Homelessness
in Central Victoria

The Central Victoria sub-region within the Murray PHN catchment covers six LGA areas and has the greatest proportion of the catchment population, with a total population of approximately 250,000 people. Close to half this sub-region's population live in and around the regional city of Bendigo, with many other towns and rural communities spread across the area from the Macedon Ranges in the south, to Gannawarra and Campaspe LGAs in the north along the Murray River.

Table 1: People who are experiencing homelessness or marginally housed by LGA in the Central Victoria sub-region[1]

Rank	LGA (EN)	Count			Rates per 1000		
		Homeless	Marginally housed	Total	Homeless	Marginally housed	Total
1	Greater Bendigo	562	246	**808**	5	2	**7**
2	Loddon	21	29	**50**	3	4	**6**
3	Campaspe	118	122	**240**	3	3	**6**
4	Gannawarra	22	26	**48**	2	2	**5**
5	Mount Alexander	42	27	**69**	2	1	**3**
6	Macedon Ranges	86	48	**134**	2	1	**3**
Total		851	498	**1349**	3	2	**5**

*Murray PHN sub-region totals calculated using LGA level data. LGAs ranked by rate of total homelessness and marginally housed (count).

Table 2: SHS clients by LGA across the Central Victoria sub- region[2]

Rank	LGA	Client count				Rate per 1000 people			
		Homeless	At risk	Not stated	Total	Homeless	At risk	Not stated	Total
1	Gannawarra	53	136	52	**241**	5	13	5	**23**
2	Campaspe	364	410	63	**837**	9	11	2	**22**
3	Greater Bendigo	917	1406	144	**2467**	8	12	1	**20**
4	Mount Alexander	95	297	5	**397**	5	15	0	**20**
5	Loddon	40	43	0	**83**	5	6	0	**11**
6	Macedon Ranges	94	164	5	**263**	2	3	0	**5**
Total		1563	2456	269	**4288**	6	10	1	**17**

*Murray PHN sub-region totals calculated using LGA level data. LGAs ranked by rate of total SHS clients (client count).

In the Central Victoria sub-region, nine per cent of all people recorded as experiencing homelessness in the 2021 ABS Census identified as Aboriginal and/or Torres Strait Islander people. This is slightly lower than the catchment (10 per cent), but higher than the state (four per cent).

The homelessness rate for people who identified as Aboriginal and/or Torres Strait Islander was 15 per 1000 people in the Central Victoria sub-region. This is slightly higher than the rate for the Murray PHN catchment (14 per 1000), but slightly lower than the state (17).

Figure 1: Trend of SHS client count for the Central Victoria sub-region by LGA - July 2014 to June 2023[3]
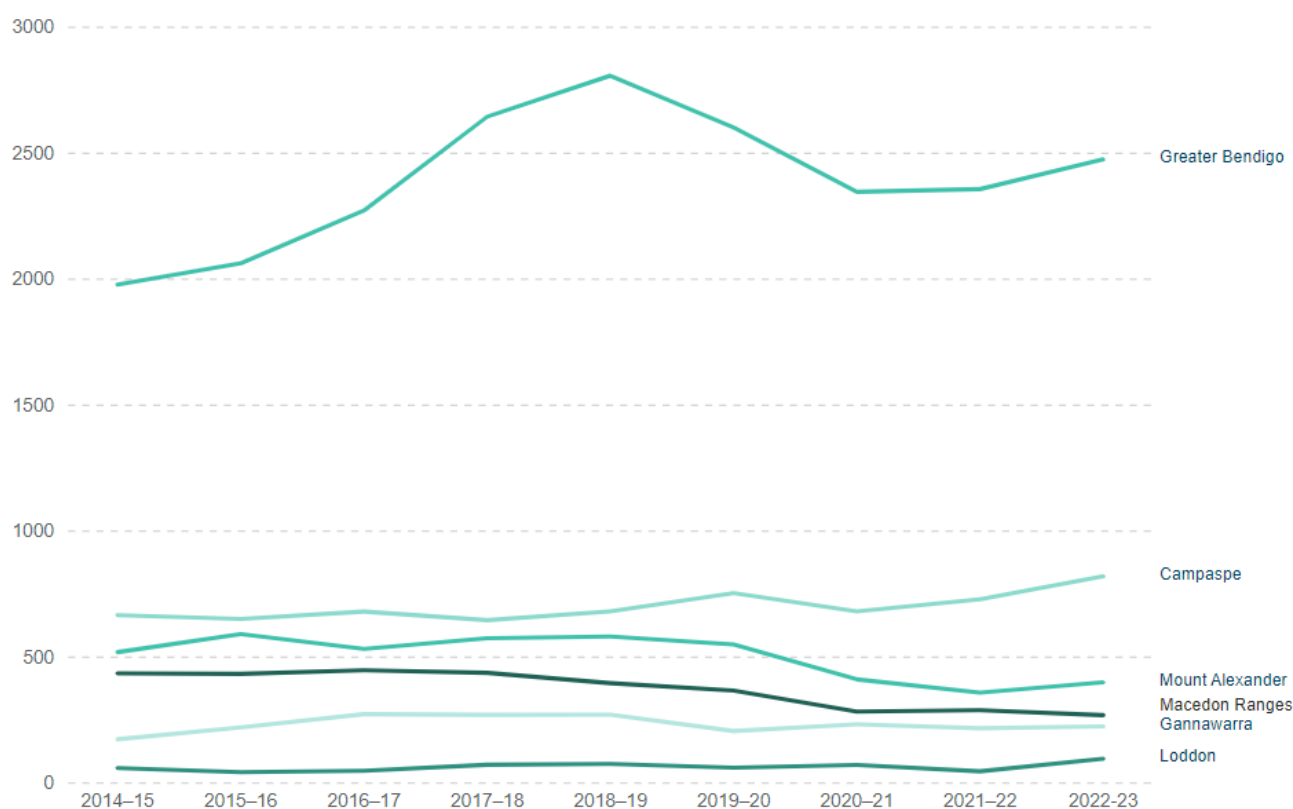
Table 3: People who are experiencing homelessness or marginally housed and have long-term health conditions in the Central Victoria sub-region (by count)[4]

