



# Specialist homelessness services annual report 2017-18

Web report | Last updated: 13 Feb 2019 | Topic: [Homelessness services](#) | [Media release](#)

## About

The specialist homelessness services 2017-18 web report is the seventh annual report from the Specialist Homelessness Services Collection (SHSC). It describes the characteristics of clients of specialist homelessness services, the services requested, outcomes achieved, and unmet requests for services during 2017-18

Cat. no: HOU 299

- [Fact sheets](#)
- [Interactive data visualisation](#)
- [Data](#)

### Findings from this report:

- 288,800 clients were assisted by SHS agencies in 2017-18
  - 4 in 10 clients were homeless on presentation to a SHS agency
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## Overview

Visualisation not available for printing

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## Policy framework for reducing homelessness and service response

Governments across Australia fund a range of services to support people who are homeless or who are at risk of homelessness. These services are delivered by non-government organisations including agencies specialising in delivering services to specific target groups (such as young people or people experiencing domestic violence), as well as those that provide more generic services to those facing housing crises.

### Report scope

- Data about people who received assistance from specialist homelessness agencies in 2017-18, the type of assistance they received, and changes in their housing whilst receiving support and other circumstances.
- Changes in client characteristics, the services they received, and their outcomes, including over time.
- Data on people who requested services in 2017-18, but were not provided with support at that time.

In 2017-18, an Australian Defence Force (ADF) indicator was introduced into the Specialist Homelessness Services Collection (SHSC) to provide a better understanding of the extent to which veterans need and seek support from Specialist Homelessness Services (SHS) agencies. Initial results from the first year of implementation are presented. Data describing clients living with disability are presented from 2013-14 onwards.

The data in this publication are produced from the SHSC, which is conducted by the Australian Institute of Health and Welfare (AIHW). Data are provided to the AIHW by more than 1,500 homelessness agencies allowing this report to be compiled and published. The AIHW thanks the agencies and their clients for making this report possible.

People who are homeless or at risk of homelessness may also access a range of mainstream services that are available to the broader community (such as income support payments or health services). These services are not described in this report.

### The policy framework for reducing homelessness

Many Australians experience events in their life that may place them at risk of homelessness. It is estimated that just over half (51%) of lower income households experience housing affordability issues due to rental stress (paying more than 30% of their gross income on housing costs) [1].

On Census night in 2016, 116,427 Australians were homeless, up from 102,439 people in 2011. This equates to a 4.6% increase in the rate of homeless persons over 5 years, from 47.6 per 10,000 population in 2011 to 49.8 in 2016. Census homeless estimates include people in supported accommodation for the homeless, people in temporary accommodation, those 'sleeping rough' and people living in severely crowded dwellings (those that required 4 or more extra bedrooms to accommodate the residents) [2].

It is important to note the challenges associated with observing people experiencing homelessness in any data collection. The Australian Bureau of Statistics acknowledges that the homeless circumstance may mean that some people are not captured at all in datasets, nor will all those experiencing homelessness be captured in datasets of those accessing particular homelessness services. In addition, certain groups of people (including Indigenous populations, rough sleepers and those in supported accommodation) are more likely to be undercounted on Census night. Hence, homelessness data collected in the Census is an estimation, and susceptible to under/overestimation and under enumeration [2].

In the 2017-18 Budget, the Federal Government announced the establishment of a new National Housing and Homelessness Agreement (NHHA), which came into effect on 1 July 2018. This agreement reformed previous funding agreements with states and territories (the National Affordable Housing Agreement (NAHA) supported by the National Partnership Agreement on Homelessness (NPAH)). The SHSC data in the 2017-18 annual report has been collected while the former NAHA and NPAH agreements were in place. The NHHA will provide \$4.6 billion in Commonwealth funding to the states and territories over three years, including \$375 million for homelessness services, which states will be required to match. Funding for homelessness services will be ongoing and indexed for the first time to provide certainty to front line services assisting Australians who are experiencing homelessness or who are at risk of homelessness [3].

### Objective of the NHHA

The objective of the NHHA is to contribute to improving access to affordable, safe and sustainable housing across the housing spectrum, including to prevent and address homelessness, and to support social and economic participation. Several national priority cohorts have been specifically identified in the agreement and are expected to be addressed in each jurisdiction's homelessness strategy:

- women and children affected by family and domestic violence
- children and young people
- Indigenous Australians
- people experiencing repeat homelessness
- people exiting institutions and care into homelessness
- older people.

In addition, several homelessness priority policy reform areas have been identified:

- achieving better outcomes for people
- early intervention and prevention
- commitment to service program and design.

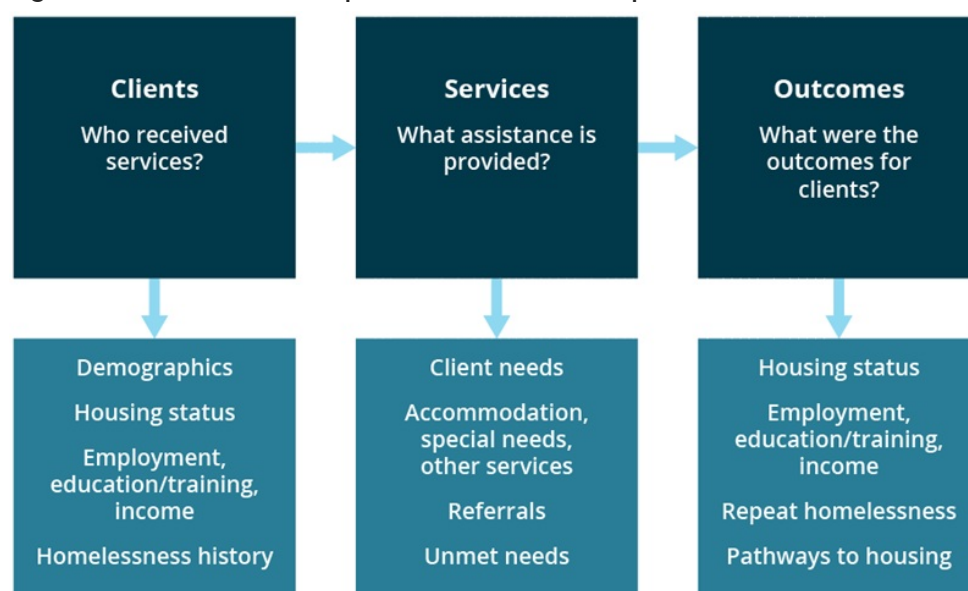
## About the Specialist Homelessness Services Collection

Homelessness agencies have supported more than 1 million clients since the collection began on 1 July 2011. The SHSC collects data from homelessness agencies funded under the NHHA (previously the NAHA and the NPAH). State and territory departments identify agencies that are expected to participate in the data collection. These agencies vary widely in terms of the services they provide and the service delivery frameworks they use. These frameworks may be determined by the state or territory funding department or developed as a response to local homelessness issues (see [What are specialist homelessness agencies?](#) for more details).

All SHSC agencies report standardised data about the clients they support each month to the AIHW, as specified in the SHS National Minimum Dataset (NMDS). Data are collected about the characteristics and circumstances of clients when they first present at an agency. Further data on assistance received and client circumstances are collected at the end of every month in which the client receives services and again when contact with the client has ceased.

Data supplied in accordance with the SHS NMDS, known as the SHSC, builds a comprehensive picture of clients, the specialist homelessness services that were provided to them and the outcomes achieved for those clients (Figure FRAMEWORK.1). SHSC data provide a measure of the service response directed to those who are experiencing housing difficulty. The data do not provide a measure of the extent of homelessness in the community, although SHSC data on emergency accommodation and supported accommodation do contribute to the profile of homelessness in Australia.

Figure FRAMEWORK.1: Conceptual framework of the Specialist Homelessness Services Collection



The data collected by agencies are based on periods of support provided to clients. These support periods vary in terms of their duration, the number of contacts between SHS workers and clients, and the reasons that support ends. Some support periods are relatively short—and are likely to have begun and ended in 2017-18—while others are much longer, many of which might have been ongoing from the previous year and/or were still ongoing at the end of 2017-18.

