

Tasmanian election priorities 2024

In 2022-23 we worked with 20,000 people in Tasmania to support them with a range of challenges they are facing.

We continue to see too many people in need living precariously, unable to afford housing and other basic necessities, and inadequately supported by social and economic measures that are needed to ensure they can thrive.

Ahead of the 2024 Tasmanian election, we need leaders who will take urgent action to tend to immediate needs as well as safeguard our communities into the future. We join with other sector organisations including TasCOSS, Shelter Tas, the Mental Health Council of Tasmania and the Youth Network of Tasmania to highlight priority areas for reform.

Four priority areas that need to be addressed

1. Housing and homelessness

- Take a strong stance on reversing Tasmania's housing crisis by:
 - Making a long-term commitment to increase the supply of community and public rental housing to at least 10% of all dwellings to meet the level of need;
 - Immediately increasing the investment in social/community housing, as the original \$1.5B announced 2 years ago is inadequate to meet the supply targets in current market conditions;
 - Urgently reversing the drift of homes to short-stay accommodation; and
 - Immediately creating incentives to bring vacant homes back into the rental market.
- Increase funding for homelessness services by 20%.
- Ensure renters have access to safe, affordable, and secure homes with rights and protections that reflect renting as a long-term tenure.
- Meet the housing needs of women and children, and young people, who are currently spending the longest time waiting for support and social housing.
- Provide targeted supportive housing and other prevention approaches for young people to ensure they do not enter and remain in the spiral of homelessness.

2. The wellbeing of Tasmanian children, young people and families

- Urgent implementation of early intervention and prevention measures recommended in the *Commission of Inquiry into the Tasmanian Government's Responses to Child Sexual Abuse in Institutional Settings* report including:
 - developing and implementing a mandatory child sexual abuse prevention curriculum to be introduced in schools across the State; and

- increasing investment in community-based programs targeting prevention and early intervention for all Tasmanian families.
- Provide better support for Tasmanian community organisations working with children and families in crisis by:
 - ensuring funding and contract length/conditions are appropriate to address the complex and intersecting needs of children and families who are in crisis or at risk; and
 - developing and funding community-led local solutions co-designed and delivered by organisations with connections to and relationships with priority groups.
- Appoint a dedicated Minister for Youth in the Cabinet to focus on and prioritise issues affecting young Tasmanians aged 12-25.
- Completing and investing appropriately in Tasmania’s inaugural Youth Jobs Strategy.

3. Youth justice

- Respond to the urgent and ongoing safety concerns identified by the *Commission of Inquiry into the Tasmanian Government’s Responses to Child Sexual Abuse in Institutional Settings*, including through:
 - Immediate changes to the Youth Justice Act, including raising the age of criminal responsibility to at least 14 and the age of detention to at least 16, reducing the number of children on remand; and
 - A focus on prevention and early intervention responses to youth justice.

4. Mental health and wellbeing

- Prioritise the mental health and wellbeing of all Tasmanians through a fully integrated service system including:
 - Focussing on evidence-based prevention and early intervention, whether early in life or in the progress of illness, to avoid the need for presentation at emergency departments and lengthy hospital stays;
 - Expansion of the Mental Health Emergency Response Service;
 - Provision of affordable and accessible mental health care in the least restrictive and most flexible environment that best meets the person’s individual needs, including at home, in walk-in clinics and in community facilities as an alternative to hospital-based services; and
 - Commitment to the ongoing work in development and implementation of the Central Intake and Referral Service (CIRS).