	Campaspe	Gannawarra	Bendigo	Loddon	Macedon Ranges	Mt Alexander	Total
Arthritis	22	15	40	11	12	11	**111**
Asthma	17	8	69	10	15	4	**123**
Cancer (including remission)	10	0	7	3	9	0	**29**
Dementia (including Alzheimer's)	0	0	0	0	4	0	**4**
Diabetes (excluding gestational diabetes)	16	3	25	8	5	0	**57**
Heart disease (including heart attack or angina)	5	0	12	3	6	3	**29**
Kidney disease	4	0	9	0	4	0	**17**
Lung condition (including COPD or emphysema)	4	0	4	3	0	0	**11**
Mental health condition (including depression or anxiety)	33	11	113	19	26	18	**220**
Stroke	4	4	3	0	5	0	**16**
Any other long-term health condition(s)	18	9	61	10	16	10	**124**
No long-term health condition(s)	134	23	427	10	76	29	**699**
Not stated	27	0	171	5	16	13	**232**

*Murray PHN region totals calculated using LGA level data

Table 4: People who are experiencing homelessness or marginally housed and have long-term health conditions in the Central Victoria sub-region

(per 1000 people) [1]

	Campaspe	Gannawarra	Greater Bendigo	Loddon	Macedon Ranges	Mount Alexander	Total
Arthritis	92	313	50	220	90	159	**82**
Asthma	71	167	85	200	112	58	**91**
Cancer (including remission)	42	0	9	60	67	0	**21**
Dementia (including Alzheimer's)	0	0	0	0	30	0	**3**
Diabetes (excluding gestational diabetes)	67	63	31	160	37	0	**42**
Heart disease (including heart attack or angina)	21	0	15	60	45	43	**21**
Kidney disease	17	0	11	0	30	0	**13**
Lung condition (including COPD or emphysema)	17	0	5	60	0	0	**8**
Mental health condition (including depression or anxiety)	138	229	140	380	194	261	**163**
Stroke	17	83	4	0	37	0	**12**
Any other long-term health condition(s)	75	188	75	200	119	145	**92**
No long-term health condition(s)	558	479	528	200	567	420	**518**
Not stated	113	0	212	100	119	188	**172**

*Murray PHN sub-region totals calculated using LGA level data

Key findings from stakeholder consultations in the Central Victoria region

Strengths

There are two ACCHOs providing effective and Culturally Safe primary care in the Central Victoria sub-region: Bendigo and District Aboriginal Co-operative, located in Bendigo (Dja Dja Wurrung Country), and Njernda Aboriginal Corporation, based in Echuca (Yorta Yorta Country) (refer to the First Nations population health series report).

Stakeholders highlighted several strengths in the Central Victoria sub-region. Bendigo Community Health Services (BCHS) was noted as an example of a service that effectively supports various community needs, including women's health, alcohol and other drugs, allied health and paediatrics. Stakeholders noted that community health service like BCHS are often highly accessible and visible.

It was reported that BCHS is engaging people who are experiencing homelessness through outreach via libraries and other community spaces for incidental health education and direct support. BCHS was said to exemplify this approach with nurse practitioners and generalist community health nurses connecting people experiencing homelessness with health services.

Another initiative that was singled out as an exemplar is the charity MADCOW, which connects people experiencing homelessness with health and social services through in-reach activities, such as the MADCOW café (see case study page 37 of this report). Local neighbourhood houses hosting pharmacist-led health education sessions was another example of support for community health in the region.

Gaps and opportunities

A significant challenge in Central Victoria is limited GP availability, particularly in the LGAs of Greater Bendigo and Mount Alexander Shire. Stakeholders report that many clinics in the sub-region are often not able to accept new patients.

Stakeholders also reported the general lack of coordination and communication between services. It was noted that there were difficulties in accessing some government-funded programs that were publicly announced but not able to take on client referrals.

There is an opportunity to build on the success of service models such as MADCOW and BCHS to improve service coordination and access.

References

1. Source: ABS (2021). Public data: accessible to all audiences
2. Source: AIHW (2022-23). Public data: accessible to all audiences
3. Source: AIHW (2014-23). Public data: accessible to all audiences
4. Sources: ABS Census of Population and Housing 2021 Tablebuilder (LGA and LTHP by OPGP)