

ZERO News

EDITION 5

A regional update from the Sunshine Coast & Wide Bay Advance to Zero Alliance

SUNSHINE COAST
ZERO
ENDING HOMELESSNESS IN OUR REGION

WIDE BAY
ZERO
ENDING HOMELESSNESS IN OUR REGION

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June 2026 edition 5, written by the Sunshine Coast and Wide Bay Zero Team

Dear Zero Community Members, Partners, and Future Allies,

Welcome to the fifth edition of ZERO NEWS, a quarterly newsletter sharing collective efforts to end homelessness across the Sunshine Coast and Wide Bay.

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Sunshine Coast and Wide Bay Zero is supported by
Country to Coast Queensland through the PHN program.

SUNSHINE COAST ZERO

Progress

Members

Organisations who contribute to the AtoZ Database.



Collaborators

Organisations who participate in our campaign activities (eg. service coordination meetings, strategy working groups) but do not access data directly from the AtoZ Database or complete AHVTT's.



WHAT THE DATA *Shows*

June 2026

SERVICE COORDINATION

Sunshine Coast

(Sep 2025 – Jun 2026)

52

people discussed on the
rough sleeping service
coordination By Name List

180

Coordinated Health
and Housing actions
generated

Gympie

(Oct 2025 – Jun 2026)

40

people discussed on the
rough sleeping service
coordination By Name List

164

Coordinated Health
and Housing actions
generated



Housing

History of housing and homelessness.



Social & Daily Needs

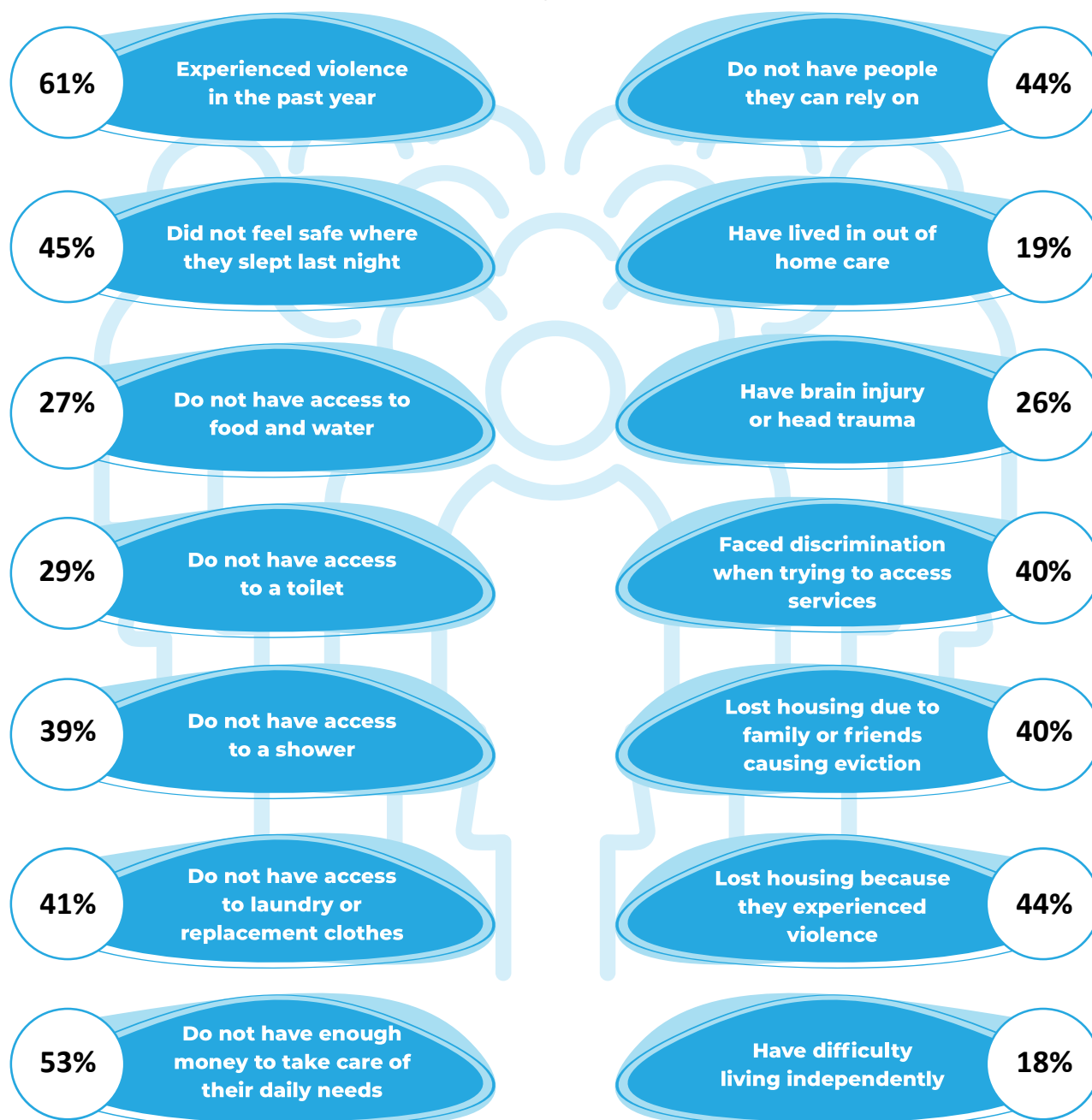
Access to hygiene facilities and services.



