
DISRUPTING THE
HOMELESSNESS
MERRY-GO-ROUND
Transitional Housing with
Integrated Drug & Alcohol
Treatment

ACKNOWLEDGEMENT

I acknowledge that we are meeting on the Lands of the Larrakia People, the Traditional Custodians of greater Darwin. I pay respects to their continuing connection to land, waters, and community and to Elders past and present.

State Library of Western Australia ART0247 (Joanne Parfitt)



WHAT WOULD HAPPEN IF HOUSING AND AOD SERVICES STOPPED OPERATING AS SEPARATE SYSTEMS?



READY FOR CHANGE

A partnership between **St Patrick's Community Support Centre** and the **Drug and Alcohol Withdrawal Network (DAWN) St John of God Health.** Bringing clinical AOD treatment directly into transitional accommodation.

THE EVIDENCE?

Evidence shows that transitional housing with embedded on-site AOD services, leads to housing stability.

SQUARE PEG, ROUND HOLE

St Pat's

Community housing and specialist support services for people facing homelessness.

DAWN

Specialist clinician home-based Alcohol & Drug treatment service, tailored to individual needs.

100 Hampton Rd

Single room 'housing', residents only onsite, 'no visitors/family'

Criteria

Stable 'home; & stable 'support person' at home

St Pat's | St Patrick's Community Support Centre

ST JOHN OF GOD Health Care

CROSSROADS AOD OUTREACH & DJENABIDET KALLEEP

Djenabidet Kalleep
FOOTPATH HOME



Recovery is **non-linear** ✔

Collaborative relationships with **Homeless Healthcare GP onsite & DAWN** ✔

We still had some work to do…

- Build connection, trust and consistency
- Make this space feel like a home
- Becoming the ‘stable support person’

WE NEEDED TO SHOW UP

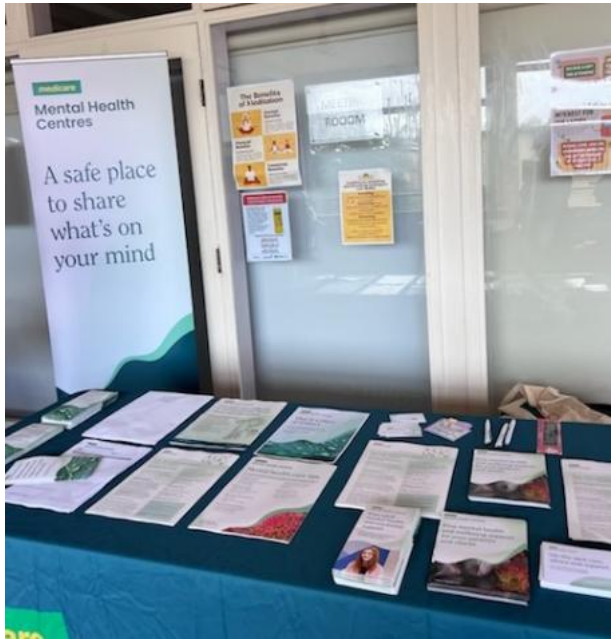
BRING THE MOUNTAIN TO THE PEOPLE

Weekly Pop-Up Hub
A consistent space to **connect, build trust and feel safe**

Home vs Housed
Supporting people to feel **home, not housed**

Multidisciplinary Team
AOD • Mental Health • First Nations • Lived Experience • Peer • Clinical • Volunteers









GROWING THE READY FOR CHANGE POP-UP-HUB

- WAAC
- HUMDRUM
- Holyoake
- NA First Nations
- Wungening
- Homeless Health Care
- Encompass
- Thread Together
- Medicare Mental Health
- Port Community Church
- Yoga by Suda
- Department of Housing Outreach
- Take-Home-Naloxone Program



"Something good is happening here, how can we help, we want to be a part of this"

EVOLUTION THROUGH CO-DESIGN

Residents identified a need for focused groups:

