuous improvement projects, and alliance-wide advocacy and submissions).

- **Housing Access Lead:** The Housing Access Lead was a purposeful inclusion in THA's tender and is a core component of driving best-for-client outcomes across the Alliance. The Housing Access Lead coordinates and manages THA's housing vacancies, nominations and allocations process, manages allocation of brokerage across the alliance, and builds relationships and networks with housing providers, SAHT and community stakeholders to create new housing innovation opportunities and strengthen housing pathways for those accessing THA's services. The role acts as a central point of contact for Community Housing Providers and SAHT, providing continuity and a whole-of-alliance approach to THA's housing outcomes, and is instrumental in securing additional housing outcomes through advocacy on behalf of THA segments. The Housing Access Lead is also responsible for managing data and reporting on THA's housing outcomes to frontline staff, AMT and ALT, providing an alliance-wide perspective on THA's operations, and ensuring we 'celebrate the wins'.

- **Operational support:** In addition to the dedicated 'central' alliance team, THA's AMT and ALT representatives provide essential operational and strategic support to the ASM - a vital component to the success and effectiveness of the role.

Opportunities for improvement:

1. **Independent supervision and coaching:** As the ASM is expected to work objectively and consistently with all alliance partners and leaders, driving best for client and community thinking and decision making, independent supervision and mentoring of the ASM may be warranted. This supervision should be in line with alliancing principles, outcomes, and professional development objectives.

2. **Peformance review and feedback mechanism**: Consideration to embed an objective, annual, alliance-inclusive performance review of the ASM's role, in line with alliance priorities.

3. **Dedicated non-operational funding for alliance roles:** When alliancing was commissioned in 2021 no additional funding was allocated to resource alliance-specific functions, such as the ASM role. This was a considerable oversight and should be addressed in future commissioning.

4. **Cross-alliance ALT/AMT opportunities:** Potential for cross-alliance ALTs to meet together on a quarterly or bi-annual basis for sharing of operational learnings, strategic sector discussions and collective priority setting.

Role and scope of the Alliance leadership and management structures

THA's governance, inclusive of the Alliance Leadership Team (ALT) and Alliance Management Team (AMT) support relationship building, with a good level of buy-in from all representatives. This is demonstrated through a consistently high level of attendance from all representatives (or proxies, as required) at monthly ALT meetings (fortnightly, for AMT), and minimal (if any) cancellations of meetings.

THA AMT and ALT representatives report that our governance structure enables:

- Shared risk-holding
- Authentic collaboration and collective decision making
- Genuine problem-solving
- Lateral collegial support
- Best-for-client outcomes

When asked about the workload commitment of monthly/fortnightly governance meetings, ALT/AMT representatives commented that *"time and investment is required for genuine collaboration"*, expressing no interest in reducing the frequency or intensity of meetings.

To increase information sharing and problem-solving processes across the alliance, THA have also implemented a monthly Alliance Team Leader Network (ATLN) meeting, which bridges the gap between ALT/AMT and the frontline workforce.

Opportunity for improvement:

1. **Independent, remunerated ALT chair:** A future alliance model should consider investing in an independent, remunerated chair of ALT, in line with alliancing principles and priorities, and a continual improvement focus.

2. **Contract and performance management:** The introduction of alliancing shifted certain responsibilities of traditional contract management which were previously managed by the funder to the alliance's AMT and ALTs. Dedicated performance or contract management conversations and meetings should be embedded and contractually required in future alliance governance.

Lead Agency

Contractually, the alliance lead agency is responsible for:

i. receiving, distributing and acquitting quarterly and yearly funds to alliance partners and the funder; and,
ii. employing the ASM and other central functions/supports agreed within each alliance.

In SA, each alliance interpreted the role of the lead agency slightly differently. Lutheran Care embraced the role and responsibility as THA lead agency from a position of sector stewardship and generosity, which supported the embedding of alliance principles from the outset. The lead agency has no additional voting rights or privileges – they are an equal partner with an equal voice to other partners, and in THA's case, ALT adopted a six-monthly rotating chair from the outset. Despite this, the lead agency is often asked to pick up additional responsibilities and logistics, such as distributing alliance wide brokerage (in THA's case $100,000 of Wyatt funding and $150,000

Open Door funding annually[14]). This spirit of generosity and sector leadership has been evident in all THA members at different times (such as Baptist Care SA providing the Wright Place and Paya'adlu buildings for THA use at no cost, and Salvation Army funding additional frontline THA staff to bolster service delivery). The scope of the lead agency function should continue to be considered and articulated clearly in future commissioning processes.