Wellbeing & Safety

About feeling safe or experience of violence.

964 Individuals, youth and families





ENDING HOMELESSNESS IN OUR REGION

VULNERABILITY STATEMENT

30 June 2026

Sunshine Coast Zero aims to end and prevent homelessness for individuals, youth and families, starting with those who are or have been sleeping rough- on the streets, in parks, in tents, in cars, or cycling through motels and emergency accommodation.

By **2032** we aim to achieve this goal.

964 Individuals, youth and families

The data provides valuable information on people's needs, assists in triaging the most vulnerable and advocating for system change.

964 Individuals, youth and families



Average Age:
37 years



51%



48%



1%

Indigenous

27%

Identified as



Average time
homeless

1yr 10mths

58%

of people were sleeping rough, meaning they are sleeping on the streets, in parks, or cars at the time of survey

HEALTH & WELLBEING

31%

do not seek medical help when unwell

61%

have a diagnosed
mental health
condition

52%

have a serious
ongoing health
issue

17%

have been denied
medical help
while homeless

19%

not taking
medications
as prescribed

Common diagnosed **mental** health issues

52% Anxiety disorder

40% Clinical depression

36% Post traumatic stress disorder

18% Bi-polar disorder

Common diagnosed **physical** health issues

26% Brain injury or head trauma

17% Asthma

14% Dental problems

12% Heart disease

35%

were high health service system users



14% were taken in an ambulance to hospital 5 or more times in the past year



23% went to the emergency department 5 or more times in the last year



23% were admitted to the hospital for 5 or more nights in the past year

WIDE BAY ZERO Progress

Members

Organisations who contribute to the AtoZ Database.



KINDNESS WORKS



GIN GIN
Neighbourhood Centre

Collaborators

Organisations who participate in our campaign activities (eg. service coordination meetings, strategy working groups) but do not access data directly from the AtoZ Database or complete AHVTT's.



COMMUNITY SOLUTIONS



WHAT THE DATA *Shows*

June 2026

SERVICE COORDINATION WIDE BAY

Fraser Coast

(Nov 2025 – Jun 2026)

35

people on the rough
sleeping service
coordination BNL

141

Coordinated Housing
and Health actions
generated



Housing

History of housing and homelessness.