Certain information collected about the client (selected letters of name, date of birth and sex) is used to construct a statistical linkage key (SLK). This SLK brings together all data about each client who had multiple support periods (either within the same agency or with different agencies) during the reporting year.

Data tables from which these analyses are drawn are provided as supplementary tables to this report. All percentages given are based on valid responses reported for clients, and the extent of missing data is indicated in the supplementary tables.

Further information about the collection and information about the quality of the data obtained through the SHSC for 2017-18 is available in [Technical information](#).

## Delivery of homelessness services across Australia

Each state and territory manages their own system for the assessment, intake, referral and ongoing case management of specialist homelessness services clients. Box FRAMEWORK.1 summarises the key delivery systems operating in Australia. Although presented as three distinct models, these systems are representative of a range of approaches jurisdictions may employ to coordinate entry into specialist homelessness services. Changes implemented by jurisdictions in the delivery of services and their associated responses have the potential to impact SHSC annual data.

## Community sector funding and support

- **Assessment and intake:** managed by individual SHS providers, consistent with state or territory policies.
- **Referral:** refer to other SHS providers if clients' needs can't be met by initial SHS provider.
- Can be supported by a coordinating service.

## Central information management

- **Assessment, intake and referral:** managed at any SHS provider, via state or territory central information management tool.
- Central information management system assists in the identification of appropriate services and indicates the availability/vacancy of services at all SHS providers.

## Central intake

- **Assessment, intake and referral:** managed by one or more 'central intake' agency.
- Central intake agencies prioritise access to services and only refer clients as services and/or vacancies are available.
- Central information management tool may exist to share information between SHS providers.

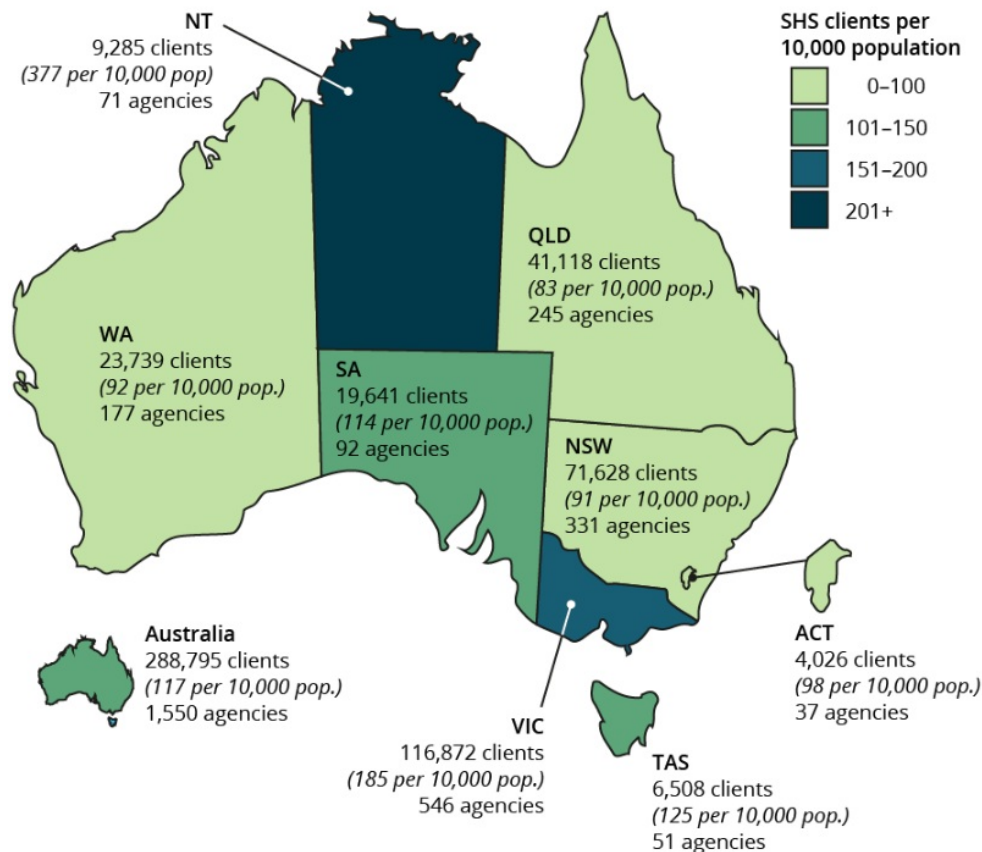
## What are specialist homelessness agencies?

A specialist homelessness agency in scope for the SHSC is an organisation that receives government funding to deliver accommodation related and personal services to people who are homeless or at risk of homelessness. While it is recognised that other organisations not directly funded by the government also provide a wide range of services to this sector, these organisations are not required to provide data to the SHSC.

SHS agencies vary considerably in size and in the types of assistance they provide. Across Australia, agencies provide services aimed at prevention and early intervention, as well as crisis and post crisis assistance to support people experiencing or at risk of homelessness. For example, some agencies focus specifically on assisting people experiencing homelessness, while others deliver a broader range of services, including youth intervention services, domestic and family violence services and housing support services to those at risk of becoming homeless. The service types an agency delivers range from basic, short-term interventions such as advice and information, meals, and shower/laundry facilities through to more specialised, time intensive services such as financial advice and counselling and professional legal services (see [Glossary](#) for a complete list of service types).

Nationally, there were 1,550 agencies that delivered specialist homelessness services to an estimated 288,795 clients during 2017-18 (Figure FRAMEWORK.2)

Figure FRAMEWORK.2: Specialist homelessness agencies and clients, by jurisdiction, 2017-18



1. Clients may access services in more than one state or territory, therefore the Australia total will be less than the sum of jurisdictions.
2. The agency count includes only those agencies that provided support periods with valid SLKs.
3. Due to improvements in the rates of agency participation and SLK validity, data are no longer weighted. The removal of weighting does not constitute a break in time series and weighted data from 2011-12 to 2016-17 are comparable with unweighted data for 2017-18. For further information please refer to the Technical notes.

Source: Specialist Homelessness Services Collection 2017-18.

Agencies range considerably in size, with some agencies assisting up to 100 clients per year and others upward of 1,500. Some agencies are represented by a larger ‘parent’ organisation while others are individual stand-alone agencies. The number of clients agencies assist (agency size) not only reflects the type and complexity of services provided, but also differing state and territory service delivery models. Agency size is also influenced by jurisdictional specific factors such as the size and geographical distribution of their population. Figure FRAMEWORK.3 illustrates the wide range in agency sizes within each jurisdiction. In 2017-18, most agencies assisted fewer than 100 clients, except New South Wales and South Australia, ranging from 65% of agencies in the Australian Capital Territory to 45% in Queensland. In New South Wales and South Australia, a higher proportion of agencies assisted between 100-199 clients than fewer than 100 clients (32% compared with 24% for New South Wales and 28% compared with 27% for South Australia). Agencies assisting a large number of clients (more than 1,500 in 2017-18) exist in all jurisdictions except the Northern Territory and Tasmania. Victoria has the most agencies of this size (4% or 24 agencies).