A future THA service model – recommended inclusions

THA believes its current service model is strengths-based, place-based and designed to meet the needs of an under-resourced and challenged system. THA's current service segments include:

- **Access:** THA front-door, supporting consistent assessment and triaging;
- **Prevent:** supporting people with at-risk private rental and community housing tenancies;
- **Divert:** working with people who are new to homelessness, or haven't been in the homelessness system for over 12 months;
- **Resolve:** supporting people with persistent and chronic experiences of homelessness (also leading THA's assertive street outreach work in the CBD);
- **Wardli-ana:** THA's Aboriginal specific service segment;
- **Wellbeing:** supporting people with specific mental and physical health needs impacting one's experience of homelessness;
- **Youth Accommodation (32 beds):** Cross Roads and Onkaparinga House (16 beds delivered by Baptist Care SA), and Narrunga House and Olga Fudge (16 Aboriginal specific youth and young adult beds delivered by Aboriginal Family Support Services);
- **Adult crisis accommodation (63 beds):** St Vincent de Paul Society SA's men's shelter, Terra Firma, Wright Place;
- **Tenancy supports (400 properties):** providing tenancy case management support to approximately 400 properties at any point in time (inclusive of Supported Housing Packages, Transitional Housing Properties and Integrated Housing Program, AZP tenancies).

Recommended adjustments for the THA service model moving forward:

- **Brief intervention service segment:** Enabling practical, housing focused brief intervention for individuals and families who do not need full case management responses.
- **Intensive case management segment:** A multi-disciplinary team with smaller caseloads, with capacity to work with people with high and complex needs who require a more intensive response. The need for this type of response is becoming more pronounced as adjacent systems are at capacity and have increasingly restrictive access criteria, thereby impacting the ability of homelessness services to access needed supports across mental health, disability, aged care, alcohol and other drug services etc. THA has experienced a notable reduction in access to support packages from the Exceptional Needs Unit, growing barriers to the NDIS and Aged Care systems, and obtaining of community mental health supports; hence the need for skilled teams within the homelessness system to address this unmet need.

[14] without charging corporate overheads.

- **Tenancy sustainment segment:** A specialist team to support people with persistent and chronic experiences of homelessness, who require additional or extended support to maintain tenancies, and/or actively re-engage when they become at-risk. The introduction of SAHT's 'Good Neighbour' policy will put further pressure on the current workforce to upskill practitioners to provide advocacy and supports to individuals navigating SACAT and mediation processes.
- **Youth service segment:** Ensuring an alliance-wide prioritisation of and focus on the unique needs of young people experiencing homelessness, in addition to systems advocacy, housing allocations and partnerships with adjacent systems such as DCP and Youth Justice.
- **Health partnerships:** Pursuing formal secondment opportunities with SA Health staff to strengthen health literacy and systems linking between health and homelessness services.

Other reflections

1. A data system that doesn't capture the sector's work or successes

THA is concerned about the extent to which data from H2H will be used in the Review as a single source of truth. As one AMT representative remarked, *"we are working within a system that doesn't measure success",* which is a significant hurdle in communicating and reporting on work conducted, as well as evidencing need.

The H2H system, which was reviewed by the SA Housing Trust in 2023, with the recommendation for a new system to be built, is a frequent cause of frustration across THA, as well as the state more broadly. THA's reflection on the current system includes:

- The use of out-dated language and terminology (e.g. H2H still uses the abbreviation "ATSI" when referring to Aboriginal and Torres Strait Islander peoples[15]).
- No ability to capture or report on sexual and gender diversity (e.g. the only options when reporting an individual's sex on H2H is "male", "female" and "other"[16]).
- The system is deficit-based and punitive and does not reflect the nuances of people's circumstances or how these may change over time.
- The system demands an increased administrative load from case workers entering data (e.g. manually entering the details of presenting units for larger households).