Social & Daily Needs

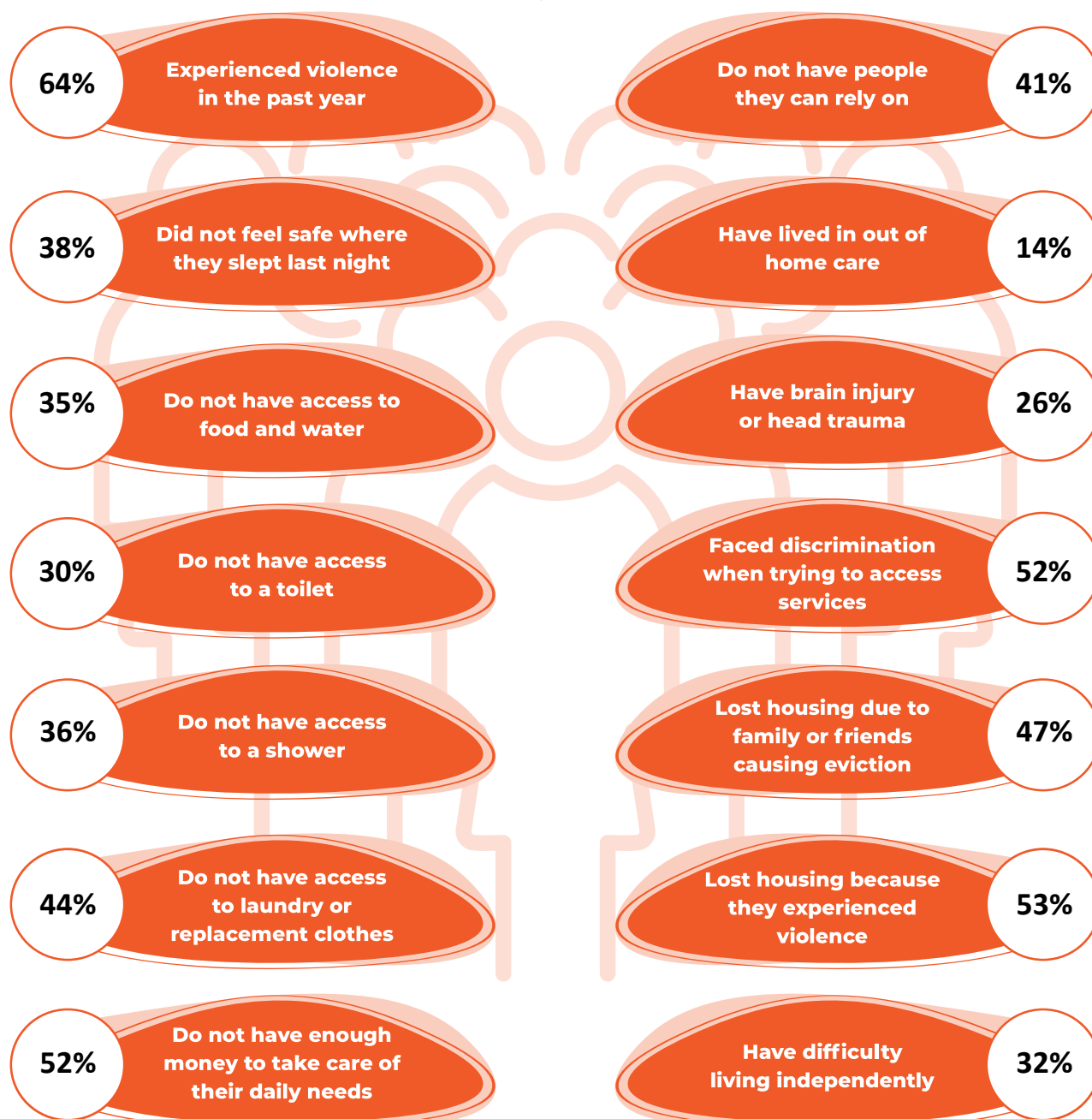
Access to hygiene facilities and services.



Wellbeing & Safety

About feeling safe or experience of violence.

108 Individuals youth and families



WIDE BAY

ZERO

ENDING HOMELESSNESS IN OUR REGION

VULNERABILITY STATEMENT

June 30 2026

Wide Bay Zero aims to end and prevent homelessness for individuals, youth and families, starting with those who are or have been sleeping rough- on the streets, in parks, in tents, in cars, or cycling through motels and emergency accommodation.

By **2032** we aim to achieve this goal.

108 Individuals, youth and families

The data provides valuable information on people's needs, assists in triaging the most vulnerable and advocating for system change.