Figure FRAMEWORK.3: Specialist homelessness agencies, by clients assisted and state and territory, 2017-18



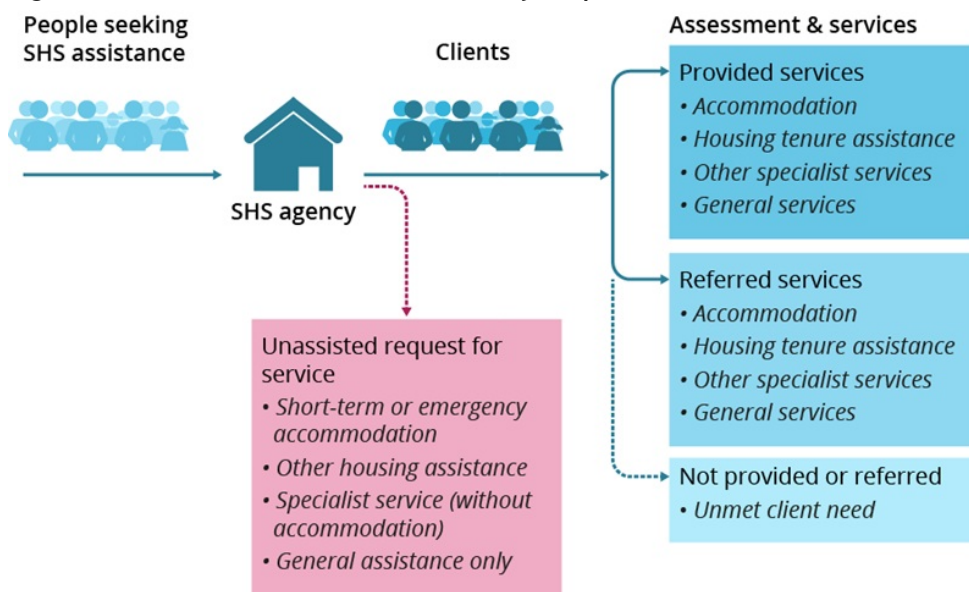
Source: Specialist Homelessness Services Collection 2017-18

### SHS agencies and their service delivery

Specialist homelessness services can either be provided to the client by the agency, or a client may be referred to another agency for a specific service (Figure FRAMEWORK.4). In some instances, a client may not receive nor be referred for a service and their need remains unmet. These unmet needs are captured to assist in determining the ability of the sector to respond to client needs.

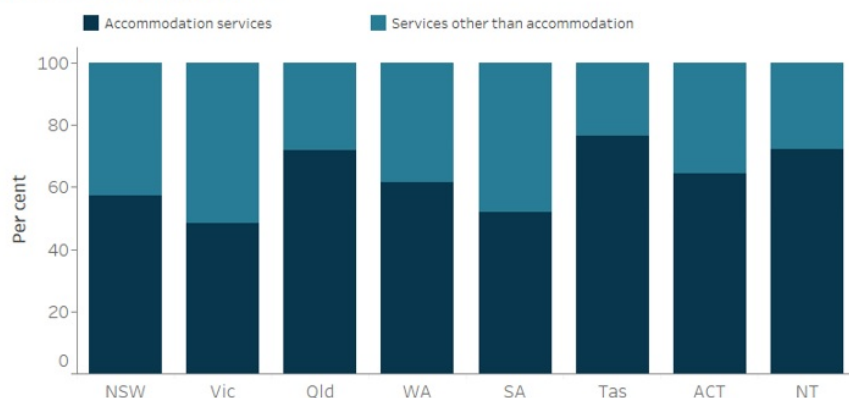
An ‘unassisted request for service’ is an instance where a person(s) who approaches an agency is unable to be provided with any assistance (see Technical information).

Figure FRAMEWORK.4: Access to and delivery of Specialist Homelessness Services



Services provided by specialist homelessness agencies in all jurisdictions can be categorised as either ‘accommodation services’ (either the direct provision of accommodation or assistance for the client to remain housed) or ‘services other than accommodation’ (Figure FRAMEWORK.5). The proportion of SHS clients receiving accommodation services varied across states and territories in 2017-18, with almost 8 in 10 clients in Tasmania (77%) and more than 7 in 10 clients in the Northern Territory (72%) and Queensland (72%) receiving these services (Figure FRAMEWORK.5). In contrast, 51% of clients in Victoria were provided services other than accommodation. This variation reflects differences in the demand for accommodation services, service delivery models, and housing options across jurisdictions.

Figure FRAMEWORK.5: Clients of Specialist Homelessness Services by service type, state and territory, 2017-18



*Notes*

1. Clients provided or referred accommodation services (short-term or emergency accommodation, medium-term/transitional housing, long-term housing, assistance to sustain tenancy or prevent tenancy failure or eviction and assistance to prevent foreclosures or for mortgage arrears) are included in the accommodation services category. These clients may have also been provided additional services other than accommodation.
2. The denominator for the proportions is the number of clients who were provided or referred any service during 2017-18.
3. Clients may access services in more than one state or territory. If they received accommodation services in any jurisdiction they will be counted as having received these services in all jurisdictions in which they received services.

Source: Specialist Homelessness Services Collection 2017-18

## References

1. Australian Bureau of Statistics (ABS) 2017a. Housing and occupancy costs, 2015-16. ABS cat no. 4130.0. Canberra: ABS.
2. ABS 2018. Census of population and housing: estimating homelessness, 2016. ABS cat no. 2049.0. Canberra: ABS.
3. Council on Federal Financial Relations. National Housing and Homelessness Agreement.



## Clients, services and outcomes

Specialist homelessness agencies provide a range of services to assist those who are experiencing homelessness or who are at risk of homelessness. These services range from immediate crisis accommodation to general support and assistance. Characteristics of all clients assisted by specialist homelessness services (SHS) in 2017-18 are described below, including their needs for assistance and the services they received, and key trends for the 5 years from 2013-14 to 2017-18.

### Key findings in 2017-18

- In 2017-18, almost 288,800 clients sought assistance from SHS agencies, equating to 117.4 clients per 10,000 population.
- Upon first presentation, most clients seeking assistance were housed but at risk of homelessness (57%); of these, most were living in private or other housing (62% or 89,000) or public or community housing at the time (24% or 34,000).
- A high proportion of clients at risk of homelessness had experienced domestic and family violence (41%).
- More than half (54%) had received SHS assistance at some point in the previous 5 years.
- Less than 1 in 3 clients (29%) received accommodation in 2017-18 and the median length of accommodation was 32 nights.
- Four in 10 clients were homeless on presentation to a SHS agency. Of these, agencies assisted about 38% into housing, most into private or other housing (about 15,500) and a further 10,500 into public or community housing.
- SHS agencies assisted more than 8 in 10 clients who were in private or other housing (84% or 55,800 clients) and public or community housing (85% or 21,400 clients) at the beginning of support to maintain their tenancy at the end of support.
- The average amount of financial assistance provided totalled \$794 per client, up from \$640 in 2016-17 (not adjusted for inflation).

### Clients: 2013-14 to 2017-18

The estimated number of clients assisted by specialised homelessness agencies increased from 254,000 in 2013-14 to 288,800 in 2017-18; an average annual increase of 3.3%. The rate of SHS clients increased from 110 clients per 10,000 population in 2013-14 to 117 clients in 2017-18 (Table CLIENTS.1).

It is important to note that Specialist Homelessness Services Collection (SHSC) data provide a measure of service response. Increases in client numbers reflect an increase in agency engagement with individuals which may be due to an increase in availability and accessibility of services or the utilisation of these services, not necessarily a change in the underlying level of homelessness in Australia.

The characteristics of clients, the main reason for seeking support, and the services provided to clients, have remained relatively stable over the past 5 years (Table CLIENTS.1). There have, however, been some notable changes:

- Clients were supported for longer in 2017-18; the median number of days a client was supported increased from 33 days in 2013-14 to 39 days in 2017-18, an average annual growth of 4.3% each year.
- More females than males presented to agencies homeless in 2017-18; the number of females presenting homeless in 2017-18 (57,000) has overtaken the number of males (52,100), up from 41,900 for females and 41,100 for males in 2013-14.
- Clients aged over 45 are increasing; between 2013-14 and 2017-18, there has been an increase each year in the proportion of clients aged over 45 years from 18% (or nearly 46,800 clients) in 2013-14 to 21% (or 59,000 clients) in 2017-18.
- Clients aged 65 and over are a growing group presenting to SHS for assistance; the number of clients aged 65 and over increased from just over 6,000 (2% of the SHS population) in 2013-14 to over 8,500 in 2017-18 (3% of the SHS population).
- Clients at risk of homelessness comprise the majority of clients approaching SHS; clients housed but at risk of homelessness (57% or 143,200 clients in 2017-18) remain the majority of clients seeking assistance from specialist homelessness services.
- Clients remaining homeless following support are declining; agencies have assisted an increased proportion of clients who began support homeless into housing. There has been a 6% decline in the proportion of these clients ending support homeless over the past 5 years, down from 68% in 2013-14.
- Housing options for SHS clients presenting homeless are changing; 5 years ago, similar numbers of these clients were housed in either public or community housing, or private or other housing at the end of support (7,100 and 8,800 respectively). In 2017-18, the number of clients in this group assisted into housing has grown 1.6 fold to 26,000. Six in 10 (or more than 15,500) were housed in private or other housing.
- The proportion of clients having achieved no case management goals at the end of support has remained steady since 2013-14 at about 6%.