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[15] *As noted in the Department of Human Services' Diversity and Inclusion Style Guide, "'Aboriginal and Torres Strait Islander' should always be spelt out in full when referring to an Aboriginal and Torres Strait Islander person. It should not be abbreviated to ATSI."*
The Department of Human Services. (2023). *DHS Diversity and Inclusion Style* (Version 2023.1). https://dhs.sa.gov.au/about-us/our-department/inclusion-engagement-and-safeguarding/dhs-diversity-and-inclusion/dhs-diversity-and-inclusion-style-guide

[16] *As noted in DHS' Data Collection and Gender Guideline, the term "other" is not encouraged when collecting data about sex recorded at birth. Additionally, the guideline demonstrates the importance of collecting both sex and gender data, in order to identify "whether equitable or disparate outcomes are being achieved for south Australians... Data collected must accurately reflect the real world – and trans, non-binary and gender diverse and intersex people are part of this real world."*
The Department of Human Services. (2021). *Data Collection and Gender Guideline: data collection and working with the LGBTIQA+ community.* Government of South Australia. https://dhs.sa.gov.au/__data/assets/pdf_file/0006/141837/Data-Collection-and-Gender-Guideline-Data-Collection-and-Working-with-the-LGBTIQA-Community-2021.pdf

- There is no mechanism to capture people's feedback or experiences using services, only their housing outcome and services referred/identified.
- Conflicting views and advice on methods of inputting data to report against KPIs.
- Limited functionality to capture the breadth and diversity of the work undertaken by specialist homelessness services (e.g. over 540 hours per month of assertive outreach and duty responses from Hutt St Centre's Wellbeing Centre and Baptist Care SA's Westcare site cannot be reported in H2H and are largely not included in service delivery data).

THA supports the Productivity Commission's findings and recommendations from the review into homelessness services related to the H2H system, particularly **finding 5.3.2: The existing client management system (H2H) does not meet data requirements**[17]**.** Acknowledging that H2H is a legacy system inherited by DHS, it is our hope that the Review's findings will prioritise adopting and/or developing a more purpose-built and agile system which closely aligns with national reporting standards.

2. Brokerage

A key service provision that does not have a comprehensive or robust capturing/reporting mechanism across homelessness services is brokerage. The role of brokerage in ending a person's experience of homelessness is well established, with the provision of brokerage a key predictor in positive housing outcomes[18]. THA allocates a considerable pool of funding for brokerage provision, in addition to utilising the Wyatt Home and Well grant, and the Vinnies Open Door Brokerage[19]. Despite careful and considered brokerage management practices, THA frequently exhausts its brokerage allocation weeks (or sometimes months) before it is refreshed. Brokerage fulfils a number of functions, e.g.:

- Funding applications for birth certificates and identity documents;
- Supporting individuals to address tenancy concerns or pay debt, preventing eviction;
- Funding removalists or storage costs to assist individuals/households moving into long-term accommodation;
- Supporting new tenancies to pay bond or rent in advance, where they are not eligible for concessions or payment plans;
- Purchase of key household appliances and items to equip new tenancies with essential furniture; and
- Supporting individuals to access medical assessments, appointments or referrals where other avenues are not available.

One of the key contributors of brokerage for the Alliance, the Wyatt Home and Well grant, is undergoing an evaluation, and will no longer be offered in its current form from 30 June 2026, resulting in a reduction of up to $400,000 of brokerage across the four specialist homelessness alliances.

[17] Audit Office of South Australia. (2024). Report of the Auditor-General: Managing homelessness services (Report 8 of 2024). Government of South Australia https://www.audit.sa.gov.au/reports/managing-homelessness-services

[18] Mission Australia. (2024). Homelessness Analytics Project Research Snapshot. Retrieved from https://www.missionaustralia.com.au/publications/research/homelessness.

[19] Previously administered by the St Vincent de Paul Society SA (SVDPSA); with SVDPSA joining THA as a full part on 1 July 2025, this brokerage is now administered by Lutheran Care on behalf of THA.

In recognition of the key role of brokerage in resolving a person's experience of homelessness, we hope it is a recommendation of the Review to allocate dedicated brokerage funds across all homelessness services.