108 Individuals, youth and families



Average Age:
44 years



55%



43%



2%

Indigenous

32%

Identified as



Average time
homeless

3yrs 11mths

73%

of people were sleeping rough, meaning they are sleeping on the streets, in parks, or cars at the time of survey

HEALTH & WELLBEING

46%

do not seek medical help when unwell

70%

have a diagnosed
mental health
condition

70%

have a serious
ongoing health
issue

23%

have been denied
medical help
while homeless

27%

not taking
medications
as prescribed

Common diagnosed **mental** health issues

43% Anxiety disorder

39% Clinical depression

25% Post-traumatic stress disorder

16% Bi-polar disorder

Common diagnosed **physical** health issues

28% Dental problems

26% Brain injury or head trauma

10% Cancer

10% Foot/skin infections

49%

were high health service system users



26% were taken in an ambulance to hospital 5 or more times in the past year



35% went to the emergency department 5 or more times in the last year



32% were admitted to the hospital for 5 or more nights in the past year

SPOTLIGHT

On Gympie



The Gympie Mobile Health Service was a 7-week project funded by CCQ demonstrating the need and success of delivering primary health care alongside homelessness outreach services.

Staffed by nurse practitioners, registered nurses, paramedic, mental health clinician, alcohol and other

drug worker, peer worker and housing and homelessness outreach workers, the service delivered 150 hours of mobile primary healthcare two days a week over a 7-week period. During this time the service supported 29 people through 57 occasions of care and delivered 139 health occasions of service.

A notable feature of the Gympie response was the seven-week delivery period, which enabled trust-based engagement and continuity of care. Nearly half of all clients accessed the service on multiple occasions, allowing clinicians to provide follow-up treatment, monitor emerging health issues and strengthen connections into mainstream health services.

The response highlighted substantial unmet health need and demonstrated that assertive, trauma-informed outreach can build trust and enable timely care for people who may not otherwise access services. The multidisciplinary approach improved engagement and effectiveness by addressing intertwined health and housing needs, and strong pre-existing partnerships enabled rapid mobilisation and responsive service delivery.



GYMPIE MOBILE HEALTH SERVICE

Temporary primary care disaster response service

FREE mobile nurse and mental health care for people experiencing homelessness



BUILDING BRIDGES TO BETTER CARE:

A new model of care for supporting people sleeping rough



A report from Gympie Women's Health Centre

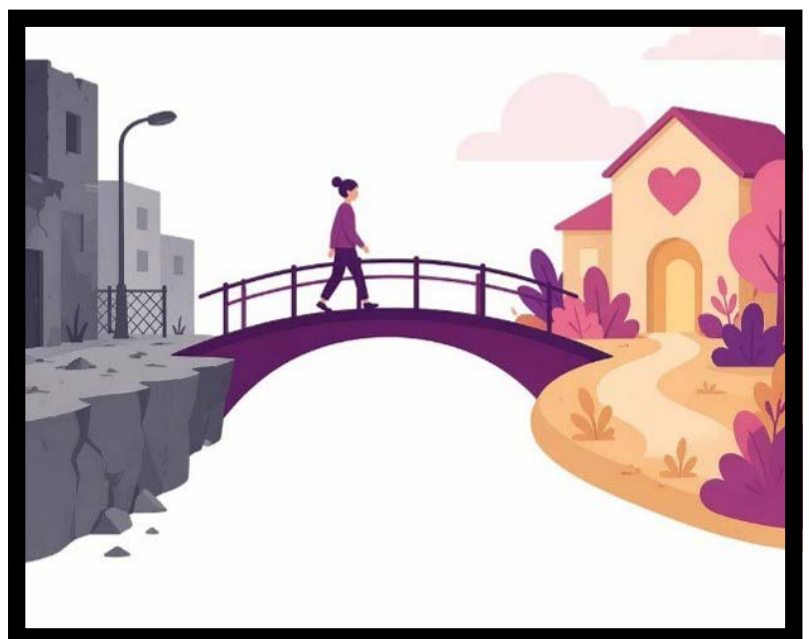
Over the past six months, Gympie Women's Health Centre has had the privilege of partnering with IFYS Outreach, Advance to Zero Sunshine Coast/Gympie, Better Connect and Country to Coast Queensland to explore a simple but important question:

How can we make health and wellbeing care more accessible for people experiencing homelessness and rough sleeping?

Rather than starting with a fixed model, we started by walking alongside people. We learnt from the expertise of the IFYS Outreach Team, listened to the experiences of people sleeping rough, and adapted our approach as we went. Every outreach day provided new insights into the barriers people face when trying to access support and what services can do differently.

What emerged from that six-month journey is **The Accessibility Bridge Model**, a practical, relationship-based approach that recognises that people experiencing homelessness should not be expected to overcome multiple barriers to access care. Instead, it is the responsibility of services to progressively reduce those barriers by adapting how, where and when support is provided.