**46% of SHS clients in 2017-18 were first time clients (since the collection began in 2011-12).**

**24.7 million support days were provided in 2017-18, a 1.2 million increase since 2016-17.**



	2013-14	2014-15	2015-16	2016-17	2017-18
Number of clients	254,001	255,657	279,196	288,273	288,795
Rate (per 10,000 population)	109.7	108.8	117.1	119.1	117.4
Housing situation at the beginning of the first support period (proportion (per cent) of all clients): Homeless	42	43	44	44	43
Housing situation at the beginning of the first support period (proportion (per cent) of all clients): At risk of homelessness	58	57	56	56	57
Total days of support (millions)	20.6	19.7	22.2	23.4	24.7
Length of support (median number of days)	33	33	35	37	39
Proportion receiving accommodation	34	33	31	30	29
Total nights of accommodation (millions)	7.0	6.6	7.0	6.9	6.9
Median number of nights accommodated	35	34	33	33	32
Achievement of all case management goals (per cent)	24	26	23	23	24

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan (Supplementary table CLIENTS.26). Denominator values for proportions are provided in the relevant National supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

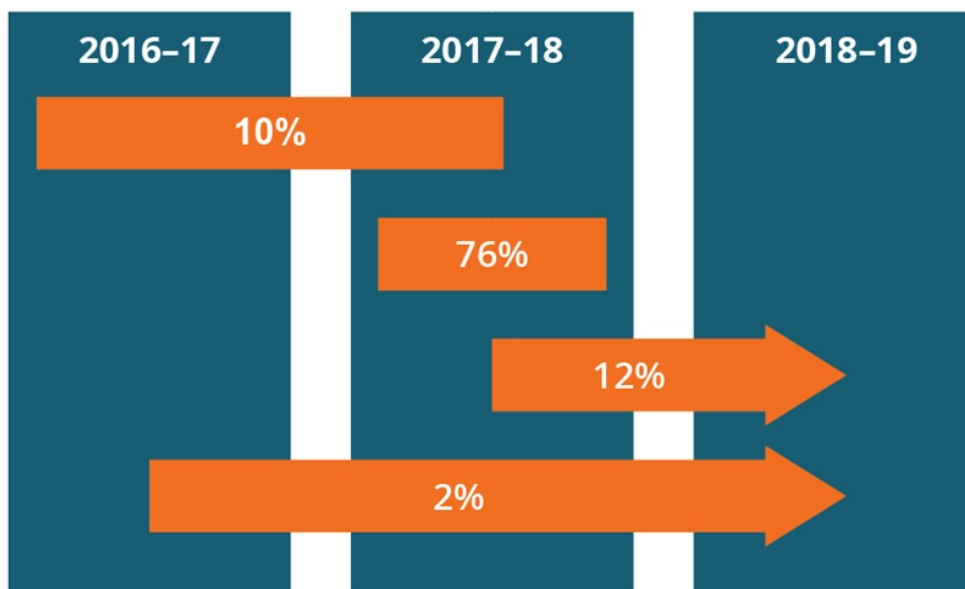
## Clients, services and outcomes in 2017-18

### Support periods

Data collected by specialist homelessness agencies are based on support periods or episodes of assistance provided to clients (see [Technical notes](#) for further information). Clients may have had more than 1 support period in 2017-18, either with the same agency at different times or with different agencies.

- In 2017-18, clients assisted by homelessness agencies had 512,700 support periods. The number of support periods has increased by an average annual growth of 4.6% each year since 2013-14 (Supplementary table CLIENTS.19 and Historical table 1).
- Around two-thirds of clients in 2017-18 had only 1 support period (66%) while 1 in 5 (19%) had 2 support periods, 7% had 3 periods and 8% had 4 or more. The average number of support periods per client is consistent with 2016-17 (1.8 support periods per client) (Supplementary table CLIENTS.18).
- The majority of support periods were opened and closed within 2017-18 (76% or under 390,000). An additional 12% of support periods opened during the year and remained open on 30 June 2018. Just 1.8% remained open throughout the 2017-18 reporting period (Figure CLIENTS.1).

Figure CLIENTS.1: Support periods, by indicative duration over the reporting period, 2017-18



Source: Specialist Homelessness Services Collection 2017-18, [National supplementary table CLIENTS.19](#).

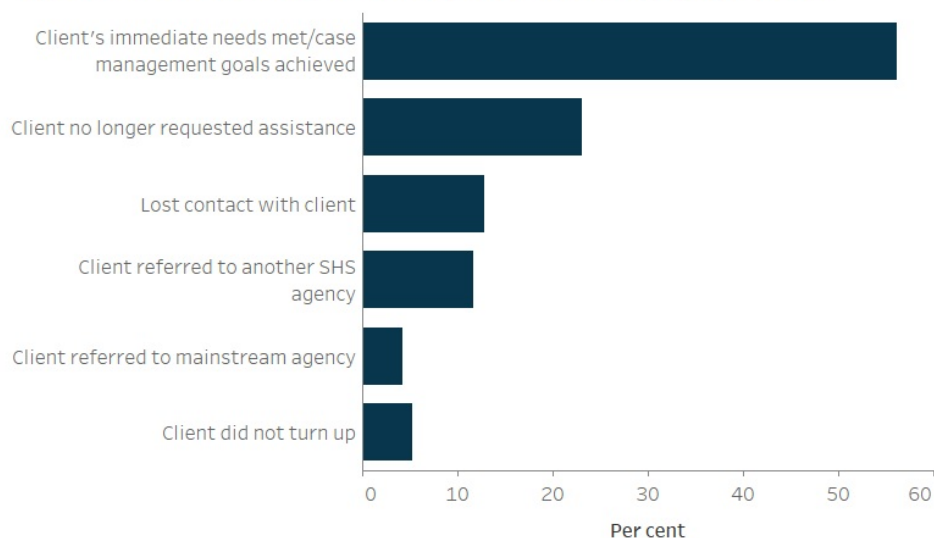
### Number of days clients received support

- In 2017-18, the median number of support days for all clients was 39, while clients were supported for an average of 84 days in total, either as consecutive days or over multiple support periods.
- In 2017-18, males (41 days) and females (39 days) received a similar length of support.
- The needs of some clients can be met relatively quickly but clients with more complex issues needed more support. Three in 10 clients (30% or about 85,100) received between 6 and 45 days of support during 2017-18, while 24% received support for up to 5 days. Fifteen per cent received over 180 days of support; the same proportion received support for 91-180 days (15%).

### Reasons that support ended

- Around half (56%) of support periods ended in 2017-18 because the client's immediate needs were met or case management goals were achieved.
- About one-quarter (23%) of support periods ended because the client no longer requested assistance; that is, a client may have decided that they no longer require assistance or they may have moved from the state/territory or region.
- A further 12% of support periods closed because the client was referred to another specialist homelessness agency and 13% closed because contact was lost with the client (Figure CLIENTS.2).

Figure CLIENTS.2: Clients by reason support period ended (top 6), 2017-18



#### Notes

1. Top 6 excludes 'Other' reason.
2. Includes clients with any closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, [National supplementary table CLIENTS.21](#).

### Characteristics of clients

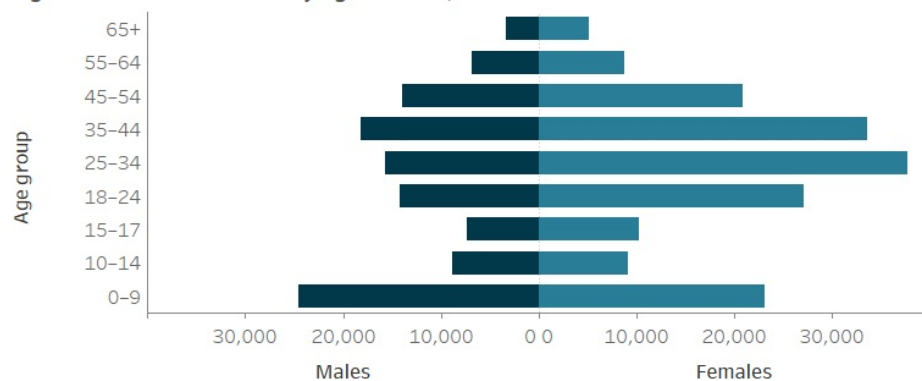
In 2017-18, specialist homelessness agencies provided assistance to an estimated 288,800 clients, equivalent to 1 in 85 people in the Australian population (Table CLIENTS.1).