3. Lived experience and expertise

As per our charter, THA is committed to ensuring the voice and experience of people with a lived experience of homelessness informs what we do and how we do it. However, we also acknowledge that we have not established any alliance-wide mechanisms to guide us in embedding lived experience and expertise in our work. This has been an ongoing and continual conversation, with reflections around:

- The role of lived experience and peer support work in the homelessness system, and how this differs to the use of lived experience in other systems (e.g. mental health); for example, we recognise the role and value of lived expertise in providing tenancy sustainment advice and support for those who have recently been housed after a period of homelessness, and there is an opportunity to embed lived experience positions to support this.
- Capturing the prevalence of people with a lived experience of homelessness within the existing workforce, and ways to formally utilise this existing knowledgebase as an Alliance. We know there is a substantial portion of our workforce with lived experience across a variety of areas, including housing instability and homelessness (in particular THA's Aboriginal workforce). THA is interested in exploring the informal ways lived experience is being utilised by these people, and how we can recognize and support this work.
- The challenges of coordinating a whole-of-alliance feedback mechanism, noting the feedback mechanisms already present and utilized within individual organisations.

Inclusions of lived experience perspectives and wisdom by THA are:

- Unstructured conversations with individuals transitioning out of key programs, to capture their feedback and embed their voice within evaluations and service models.
- The appointment of a Lived Experience Art Coordinator at Holbrooks Housing Program, facilitating a weekly art and craft session for tenants of the program. In addition to facilitating an outlet for creativity, the Lived Experience Art Coordinator has been able to use their recent experience of homelessness to provide informal peer support and advice to those attending the sessions.
- Providing previous clients with opportunities to share their story of homelessness in public forums, such as co-presenting at homelessness sector and workforce conferences, and meeting with government representatives and Ministers.
- Committing to developing and implementing an Alliance-wide feedback mechanism for clients, as part of both elevating lived experience and gathering feedback on the quality of our services and opportunities for improvement.

4. Alliancing evolution and maturing

THA understands that South Australia's commissioning of the alliance model was adopted from the Glasgow Alliance to End Homelessness (GAEH) in Scotland, as a collective impact approach for tackling socially wicked issues. Whilst alliancing in Glasgow provided an important start point for South Australia's alliance model, we understand the GAEH was not operationalised in a way which enabled transparency, collective decision making and collaborative service delivery, which led to its disbanding after 3 years[20]. For instance, a key barrier to the success of the GAEH was the ability to incorporate new subcontracting or alliance partners into its structure; whereas THA has welcomed three new alliance partners over the past four years.

THA recognises that homelessness services need to continually evolve to meet the needs of community. We do not work in a stationary system, and as such each stakeholder has a responsibility and obligation to ensure we are optimising the resources and impact of our work. Whilst it is important that we continue to draw on learnings from the UK and other jurisdictions, South Australia's homelessness alliance system has matured beyond its GAEH blueprint. We believe it is time for South Australia to shape and lead its own narrative about alliancing, profiling the successes and outcomes which weren't realised in overseas models, and offer our learnings on collaborative and innovative ways of working to improve community impact and outcomes.

Final recommendations

THA believes any change to the current system needs to be fully costed and considered from a cost of change perspective (inclusive of services, systems, workforce, community and sector relationships).

Any change to the current system would ideally be iterative and structured to preserve and build on the strengths of the current system. As mentioned above, South Australia's homelessness alliance system has outlived previous examples of alliancing; however, the current system is only four and half years old[21], so full realisation of the benefits and challenges of alliancing is still in progress.

Developing and negotiating values-aligned partnerships within a short tender process can be stressful and counter to the intended outcome; any future commissioning processes will need to take this fully into account.

As it stands, the current system is not funded or resourced to meet community need, and urgent recognition and action from the State Government is needed to address this. Without substantial and ongoing investment in funding for homelessness services in South Australia, considerable systems change would be socially and economically costly, and detrimental to the individuals and communities we exist to support.

[20] Rocket Science. (2024). *Glasgow Alliance to End Homelessness: Lessons learned review.* https://glasgowcity.hscp.scot/sites/default/files/publications/Rocket%20Science%20GAEH%20lessons%20learned%20review%2001.08.24%20%28002%29_0.pdf

[21] At the time of writing, November 2025.