- **Ongoing connection, belonging & relational healing**
- Cultural spaces for men's and women's business
- Safe spaces
- **Therapeutic and AOD group work**
- Connecting to broader community
- **SMART group work**
- **Stay connected to Ready for Change when moving to other housing sites**







HOLDING SPACE
Women's Wellbeing Group

SHOWING UP – A case example

The Challenge

- Izzy was referred to Ready for Change after repeated **accommodation breaches linked to AOD use behaviors, eviction was imminent.**

Early Engagement

- **Izzy connected for several weeks** with Wellbeing, Harm Reduction and DAWN workers.
- Izzy was quiet, unsure, and **felt unsafe** in this new environment.
- During intake, Izzy **shutdown when asked if they felt comfortable with the BAC breathalyser for a baseline** and **became exhausted by the assessment process.**

Understanding Needs

- Izzy's trauma history, homelessness stress, and difficulties with self-care increased their vulnerability.
- They wanted support with food, connection, stable housing and **to feel safe.**
- **Opioid use helped them cope but also contributed to tenancy risks.**
- **After the formal intake assessment Izzy disengaged for two weeks**

SHOWING UP – A case example

A Turning Point

- **“I love opioids.”** When Izzy reconnected, they clearly expressed they did not want to stop using.
- The team's focus was on **understanding the role opioids played and exploring what meaningful change looked like for Izzy.**
- What did **safety** look like for Izzy? **Harm reduction strategies** to prevent standover for drugs and manage use, **liaising with GP & pharmacy.**

The Response

- Consistent connection, validation, and relational safety from **Ready for Change** and **Yarn & Move**.
- Izzy’s focus areas: wellbeing, nutritious meals, exercise, dependable support, future housing options, **feeling safe and managing use.**
- Key to supporting Izzy, was linking with **AOD counselling** to explore patterns of use & **Yarn & Move** groups supporting one-to-one work**.**

SHOWING UP – A case example

The Outcome

- Izzy showed **no further AOD-related behaviours of concern** and received **no additional breaches.**
- They **engaged weekly**, grew in confidence, and were valued by peers.
- Izzy secured suitable accommodation and **chose to move on independently**.
- The positive mutual regard in worker client relationships were highlighted when Izzy contacted the team to **share thanks and an update on their new home and plans.**

Key Learning

Meaningful change didn't require Izzy to stop loving opioids. It required meeting them where they were, understanding the function of their substance use, and providing relational safety and stability.

This supported autonomous decisions, reduced use, sustained behaviour change, and a stable tenancy.


LISTENING IN, WE SEE YOU

INTAKE ASSESSMENT IN UNIQUE SETTINGS

What does ‘good’ look like?

What Izzy taught us - *Be adaptive. Explain the process. Slow down. Listen.*

Allow the story to unfold at its own pace, building a fuller picture of needs through **time, trust and connection**

MEASURING SUCCESS: NUMBER OR NARRATIVE?

"You actually get it"
Feeling understood

"See you next week!"
Ongoing support

"You keep showing up!"
Trust & connection

"This is the best part of my week"
Belonging & engagement

"Thank you, you guys are all great, really, thank you"
Feeling valued & supported

We measure success through building **trusting relationships and connection.**

Through small change, sustained change, readiness to change - or simply thinking about change.

We see success when flexible accommodation options keep people anchored during treatment – stability that supports progress.

At **Ready for Change**, we measure success in the freedom people have to **stay curious about treatment** – to ask again, change their mind, to keep their assessment open, flexible, theirs to build, **to grow, not reset.**



Mindfulness



Shared Meals



Skills



Mind, body, spirit



Intake Assessment





AOD Counselling

WE'RE NOT GOING ANYWHERE

Ready For Change demonstrates that an integrated treatment-in-housing model *does* work and can prevent recurring homelessness.

When treatment is delivered within transitional housing, people are *more likely* to engage, remain connected, and sustain change.

Housing First and Harm Minimisation principles *must* grow together, to meet the realities of people who live in transitional housing, who have complex AOD needs.

Ready for Change is here, it works, and it's ready to scale. Let's build housing systems that 'hold' people, not exclude them.