#### Age and sex

Figure CLIENTS.3 illustrates the age and sex distribution of SHS clients in 2017-18:

- The majority of clients were female (61% or nearly 176,000).
- The overall rate of service use was higher for females; 1 in 71 females in the Australian population received specialist homelessness services compared with 1 in 108 males.
- Nearly 3 in 10 clients were aged under 18 (29% or over 83,000).
- 1 in 6 were children under the age of 10 (17% or more than 47,700 clients).
- Among adult clients, the largest age group was those aged 25-34, accounting for 1 in 5 clients (19%), most of whom were female.
- Adults aged 35-44 was the most common age group for males (16%) while for adult females, the most common age group was 25-34 (22%).

Figure CLIENTS.3: Clients by age and sex, 2017-18



Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.1

### Indigenous status

In 2017-18, Aboriginal and Torres Strait Islander people continued to be over-represented among SHS clients with one-quarter of clients (25% or almost 65,200) who provided information on their Indigenous status identified as being of Aboriginal and/or Torres Strait Islander origin. Nationally, this equates to 803 Indigenous clients per 10,000 Indigenous population compared with a rate of 86 for non-Indigenous clients.

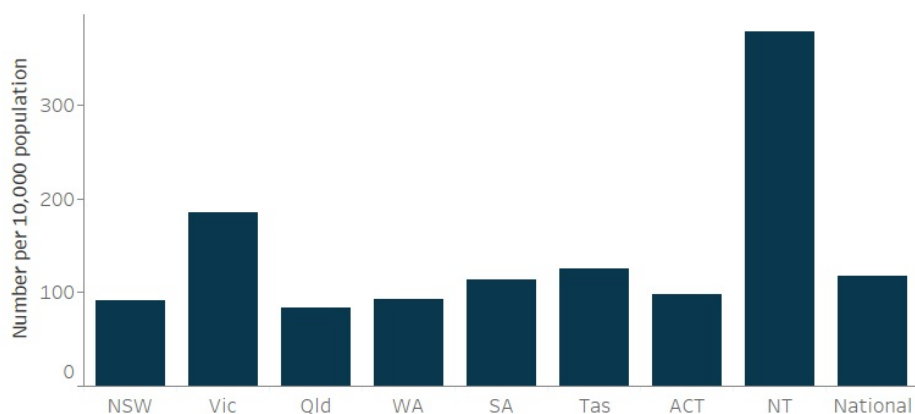
Further information about Indigenous clients can be found in [Indigenous clients](#).

### State and territory of clients

The largest number of clients accessed services in Victoria (116,900), followed by New South Wales (71,600) and Queensland (41,100) (Supplementary table CLIENTS.2).

- Overall, half of clients in 2017-18 had received services before; the proportion of returning clients varied across jurisdictions with South Australia and Tasmania reporting the highest proportion (both at 63%). New South Wales reported the lowest proportion of returning clients (51%).
- More days of support were provided during 2017-18; nationally, the total number of support days increased by more than 1.2 million days between 2016-17 and 2017-18, to over 24.6 million days in 2017-18. Victoria was responsible for the major share of the increase in support days (an increase of over 1 million days), and reported the greatest change, up 14% since the previous reporting period.
- Females had higher rates of service use than males across all states and territories; the Northern Territory had the most pronounced difference between males and females where 500 per 10,000 females received services compared with 261 per 10,000 males (Supplementary table CLIENTS.2).
- The Northern Territory had the highest rate of clients; the highest rate of SHS clients was in the Northern Territory where there were 377 clients per 10,000 population, followed by Victoria (185) and Tasmania (125) (Figure CLIENTS.4).
- New South Wales had the largest increase in the rate of clients accessing services since 2013-14, an average annual growth of 7% each year.

Figure CLIENTS.4: Client service use per 10,000 population, by state and territory, 2017–18



Note: Rates are crude rates as detailed in Technical information.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table CLIENTS.2.

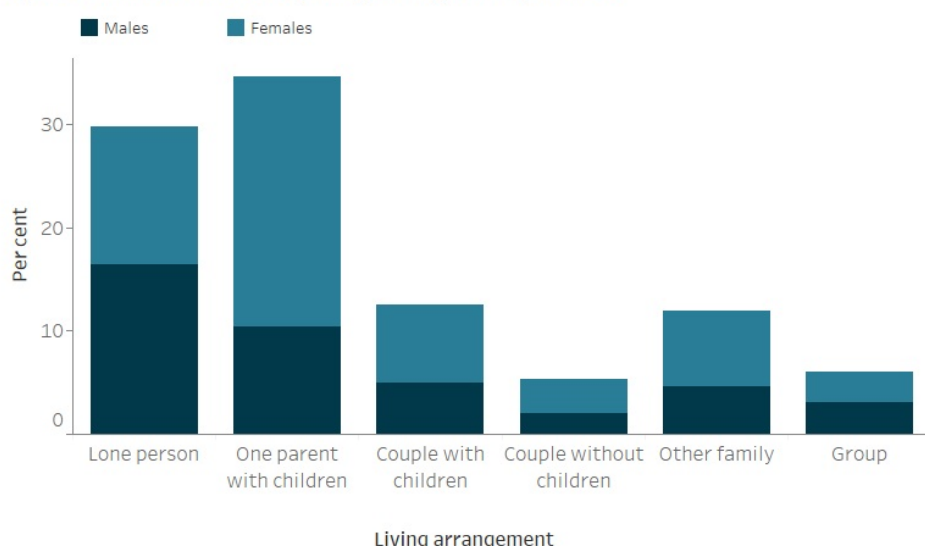
### Country of birth

- Most clients of specialist homelessness agencies were born in Australia; over 8 in 10 clients (86% or 208,500) were born in Australia (Supplementary table CLIENTS.3). This proportion is higher than the general Australian population, of whom 71% are born in Australia [2].
- Clients born overseas were most commonly from New Zealand; of those clients who reported their country of birth and were born overseas, the most common country of birth was New Zealand (2%) (Supplementary table CLIENTS.4). Over half of the clients (54%) who were born overseas had arrived in Australia prior to 2008 (Supplementary table CLIENTS.5).
- The majority of clients who were born overseas lived in *Major cities* (86% or nearly 29,800).

### Living arrangements

- More than one-third of clients were single parents; the most common living arrangement reported by clients was lone parent with 1 or more children (35% or around 89,500), followed by lone persons (30% or around 76,800) and couples with a child or children (13% or around 32,300) (Figure CLIENTS.5).
- 7 in 10 single parents were female; female clients were more likely than male clients to be living as a single parent with a child or children (70% female) while males were more likely than females to be living alone (55% male).

Figure CLIENTS.5: Clients by living arrangement, 2017–18



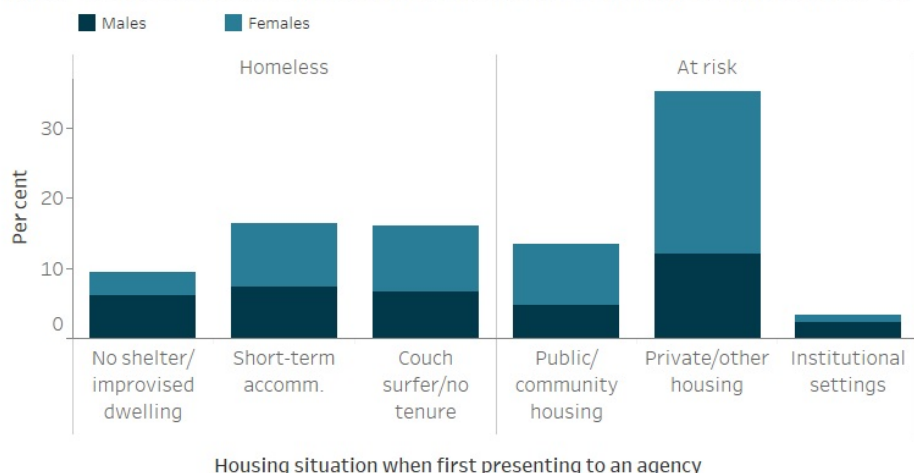
Source: Specialist Homelessness Services Collection 2017–18, National supplementary table CLIENTS.6

### Housing situation

- Almost 6 in 10 clients were at risk, rather than homeless on first presentation. Among those whose housing status was known at the beginning of their first support period in 2017-18 (87% of all clients), 43% (more than 109,200 clients) were homeless and 57% (more than 143,200 clients) were at risk of homelessness (Figure CLIENTS.6).
- Of those clients at risk of homelessness on first presentation, the most common housing situation was living in private or other housing; around 1 in 3 clients (31% or nearly 89,000) were living in private or other housing (renter, rent-free, or owner) when presenting to agencies for assistance.