DHS Homelessness Review 2025

Toward Home Alliance: “our uncaptured work”

*nb. this is being submitted to the Review team as an addendum to the schedule of documents submitted by THA to the Review team on 13 October 2025.

Rationale for inclusion

The Toward Home Alliance (THA) undertakes considerable additional work, of approximately 550 hours per month that is largely not captured in h2h. This consists of:

- **Assertive outreach**: places-based assertive outreach across the Adelaide cbd, twice a day 365 days a year (360 hours), Onkaparinga, fortnightly (16 hours) and Mt Barker, fortnightly (16 hours); and,
- **Hutt St Centre duty response** (160 hours): an afternoon walk-in/duty response located at the Hutt St Centre.

This addendum emphasises the essential place-based and assertive outreach work which ensures some of the most vulnerable individuals in the homelessness system are known and supported. Due to the nature of this work, it is largely not captured in h2h.

Assertive outreach: what it is and why it’s important

Assertive Outreach is a place-based service delivery response, designed to engage individuals experiencing homelessness in the community and environments they’re residing in, such as streets, parks, and other public spaces.

This proactive approach enables outreach workers to offer immediate support, build trust, and facilitate connections to essential services without requiring individuals to initiate contact themselves. Assertive Outreach is particularly effective in reaching individuals who may have difficulty engaging with tradition

service systems due to past negative experiences, perceived or experienced discrimination, trauma, or a lack of transparency. These factors often contribute to a deep mistrust of services, resulting in reduced engagement and poorer outcomes.

The Toward Home Alliance (THA) Assertive Outreach CBD response operates 365 days a year, including weekends and public holidays, with teams of two consistently engaging individuals experiencing primary homelessness. Assertive Outreach is also undertaken on a fortnightly basis within the Mount Barker and Onkaparinga council areas by teams of two from the Resolve and Wellbeing segments. These additional outreach responses are offered due to identified needs within the community, and have been operationalised by THA within existing resources - they do not receive dedicated funding.

THA's Assertive Outreach response represents the largest identification point for people sleeping rough in South Australia, playing a critical role in early intervention, service coordination, and the broader homelessness response system.

Due to the nature of Assertive Outreach and the limitations of case management systems in capturing more informal interactions with people, service delivery data is not recorded within H2H and thus not reflected in THA's data.

Assertive Outreach aims to bridge this gap by connecting with individuals who face challenges in maintaining consistent engagement with services. Through sustained, person-centred interactions, this model facilitates access to health and wellbeing supports, housing pathways, and ultimately fosters long-term stability and community reintegration.

Effective assertive street-based outreach service delivery aims to improve a person's quality of life, and experience of engagement with services[1]. Assertive Outreach aims to:

- Proactively engage and collaborate with people sleeping rough, whenever possible, with the view to identifying personal aspirations and working towards their expressed goals.
- Provide an intensive and coordinated team approach, to support people who experience complex needs.
- Minimise the harmful effects of rough sleeping.
- Undertake effective case coordination, in collaboration with government and non-government organisations.
- Support people out of rough sleeping and end their experience of homelessness.

Assertive Outreach, Alliancing and Weekly Commitment

The Salvation Army Resolve Team leads and coordinates the Assertive Outreach response on behalf of THA. This critical component of THA's service delivery model is supported by contributions from the Resolve team (Hutt St Centre), Wellbeing team (Sonder), and Wardli-ana team (Baptist Care SA, BCSA) and Aboriginal Family Support Services (AFSS). Each team provides dedicated staff to ensure the delivery of consistent, intensive, and flexible support to individuals experiencing rough sleeping.