The pilot demonstrated that when assertive outreach, trusted relationships and flexible clinical care come together, people are more likely to engage with support on their own terms. Across the pilot, 35 people were engaged through outreach, many of whom were living with complex trauma, mental health concerns, alcohol and other drug issues, and experiences of domestic and family violence. Importantly, the pilot also showed that relationship-based outreach creates meaningful pathways into ongoing health and wellbeing care. While we are incredibly encouraged by these early outcomes, we see this



BUILDING BRIDGES TO BETTER CARE:

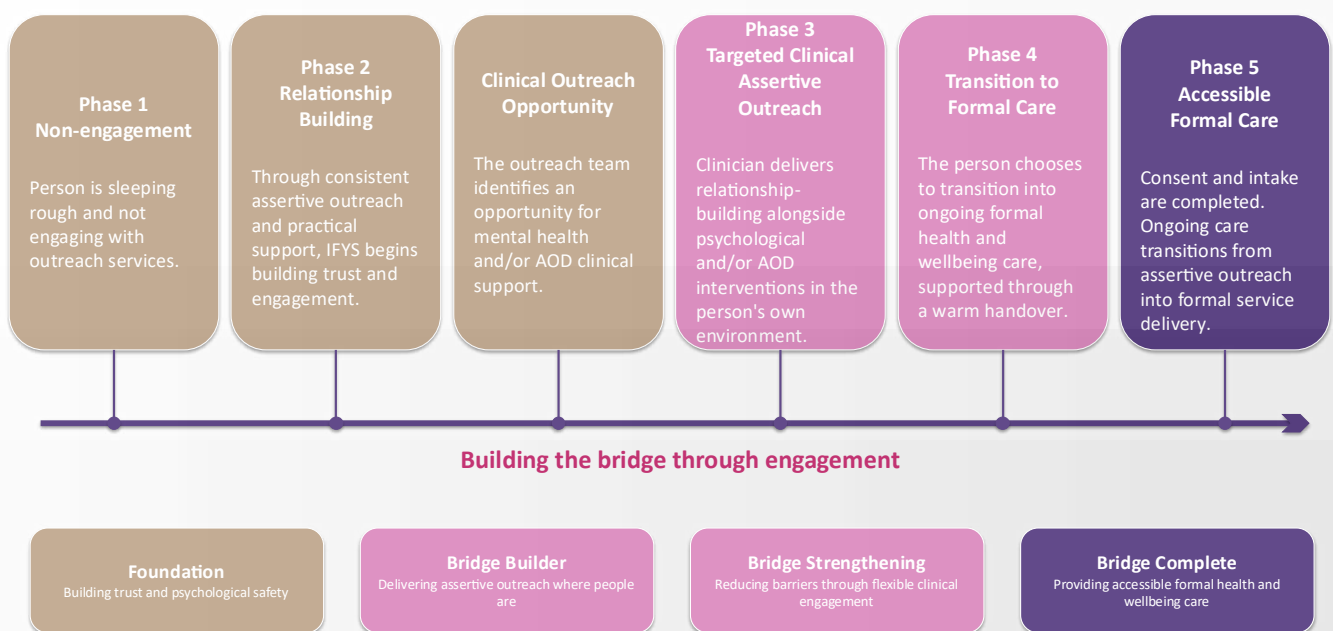
as only the beginning. Our shared ambition with our partners is to build on what we have learnt by rolling out a larger pilot. This next phase will test and refine the Accessibility Bridge Model in different communities and service settings, helping us understand what works consistently, what needs to be adapted locally, and how the model can continue to improve outcomes for people experiencing homelessness.

At the same time, Gympie Women's Health Centre is looking inward. The pilot taught us that reducing barriers does not stop once someone agrees to engage with a service. Becoming a client can present a new set of challenges, including navigating appointments, unfamiliar environments, intake processes and other practical or psychological barriers. As a result, we are reviewing our own systems and testing ways to make our services more accessible for people transitioning from outreach into ongoing care. We believe it is not enough to create pathways into services; services themselves must continue to adapt so that people can successfully remain engaged. At the heart of our work over the last six months are the people who shared their stories, time and trust with us. We want to acknowledge their resilience and willingness to engage, often in the face of significant hardship. Their experiences remind us that the challenges people who are experiencing homelessness face are not personal failings, but the result of broader system barriers that make accessing care difficult.

