

Speech by Karyn Walsh at The University of Queensland's Conferring of Awards Ceremony, 16 December, 2016

Karyn Walsh was the Guest Speaker and was awarded an Honorary Doctorate of Social Work and Nursing.

I acknowledge the Traditional owners of our land the Jagera and Turrbal people on whose land we meet, Elders past, present and emerging. I acknowledge our continued commitment to work with Indigenous Elders, communities, agencies, closing the gap and reducing the overrepresentation of Indigenous children in child protection, adults in our criminal justice systems and inequality in healthcare.

Chancellor, Vice Chancellor, members of the Senate, members of staff, distinguished guests, graduates, family members, friends and colleagues.

Congratulations to each graduate for successfully completing this phase of your learning as you enter your chosen professions of social work, nursing, midwifery and dentistry. I also acknowledge those who supported you, your family and friends, who have been part of the opportunity that attending and completing your degree here at University of Queensland has been in your life.

I acknowledge those receiving post graduate qualifications from PhDs and Masters across the disciplines of Counselling, Nursing, Mental Health Nursing and Social Work studies.

To the University of Queensland, Chancellor, Vice Chancellor, Member of the Senate and staff, I acknowledge your commitment and contribution to higher education, research and excellence across the many professions and disciplines that contribute to enabling us all to participate individually and collectively, locally and globally in creating the diverse world that we all share.

I am honored to be the recipient of an Honorary Doctorate of Social Work and Nursing and to be invited to be the guest speaker today.

I thank you for acknowledging through my work the many pathways to learning and knowledge. There is nothing that I have achieved that has been my work alone. I have always had the privilege to work with others who have skills, knowledge and a desire to make a difference collectively.

I would not be standing here today if it was not for the wonderful opportunities that I have had through the vision 25 years ago and the continuing commitment of the members of St Mary's faith community who passionately believe in pooling knowledge and resources to ensure that the most vulnerable in the community have access to opportunities, resources and services not from a position of charity but from a position of justice and a belief that all

lives have equal value regardless of age, gender, sexual orientation, culture, disability, economic status or geographical location.

I acknowledge my family and friends, my colleagues from Micah Projects who are here today and the many professionals whether as Members of Parliament, leaders in public services, non-government organisations and academia who have advised, inspired, listened and worked collaboratively to create new opportunities and services, new laws and policies, to support vulnerable people in our community. These same people work to ensure there remains a safety net so that any of us faced with adversity can access knowledge, support and professional services without stigma that enable us to deal with the challenges we can find ourselves faced with unexpectedly.

Our journey in seeking to end homelessness in Brisbane has shown us that every person has a unique life journey. We have met people on the streets who have been successful as artists, community leaders, sportspersons and professionals. Their success has been interrupted by traumatic events, the onset of mental illness, loss of connection and financial insecurity, sometimes accompanied by addictions such as gambling or drugs and alcohol, often to cope with underlying trauma and social isolation.

Alternatively, we meet and engage with people every day who have never had opportunity, who have been trapped in intergenerational poverty and trauma often because of inadequate policies, lack of accountability and the misuse of power by institutions in our society that are created to protect and care but have failed. The challenges we continue to face are through improving our policy, research and practice so that we can do better at breaking the cycles that trap people in poverty, trauma and social isolation.

To do this we to work together - across disciplines and institutions. We must constantly advocate as we ask people what they need, listen to and witness the reality of their lives so that we can take informed action to ensure fairness and equity in how we use community resources.

Over the years I have been influenced by the professions of nursing and social work, both of which have contributed the skills and knowledge I have needed, each in a different way.

Nursing reinforced and taught me not to take life for granted. It taught me how to witness and observe, to engage in the challenges of being present to others who were reliant on care and the importance of adequate healthcare that is given without discrimination or judgment. I learnt the value of checklists, teamwork and creating systems of care specific to an individual's needs.

My exposure to social work came through my early years of doing youth work where training and educational opportunities were provided through the Social Work Department here at the University of Queensland. It gave me new insights into going beyond the personal experience of an individual to understanding the structural issues in our society that impact on who we become. I learned more about the relationship between our political system and how we create social and healthcare policy. I gained a greater

understanding into the impact of our economy on community and vice versa - the impact of inequality on our economy.

However, our formal skills are also underpinned by other ways of learning and knowing that we need to bring to the conversation, reflections and practice. We know that our professional lives are shaped by our personal experiences - especially our experiences of adversity - but we cannot assume that therefore we know what others need and want. We have to ground our practice in asking people, making sure we listen and then take action. In taking action we may need the input of the knowledge and skills of other professions. We need - as practitioners and advocates - to be informed by diverse experiences, opinions and expertise if we are going to be able to create change on the scale we need to, the extent on which inequality, poverty and trauma is impacting the lives of many Australians.

In our work to end homelessness in Brisbane we were confronted by the growth of the number of people on our streets and by the fact that homelessness occurs across all age groups - from birth to death. We were confronted by the extent of trauma, the number of children living in poverty and the numbers of people that were dying. Our Board and supporters had the vision to support us develop relationships internationally, in countries where homelessness was a much greater a social problem. We wanted to learn and adapt these learnings to Brisbane in an effort to turn the tide of growing numbers of people on our streets; people including families, women and children escaping domestic violence, and single adults - many of whom had been homeless since childhood. We also witnessed the beginning of economic prosperity and the beginning of gentrification and high density units in Brisbane.