- Over 1 in 5 'rough sleepers' were living in their cars; of those clients who first presented to an agency homeless and reporting no shelter/improvised dwelling (nearly 23,900 clients), 46% were sleeping in no dwelling, either on the street, in a park or out in the open and a further 22% were sleeping in a car.

Figure CLIENTS.6: Clients by housing situation at the beginning of support, 2017-18



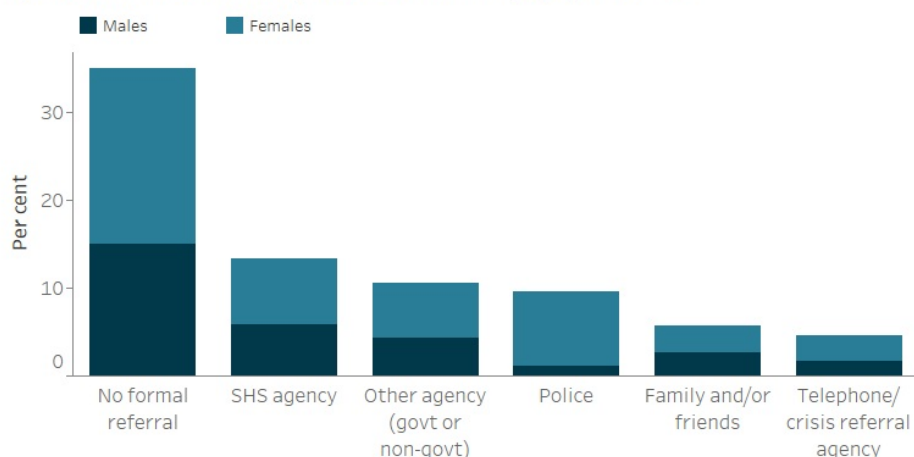
Notes  
 1. Per cent calculations based on total clients, excluding 'Not stated'.  
 2. Housing situation 'Other' not shown.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.7.

### Source of referral

- Two-thirds of clients were formally referred to the agency; in 2017-18, over 184,800 clients (64%) were formally referred to a specialist homelessness agency.
- The most common referral sources were another specialist homelessness agency or outreach worker (13%), other agency (government or non-government) (11%) or by the police (10%) (Figure CLIENTS.7).
- Police referrals to SHS agencies were more likely to be for females than males; of all referrals from the police, 88% were for females and 12% for males.

Figure CLIENTS.7: Clients by source of referral (top 6), 2017-18



Note: Top 6 excludes formal referral source 'Other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.9.

### Main source of income

- Income support was high among SHS clients; a high proportion of clients aged 15 and over (78%) were receiving some form of government payment as their main income source at the time they sought support in 2017-18. The most common government payments were Newstart Allowance (29% or about 54,000 clients), Parenting Payment (18% or more than 33,300) and Disability Support Pension (16% or more than 29,500).
- Less than 1 in 10 clients reported earning income from employment; a total of 8% reported income from employment and 9% of clients reported having no income.

### Education

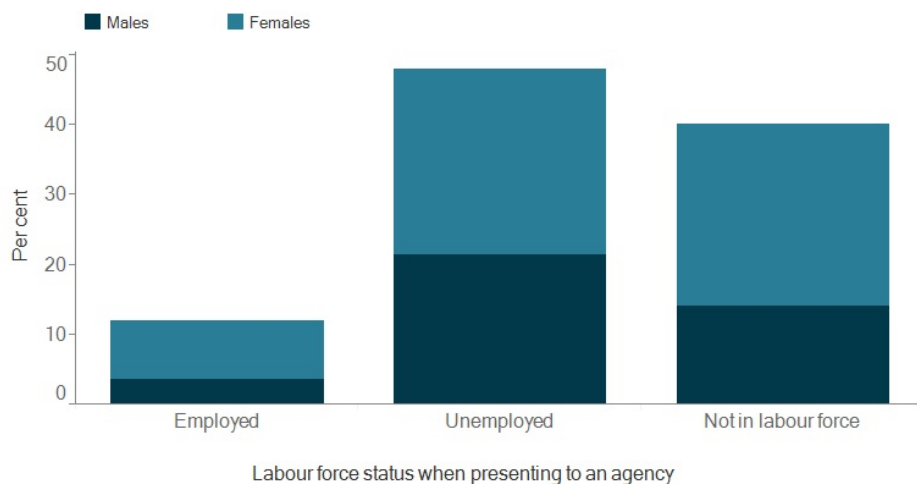
- Overall, more than half of young people were enrolled in education: Of those whose educational status was known, over half of young people aged 5-24 (54% or over 46,600) were enrolled in education in 2017-18 (Supplementary table CLIENTS.11).
- Over 8 in 10 clients aged 5-14 were enrolled in school. 13% of clients aged 5-14 (about 4,300) were not enrolled in education.

- Around one-third of young people were neither in education nor employment; 33% of clients aged 15-24 were not in some form of education or employment (around 19,400 clients).

### Labour force

- Two in 5 clients were not in the labour force; almost 73,700 (40%) clients were not in the labour force in 2017-18 (Figure CLIENTS.8).
- Almost half the clients aged 15 and over were unemployed; over 88,200 (48%) clients aged 15 or over were unemployed at the beginning of support.
- Males were more likely to be unemployed than females; over half of male clients were unemployed (55%) compared with 44% of female clients.
- Most employed clients work part-time; 12% of clients were employed and of these, around 3 in 5 (61%) were employed on a part-time basis.

**Figure CLIENTS.8: Clients aged 15 and over, by labour force status at the beginning of support, 2017-18**



*Note:* Per cent calculations based on total clients less 'Not stated'.

*Source:* Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.12

### Clients' needs for assistance and services provided

The SHSC includes information about clients' needs for services from 2 perspectives:

- The client's reasons for seeking assistance are captured at the start of support—both the main reason for seeking support and all reasons for seeking support are collected.
- The agency worker's assessment of the client's needs—this information is captured when clients first present for assistance and each month while a client is still in contact with the agency.

Technical notes and Glossary provide more information about how clients' needs for assistance are captured in the SHSC.

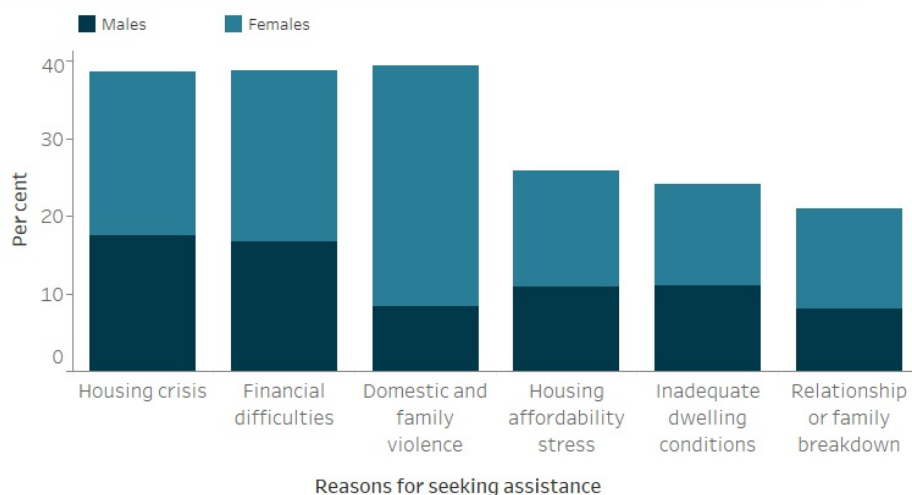
Services provided to clients range from the direct provision of accommodation, such as a bed in a shelter, to specialised services such as counselling and legal support. These services are generally either provided to the client directly by the agency or the client is referred to another service. Unmet demand provides further information about clients' needs that went unmet.