We're excited to continue this journey with our partners and to keep learning how we can build a more responsive, compassionate and accessible health and wellbeing system for people experiencing homelessness.

The Accessibility Bridge Model

Building accessible pathways from street-based assertive outreach to formal health and wellbeing care.



WE ARE HIRING IN

Wide Bay

IFYS has an exciting opportunity for a [Service Coordinator to join our Advance to Zero](#) Homelessness initiative in the Wide Bay region. This role is responsible for convening and facilitating multi-agency service coordination meetings, supporting individuals and families on the By-Name List (BNL) through housing pathways and wrap-around services. The Service Coordinator will work closely with health and housing sectors to support the shared mission of creating a community where homelessness is rare, brief, and non-recurring.

What's on offer?

- Fixed term part-time contract until 30th June 2027
- Minimum 52.5 hours per fortnight
- Office based in Hervey Bay, work throughout the Wide Bay Region
- Salary base \$92,286.48 per annum pro rata + superannuation –
IFYS is committed to gender pay equity
- Motor vehicle allowance \$185 per week
- Excellent salary packaging options (package up to \$15,900 per FBT year)
- Training opportunities including Therapeutic Crisis Intervention training, Preventing Child Sexual Exploitation and Sanctuary training
- Free access to the CALM Premium App & Flight Centre personal travel discounts
- Access to the Employee Assistance Program (EAP)

FEDERAL News

Read the full report here [Homes for Australia: A National Plan](#) The Australian Government has released its new Homes for Australia Plan, setting out a long-term roadmap to improve housing affordability and reduce homelessness across the country.

The Plan focuses on six key priorities:

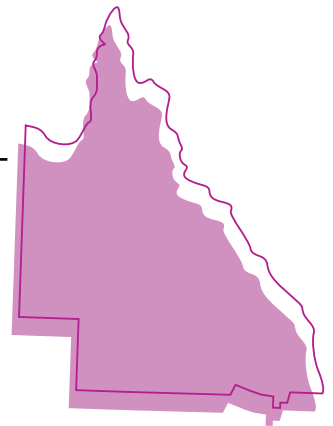
- Building more homes to improve affordability
- Supporting first home buyers into home ownership
- Making renting fairer and more affordable

FEDERAL News

- Expanding social and affordable housing
- Closing the housing gap for First Nations Australians
- Strengthening responses to homelessness, family and domestic violence, and housing crisis

The Plan highlights significant investment already underway, including increased housing construction, almost 30,000 social and affordable homes in delivery or planning, stronger renter protections, and targeted initiatives to prevent youth homelessness. It also reinforces the importance of collaboration between governments, housing providers, investors and the community sector to achieve lasting change.

STATE News



Read full report here: [Queensland Budget 2026-27 Budget overview](#)

Delivering the infrastructure for our future with a place to call Home for more Queenslanders:

- Unlocking thousands of new homes across the State under the Residential Activation Fund, doubling Round 2 with \$1 billion and continuing delivering Round 1 projects.
- Delivering the biggest ever investment into building new social and community homes with \$5.725 billion, including continuing the record 6,500 homes currently underway.
- Delivering a place to call home with more crisis accommodation and specialist homelessness services, with more than \$1 billion to be invested into specialist homelessness services and crisis accommodation in the next four years, including a \$450.1 million boost in this Budget.

Q Shelter Pre-Budget Submission

Read the Full Report here: [Pre-Budget Submission](#)

This submission urges momentum to achieve a 'healthy housing system' and structural reforms that genuinely prevent homelessness and unmet housing needs.

Q Shelter's proposals set out two broad categories of proposals, including:

- Foundational measures necessary to address current, presenting needs.

- Horizon measures that are upstream, aiming to achieve genuine prevention and structural reform, if we start now.

We retain the focus of Q Shelter's 2025-2026 Pre-Budget Submission on:

1. Embedding upstream prevention through supply and support measures: charting a path from crisis responses that address underlying contributing factors, to ensuring every Queenslanders has a safe, secure home.
2. Setting targets to end homelessness: with regular monitoring and evaluation of the system's performance in delivering on that goal.