We understood the need to do things differently so we set about asking people what they wanted, submitting reports to government, engaging in the debates and participating in international conferences. We learned that we needed to change our approach to putting into practice and advocating for a housing first approach. We recognised that we couldn't do this alone. We needed the support of governments, researchers, citizens and partnering organisations.

Initially, as a group of agencies comprising Police, outreach workers and Mater Health, we responded to a challenge from Rosanne Haggerty, CEO of Community Solutions New York, and set a goal to house the 50 most vulnerable persons. Rosanne and her team equipped us with the methodology to implement the 50 Lives 50 Homes Campaign. This campaign focused on identifying those at risk of dying, and or with multiple health issues and who had been homeless for long periods of time. We wanted to act quickly on first time homelessness to prevent people getting caught in the system.

We achieved our goal of 50 people and exceeded it to house over 250 people in three years and to reduce street homelessness in Brisbane by 33 per cent. This was the result of political leadership, investment in services and an evidence based practice that focused on the integration of housing, healthcare and community services. New affordable housing was built, a new supportive housing initiative was funded, assertive outreach services were funded to operate 7 days a week, 20 hours a day - and we began to integrate healthcare.

In 2014, we embarked on a new campaign 500 Lives 500 Homes in 3 years. This most recent campaign has focused on all population groups - families, women and children escaping domestic violence, boarding housing, emergency accommodation, people on the streets, in cars and motels. Last week, 34 agencies working together across government and non-government organisations achieved our goal of 500 households comprising of 800 adults - including 384 children.

With the evidence from these two campaigns, we accrued the data to begin to integrate healthcare funding into our programs and consider how we could address the needs of so many children. Over the last couple of years we have developed healthcare partnerships with Mater Health, St Vincent's Private Hospital, Brisbane and the Tzu Chi Buddhist Community to develop an Inclusive Healthcare Strategy. We have integrated nurses into our street outreach. Together they engage with people on the streets and undertake home visits to people transitioning from homelessness and hospitals, visiting women and children in motels who are escaping domestic violence, undertaking joint planned support with housing workers in management of chronic disease and embedded in our supportive housing team at Brisbane Common Ground.

Not only have these initiatives demonstrated better outcomes for individuals but also through our economic evaluations we have demonstrated costs savings to government with reduced presentations to Emergency Departments and hospitalisations. One example was for the investment of \$503,000 into assertive street outreach and home visits to vulnerable adults. A cost offset of \$6.95 million was made to hospitals, freeing up their capacity to increase their flow through.

On a practical note it has been great to witness the change in people's lives when housed, accessing healthcare and for the dentists amongst you, one of the most pressing issues for people was to access dental care - often resulting in new teeth.

The data and evidence is clear. The cost savings resulting from investment in housing and integrating healthcare in addressing social issues has merit. However, there are challenges that we still need to meet.

The data tells us clearly - as does our experience - that we have to do better at addressing child poverty and increasing access for children and their families to the specialist support and services they need. This is in addition to the critical need to access affordable housing, employment, safety and the management of risks of violence in their lives. We have to invest in a much larger scale to end homelessness and its consequences for single adults.

I have had the wonderful opportunity over the past 23 years to work alongside others who believe that in our professional roles and as citizens we have to not simply respond to injustice in our community but to also create justice. That despite the extent of social problems, there are opportunities to create change one person, one family, one child at time. From there as we learn, gain the evidence and determine what works, we can increase in scale to offer change to population groups and not just individuals, to create

better outcomes for people individually and for society generally. The evidence tells us that in doing so, we all benefit. It is better for our citizens, our community and our economy to invest in inclusion and not exclusion.

Graduates, as you each begin your professional lives, what you have learned here will be not just the beginning but will be the foundation of your contribution to our community. Whether you find yourselves working directly with disadvantaged people or not you will have many opportunities to ask people, listen to them and take appropriate action to enable their access to services and ensure that their rights and entitlements are upheld.

Adversity comes to all of us in different ways, regardless of class, gender, race, age or ability, and in your professions you will encounter the consequences and impact of adversity in the lives of others. You will also encounter the people who have never had opportunity, who do not and cannot on their own access opportunity, resources and services.

Your own experiences of adversity can be a source of strength and insight. They will help you empathise with the experiences and reality of the lives of others, to grow as you witness their challenges and opportunity and complement your intellectual knowledge and skills.

In whatever capacity you work, you could make a contribution to change that which we don't do well.

As you see and witness inequality, you have the opportunity to use what you witness to create change and give hope.

The future of healthcare and social work is going to be influenced by what you contribute and how you seek out and engage with others who can create change. I would like to end with a statement we created when reflecting on 20 years of our work -

Solving homelessness, domestic violence, the impacts of trauma, discrimination, institutional abuse of power and poverty is possible but requires more than the efforts of individuals doing good work. Real change comes through innovative systems that enable ordinary people, as citizens, to create the solutions and belong to a community.

Micah Projects strives to achieve a community where equality and diversity are valued. We support people to move beyond poverty, homelessness, and the impacts of trauma, violence, and isolation to realise their aspirations and dignity.

I hope you join us where you can in our efforts.

Congratulations on your achievements and once again, I thank you for recognition of our work, my role within that and for the invitation to speak today.