### Reasons for seeking assistance

SHS clients can identify a number of reasons for seeking assistance, reflecting the range of situations that contribute to housing instability (Figure CLIENTS.9):

- Accommodation issues were present for over half of all clients; 53% of clients (or around 152,600 clients) identified accommodation as a reason for seeking assistance, similar to previous years.
- Almost 2 in 5 were experiencing a housing crisis; 'housing crisis' was identified by 39% of clients as a reason for seeking assistance.
- A similar proportion were experiencing financial difficulties; 'financial difficulties' was identified by 39% of clients as a reason for seeking assistance.
- Over 6 in 10 clients were affected by housing affordability stress: 65% of clients identified housing affordability stress and/or financial difficulties as a reason for seeking assistance.
- Interpersonal and relationship issues, including family and domestic violence, affected over half of clients; 53% of all SHS clients (about 153,400) identified interpersonal relationships as a reason for seeking support. Within this group, domestic and family violence and/or relationship/family breakdown were identified for 60% of clients.

Figure CLIENTS.9: Clients by all reasons for seeking assistance (top 6), 2017-18

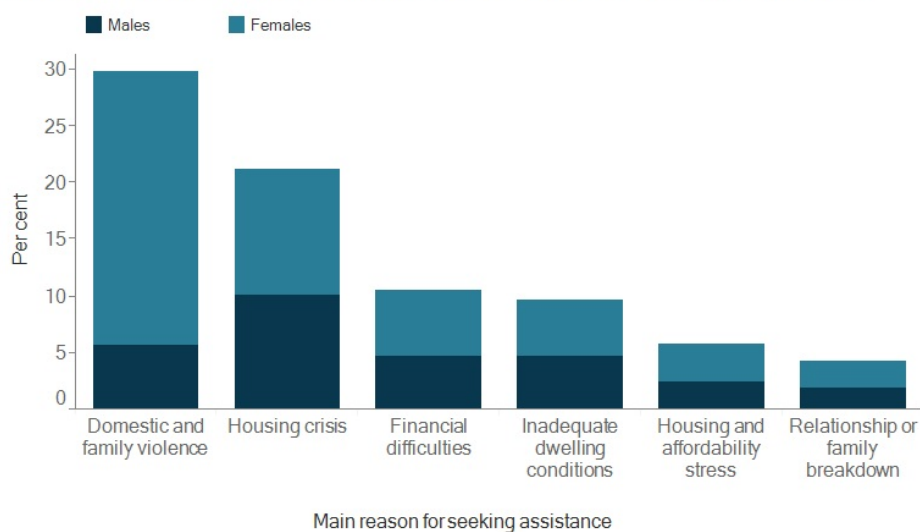


Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.13.

While clients can identify a number of reasons for seeking assistance, agencies also record the main reason for seeking assistance:

- Domestic and family violence was the most common main reason for seeking assistance; domestic and family violence was identified as the main reason for seeking assistance (Figure CLIENTS.10) for around 1 in 3 clients (30% or about 85,000). For more information, see [Clients experiencing domestic and family violence](#).
- Around 1 in 5 identified 'housing crisis' as the main reason for seeking assistance; housing crisis was reported by 21% of clients as the main reason for seeking assistance.

Figure CLIENTS.10: Clients by main reason for seeking assistance (top 6), 2017-18



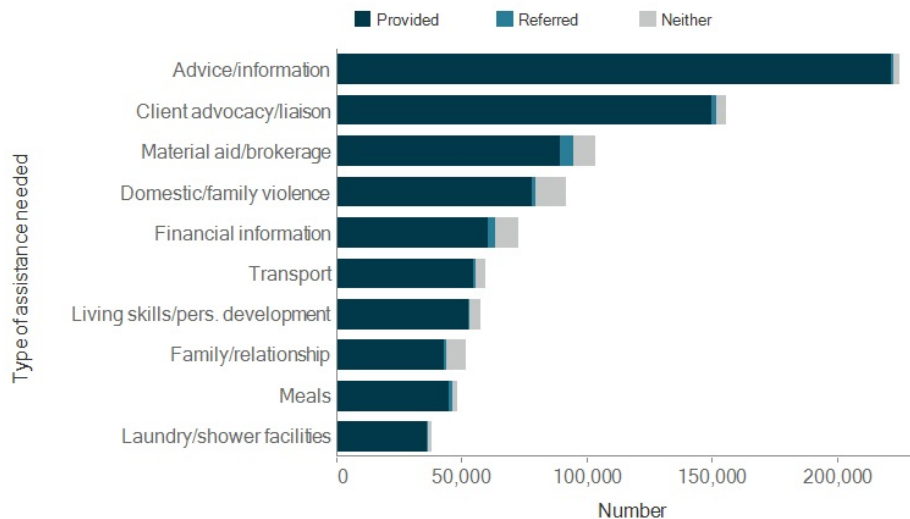
Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.14.

## General support and assistance

Some types of assistance provided by SHS agencies can be described as 'general support and assistance', as opposed to more specialised services. These include advice and information, material aid, meals and living skills.

- Clients continue to most commonly need advice and information; of all assistance needed by clients, advice and information continued to be the most common, identified as a need for 78% of clients (over 224,800) in 2017-18. The next most common was advocacy and liaison, needed by 54% of clients (more than 155,400), and 36% of clients (around 103,500) needed material aid/brokerage (Figure CLIENTS.11).
- Services almost always provided the required advice and information; advice/information and advocacy/liaison services were provided directly by the agency for almost all clients who needed them. This differs from some specialised services, such as legal information and training or employment assistance for which clients were more often referred to another agency.
- Requests for assistance for domestic and family violence rose; in 2017-18, there were about 7,800 more requests (9% increase) for assistance with domestic and family violence, family/relationship assistance and assistance for trauma than in the previous year.
- Requests for accommodation also rose; there were over 3,600 more requests for accommodation services compared with 2016-17, a 1% rise.

**Figure CLIENTS. 11: Clients, by most needed general services and service provision status (top 10), 2017-18**



*Notes*

1. Top 10 excludes 'Other basic assistance'.
2. 'Neither' indicates a service was neither provided nor referred.
3. The general services group is a count of unique clients within all categories in the service and assistance group. A client may request multiple services and assistance types, therefore the sum of the categories is not equal to the group total.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.15.

## Housing and accommodation services

Housing and accommodation services provided by agencies include:

- short-term or emergency accommodation
- medium-term/transitional housing
- long-term housing
- assistance to sustain tenancy or prevent tenancy failure or eviction
- assistance to prevent foreclosures or for mortgage arrears.

In 2017-18, 56% of SHS clients identified a need for accommodation services. Of these nearly 163,000 clients:

- 84,000 (52%) were provided with accommodation by the agency
- 25,000 (16%) were referred to another agency for accommodation provision
- 53,000 (33%) were neither provided with assistance nor referred. These clients are further described in [Unmet demand](#).

Assistance to sustain tenancy/prevent eviction was needed by 33% of clients at some stage during their support in 2017-18, the same proportion as the previous year. This group includes those who were still housed when they approached a SHS agency and were supported to remain in that housing. It also includes those who identified a need for accommodation, were assisted to secure new housing and then supported to sustain that housing:

- There has been, on average, a 4% annual growth in the number of clients needing assistance to sustain tenancy each year since 2013-14.
- Most clients (76,900 clients, or about 81% of those who needed it) received assistance to sustain housing directly from the specialist homelessness agency.