HOMELESSNESS AS A PUBLIC HEALTH EMERGENCY

An AHURI report, [Homelessness as a Public Health Emergency: Learnings from Crisis \(2025\)](#)

Key findings from the research include:

People experiencing homelessness face significantly poorer health outcomes, including chronic disease, mental health challenges, higher rates of multimorbidity, and nearly double the mortality risk of housed populations.

The most common barriers to healthcare include:

- Lack of transport
- Difficulty accessing bulk-billing services
- Lack of fixed address or contact details
- Medication storage challenges
- Stigma and previous negative experiences with services
- Fragmented health systems and poor service coordination.

This research is evidenced locally in the Health and Homelessness Findings Report (see Health Hub Day below). Outreach health services were consistently identified as one of the most effective responses, particularly when delivered in trusted locations and alongside



SECTOR Research

homelessness services. The success of the local Gympie and Bundaberg Mobile Health Responses also demonstrates the effectiveness of this approach.

The report highlights that formal collaboration between health and homelessness services should be embedded long-term, with investment in relationship-building, data sharing, co-location, outreach and integrated care models.

References

Hartley, C., Robinson, C., Barnes, E., Batterham, D., & Mason, C. (2025). Homelessness as a public health emergency: learnings from crisis.

HEALTH HUB DAY:

Lived Experience Driving Systems Change

See Health Hub Day Findings Report here: [Link](#)

Sunshine Coast Zero partnered with Street Up, Country to Coast Queensland (CCQ), Sunshine Coast Council, The Good Shift, Nambour Community Centre, IFYS, Refocus, OneBridge and Lifecare to deliver the *Help Us Help You: Accessing Health and Wellbeing Support* Hub Day. The initiative was funded through the Sunshine Coast Council Minor Grants Program, with participating organisations contributing their time, expertise, health services and event support in-kind.

Co-designed with members of Street Up, the event ensured the voices of people with lived experience were central to identifying barriers to healthcare and opportunities for system improvement. Nineteen participants received free health checks from clinical nurses, with several requiring urgent follow-up care and referrals.

Participants identified significant barriers to accessing healthcare, including the lack of bulk-billing GPs, transport challenges, financial costs, fragmented services and experiences of stigma. One participant shared, **“Not having a postal address means I can’t get hospital**

HEALTH HUB DAY:

letters and can't access local services," while another highlighted that **"getting to and from appointments is hard and buses can be unreliable."** Others spoke about the impact of homelessness on their health, noting, **"Homelessness affects all aspects of wellbeing – everyday"** and **"Every day is hard – there is no energy, no privacy, no dignity."**

Experiences of discrimination were also raised, with participants reporting they often felt judged when accessing healthcare. One participant stated, **"Health staff assume everyone is a druggo,"** while another reflected on the importance of being listened to, saying, **"Not feeling confident that people will listen."**

Despite these challenges, participants valued the opportunity to engage in a safe and supportive environment. One resident commented, **"It was really nice to have a chat and felt like people cared about my health."** Health professionals also praised the collaborative approach, with a participating clinician describing the event as **"a great day"** and expressing interest in supporting future initiatives.

The insights gathered will now inform local Zero improvement projects, helping partners strengthen access to healthcare, improve service coordination and develop more trauma-informed, person-centred responses for people experiencing homelessness.



BRIGHT SPOTS FOR ZERO FROM *Canada*

Lived Expertise improves Systems

Full Report here: [CAEH - Bright Spot: How lived expertise improves homelessness system accountability in Niagara Region](#)



KEY TAKEAWAYS FOR COMMUNITIES

- Input from Lived experts is essential to improve homelessness response systems.
- To make this input meaningful, and improve transparency and accountability, community agencies must close the feedback loop by reporting back to lived experts.
- Lived experts should be paid a living wage for their contributions, offered support for transportation, and given access to trainings where possible.

Canada's first functional zero chronic homelessness proof point

Full Report here: [CAEH - Bright Spot: Canada's first functional zero chronic homelessness proof point](#)

After years of leading the way and showing what it takes to solve the homelessness crisis, Medicine Hat is the [first city in Canada](#) to achieve functional zero chronic homelessness.