[1] Stambe, R., Kuskoff, E., Parsell, C., Plage, S., Ablaza, C. & Perales, F. (2024). Seeing, Sharing and Supporting: Assertive outreach as a partial solution to rough sleeping. *The British Journal of Social Work 54*(2). 723-740. https://doi.org/10.1093/bjsw/bcad251

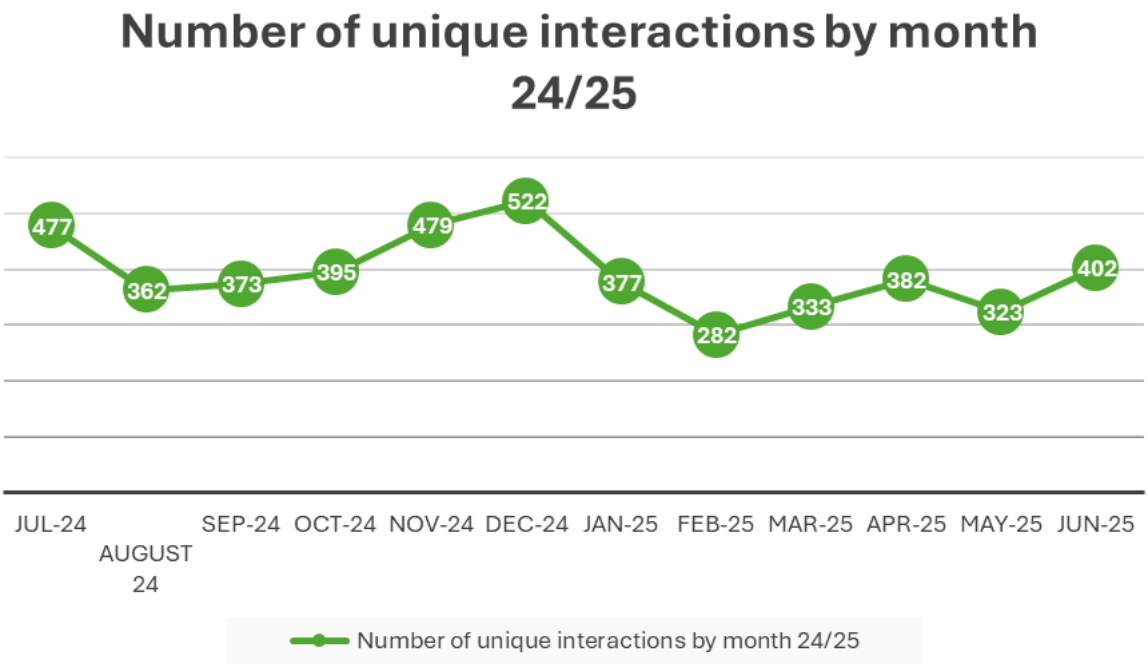
Collectively, these efforts represent a monthly staffing commitment of over 360 hours per month across the inner-city region, forming a cornerstone of the homelessness response relied upon by the broader sector. In addition, THA provides dedicated and consistent assertive outreach in collaboration with council and community partners in Onkaparinga and Mount Barker, providing an average of 32 hours of outreach delivered fortnightly in these regions.

Capturing Assertive Outreach services

Due to the limits of the H2H system's ability to capture the full scope and impact of assertive outreach activities, THA maintains a de-identified, operationally focused database to support the delivery and coordination of assertive outreach services. This live, continuously updated spreadsheet enables real-time data collection and facilitates responsive service coordination, particularly for individuals who are unable, unwilling, or hesitant to engage with traditional service systems.

A review of the THA Assertive Outreach dataset for the Adelaide cbd in financial year 2024/25 indicates a total of 4707 unique interactions with individuals experiencing primary homelessness within the Adelaide CBD. As illustrated in the below graph, the data reflects an average of 392.25 outreach responses per month. Notably, peaks in outreach activity align with seasonal code responses during winter and summer, highlighting the program's capacity to scale in response to increased vulnerability and environmental risk.

This high volume of crucial service provision is not currently captured by H2H or reported in THA's service data and therefore is not factored into considerations relating to funding, KPIs or service capacity/demand.



Innovation and collaboration

THA recognises the need to innovate, strengthen system coordination, and enhance client outcomes through meaningful connection, grounded in the understanding that ending homelessness requires a whole of community effort.

Through the delivery of assertive outreach, THA has consistently pursued service improvements that are responsive, collaborative, client-focused, and grounded in meeting individuals where they are. This commitment to innovation has led to the implementation of several key advancements within the assertive outreach model, including:

a. Persons of interest spreadsheet

The Persons of Interest spreadsheet is a centralised coordination tool used by Assertive Outreach teams across the THA partner organisations. It provides access to relevant, de-identified information on individuals who have been flagged by THA or external stakeholders, such as South Australia Police (SAPOL), hospitals, Councils or other service providers, as requiring targeted outreach and support.