By-Name Lists are a real-time, person-specific list of all known individuals experiencing homelessness in a community. It includes a robust set of data points that support Coordinated Access and prioritization at a household level and an understanding of homeless inflow and outflow at a system level.

This real-time actionable data allows communities to support triage to services, system performance evaluation and advocacy for the policies and resources necessary to end homelessness. **Data is critical to making targeted investments and changes to end homelessness in any community.**

Now, Medicine Hat will work to sustain functional zero and work towards absolute zero on chronic homelessness. At the same time, they will turn their attention to expanding to focus on zero for all homeless populations in their community.

"We aim to create effective systems of care and improve on those systems of care," Jaime says. "We're known as innovators and system disruptors—ever within our own system."

DOING IT TOUGH *Bundy*

DOING IT TOUGH?

Come Connect With Support Services

 **THURSDAY
13 AUGUST**
 **BUSS PARK**
 **10:00 AM – 2:00 PM**

Support Is Here. You're Not Alone.



WHAT WILL BE THERE?



**FREE
Hairdresser
by ZEST**
11:30 AM – 1:30 PM



**FREE
Sausage
Sizzle**



**Pet Care
Support**



Street Law



**Financial
Counselling**



**AOD Supports
& Resources**



**Homelessness
Support
Services**



**Youth &
General Support
Services**



**Census Support –
Every Answer
Matters**



**Information,
Advice &
Community
Services**



And Much More!

EVERYONE IS WELCOME!

NO JUDGEMENT. JUST SUPPORT.



SUPPORTING OUR COMMUNITY, TOGETHER



FREE



FRIENDLY



CONFIDENTIAL



SUPPORTIVE

GET INVOLVED IN *Local initiatives*

Homelessness Week 2026

Homelessness Week – Homelessness Australia

Monday August 3rd to Sunday August 9th 2026



UPCOMING *Events & Training*

If you wish to promote your organisations events & training, please contact Service Integration or SCHHN. SunshineCoastSII@ifys.com.au, schhn@coast2bay.com.au

Australian Alliance to End Homelessness Events and Free Codes:

2 September 2026

Online AHVTT training - code for AtoZ communities: **A2Ztraining**

➔ [Register here](#)

15 September 2026

Introduction to AtoZ (pre-Improvement CoP) - free entry to all - no code needed

➔ [Register here](#)

14 October 2026

Online AtoZ Learning Session - code for AtoZ communities: **A2ZOctober26**

➔ Save the date!

UPCOMING *Events & Training*

<i>Name & Place</i>	<i>Date, Time & Contact Details</i>
Do you want to understand Aged Care? ECCQ Info Session - CALD Aged Care Footprints & Multicultural Nambour Community Centre 2 Shearer St, Nambour	Monday 27th July 2026, 10:30AM to 11:30AM Contacts for Registration: Fiona (0466 941 124) Faval (0421 185 082)
Your Story, Your Strengths Reduce your SPER debt and improve wellbeing Caloundra Community Centre	Tuesday 14th, 21st & 28th July, 10AM to 12PM Registration essential: Your story, your strengths
Crisis Support Spaces Bundaberg Hospital Hervey Bay Hospital Maryborough Hospital Nambour Hospital Sunshine Coast University Hospital	Find out more: Crisis support spaces Queensland Health
Diploma of Leadership and Management - Monday Group QShelter Online Event	Monday 7th September 2026 to 30th August 2027 – 9AM to 4PM Registration & payment through: Eventbrite
Property and Tenancy Managers Knowledge Exchange - JULY QShelter Online Event	Tuesday 21st July, 10AM to 11AM Registration: Eventbrite
Kicking off Homelessness Week 2026: Turning Awareness into Action QShelter Online Event	Monday 3rd August 10AM – 11AM Registration: Eventbrite
Trauma Informed Practice Workshop - Central location QShelter Hotel Grand Chancellor Spring Hill, QLD	Tuesday 1st September, 9AM – 3PM Registration & payment: Eventbrite
Diploma of Leadership and Management - Tuesday Group QShelter Online Event	Tuesday 25th August 2026 to Tuesday 27th July 2027 Registration & payment through: Eventbrite
You Can't Ask That! - Housing First QShelter Online Event	Wednesday 5th August, 10AM to 11AM Registration: Eventbrite



www.scwbzero.com.au