This tool enables the structured organisation and management of outreach responses, supporting individuals who may be known or unknown to THA, identifying locations of interest, and guiding service delivery efforts across the city. It enhances operational transparency and ensures that outreach teams are equipped with the necessary information to respond effectively when encountering individuals in the field.

A person of interest is defined as someone identified by an internal or external stakeholder for proactive engagement by Assertive Outreach teams. Reasons for inclusion in the spreadsheet may include, but are not limited to:

- A missing person alert issued by SAPOL
- An individual flagged by health services, such as hospitals
- A person who has lost contact with THA services for an extended period
- Specific locations of interest identified for targeted outreach

By centralising this information, the spreadsheet supports improved coordination, timely response, and more effective service delivery, ultimately enhancing the ability of outreach teams to connect individuals with appropriate and timely supports, facilitating pathways toward stability.

b. City Of Adelaide, Department of Human Services, South Australian Police and THA check in meeting

A fortnightly coordination meeting is held for stakeholders involved in the Assertive Outreach space to collaboratively review and respond to emerging concerns. This forum provides an opportunity for participating organisations to discuss individuals who have been escalated for support, as well as any incidents, trends, or service delivery challenges that have arisen.

Each stakeholder contributes insights related to specific individuals, identified hotspots, recurring situations, or emerging patterns observed across the City of Adelaide council area. The meeting fosters cross-sector collaboration, enhances situational awareness, and supports timely, coordinated responses to individuals experiencing rough sleeping. **this meeting is also held monthly with Onkaparinga Council and community partners.

c. Service Coordination Meeting

Service Coordination meetings are held weekly and are jointly chaired and resourced by THA and the Adelaide Zero Project (AZP). These meetings serve as a cross-sector platform for service providers to collaborate in identifying and supporting individuals experiencing high levels of vulnerability.

The focus of these meetings is to facilitate integrated, person-centred responses by bringing together key stakeholders to share insights, coordinate care, and develop tailored support strategies. THA teams actively participate in these meetings, contributing client knowledge and working in partnership with other services to identify individuals for discussion and pursue collaborative, outcome-driven solutions.

d. Toward Home Outreach Meeting

This regular coordination meeting brings together key representatives from across THA to support the effective, safe, and responsive delivery of Assertive Outreach services. The meeting serves as a platform for sharing updates, exchanging information, and strengthening service integration and collaboration across partner organisations.

All Alliance partners involved in Assertive Outreach are represented, ensuring a comprehensive and unified approach to addressing operational matters and client specific escalations. The meeting facilitates real-time problem-solving, promotes consistency in service delivery, and enhances the collective capacity to respond to individuals experiencing rough sleeping across the THA catchment.

toward home | CHARTER

Working together, giving hope to prevent and end homelessness

Integrity Respect Trust Collaborative Courageous Creative

We Believe

It takes a community to end homelessness.

Home, safety, self-determination, and choice are basic human rights. We walk alongside clients on their self-directed journey.

In valuing, supporting, and empowering our workforce. We know it takes courage to be vulnerable and embrace mistakes as part of our collective learning.

The voice and experience of people with lived experience is at the heart of everything we do. It shapes what we do, how we do it, and influences policies and systems change.

In people's resilience; we 'see' the whole person, listen deeply, and treat everyone with dignity. We embrace and celebrate the diversity of culture, race, ethnicity, age, gender, religion, sexual orientation, gender identity, gender expression, disability, economic status, and other backgrounds and experiences.

Our service practices, frameworks, and models must draw on practice wisdom, evidence, and the lived experience of people and communities.

Homelessness can be traumatic; our work is trauma responsive, culturally understanding, compassionate, and supports recovery and healing.

Culturally strong practices, co-designed with Aboriginal communities, create safety, shared understanding, and healing.

In collaborating and working with the community, sector, government, and other Alliances to innovate and drive positive system reform.

Artwork by Warlpiri artist Maureen Hudson Nampijinpa