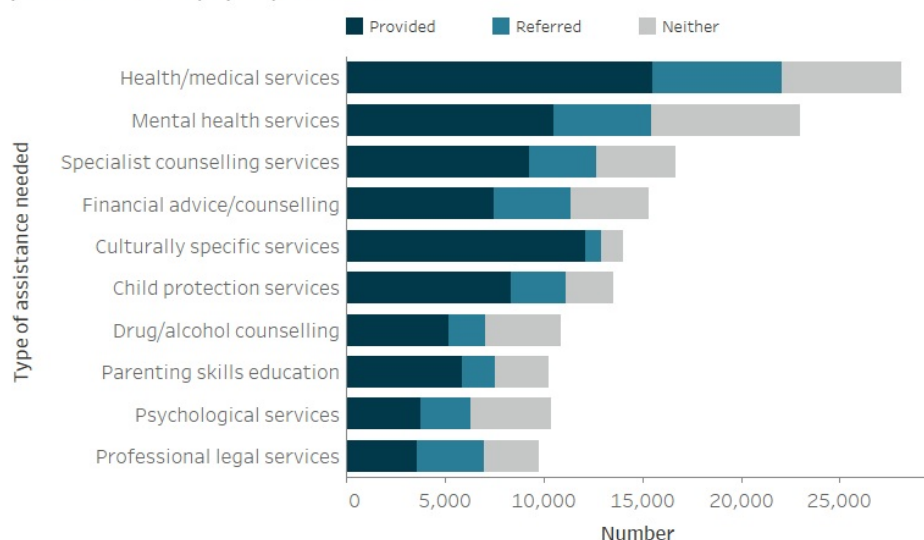
## Specialised services

Specialised services refer to those services that require specific knowledge or skills and are usually undertaken by someone with qualifications to provide the particular service:

- Health service needs are often referred by agencies; health/medical services were identified as needed by 1 in 10 clients (or just over 28,100) and were one of the services most often referred (23%) (Figure CLIENTS.12).
- There has been little change in the most common specialised services needed and provided over the past 5 years; for example, health/medical services, mental health services and specialist counselling remain the most commonly needed services.



Figure CLIENTS.12: Clients by most needed specialised services and service provision status (top 10), 2017-18



*Notes*  
 1. Excludes 'Other specialised service'.  
 2. 'Neither' indicates a service was neither provided nor referred.  
 3. The specialised services group is a count of unique clients within all categories in the service and assistance group. A client may request multiple services and assistance types, therefore the sum of the categories is not equal to the group total.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.15.

## Financial assistance

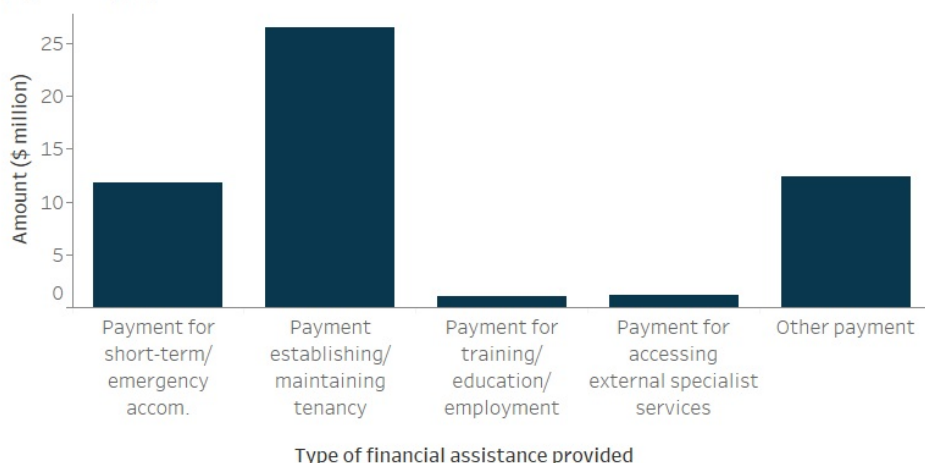
**\$52.9 million** in financial assistance was provided to clients in 2017-18.

Around \$52.9 million in financial assistance was provided to clients in 2017-18 (Figure CLIENTS.13), a 34% increase from the \$39.5 million provided in 2016-17 (not adjusted for inflation); this represents an average provision of \$794 per client requesting financial assistance, an increase from \$640 in 2016-17 (unadjusted for inflation).

Over half of the financial assistance was used to assist clients with housing in 2017-18:

- Around \$26.4 million (50%) of the financial assistance was used to assist clients to establish or maintain their existing tenancy.
- Nearly one-quarter of the financial assistance (22% or \$11.9 million) was used to provide short-term or emergency accommodation.

Figure CLIENTS.13: Total amount of financial assistance provided to clients, by payment type, 2017-18



Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.17.

## Outcomes following support

The outcomes presented here examine changes in clients' situations from the start to the end of all support; that is, clients who ceased receiving support during the financial year—meaning that their support periods had closed and they did not have ongoing support at the end of the year.

Many clients had long periods of support or even multiple support periods during 2017-18. They may have had a number of changes over the course of their support; for example, their housing situation may have changed a number of times during support. These changes within the year are not reflected in the data presented here, rather the client situation at the start of their first period of support during 2017-18 is

compared with the end of their last period of support in 2017-18.

Clients whose support period both opened and closed in 2017-18 accounted for 76% of all clients (Figure CLIENTS.1). A proportion of these clients may have sought assistance prior to 2017-18, and may seek assistance again in future years.

## Housing outcomes

Three aspects of a client's housing situation are considered in their housing circumstances: dwelling type, housing tenure and the conditions of occupancy. The outcomes presented in this section examine the changes in clients' housing situations from the start to end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future. See [Technical notes](#) for details on these categories and their derivation:

- Support significantly reduced the number of clients who were homeless; 1 in 3 clients (32% or over 56,200) were homeless when support ended, a decrease from 43% at the start of support (Supplementary table CLIENTS.22).
- The number of clients 'rough sleeping' and 'couch surfing' reduced following support; the reduction in the proportion of clients who were homeless following support was due to decreases in the proportion of clients with no shelter or living in improvised dwellings (from 10% to 6%) and in the proportion of clients living in a house, townhouse or flat as a 'couch surfer' with no tenure (from 17% to 12%).
- Clients living in public or community housing increased following support; there was an increase in clients living in some form of tenure over the course of support, including an increase in the proportion of clients living in public or community housing from 15% to 22% (or almost 38,000 clients) (Figure CLIENTS.14).

These trends demonstrate that by the end of support, many clients have achieved or progressed towards more stable housing. [Stable housing](#), for the purpose of the SHSC, refers to clients ending support in public or community housing (renter or rent-free), private or other housing (renter, rent-free or owner) or institutional settings.

**Figure CLIENTS.14: Clients by housing situation at beginning of support and end of support, 2017-18**



*Notes*  
 1. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.  
 2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.22.

While overall housing outcome figures reflect trends towards more stable housing for many clients, there are differences in stable housing achievement for homeless and at risk clients. In general terms, agencies were successful in preventing those at risk of homelessness from becoming homeless by working to sustain and maintain existing tenancies or establishing new tenancies. For those clients who were homeless, agencies were able to assist those clients into temporary accommodation and sometimes into public or community housing or private or other housing.

The majority of clients presenting to SHS services were housed but at risk of homelessness. Housing outcomes at the end of support for these clients at risk of homelessness were favourable (Supplementary table CLIENTS.22):

- Almost 9 in 10 (85% or 21,400) who were living in public or community housing were assisted to maintain their existing tenancy. A further 7% (1,700) were assisted into private or other housing and 1% (160) were in an institutional setting.
- Over 8 in 10 who were living in private or other housing were assisted to maintain their housing (84% or 55,800) while a further 6% (4,000) were assisted into public or community housing.

For clients who were homeless on presentation (Table CLIENTS.2):

- About 4 in 10 (38%) were assisted by agencies into stable housing; most were assisted into private or other housing (about 15,500) and a further 10,500 into public or community housing.
- About 4 in 10 (44%) of those who were in short-term or emergency accommodation were assisted into stable housing, most of the 11,600 into private or other housing (54%).

Table CLIENTS.2: Clients with closed support, by housing situation at beginning and end of support, 2017-18 (per cent of all clients)

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	61.8	38.2
At risk of homelessness	9.7	90.3

Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.22.

Other outcomes for clients

Specialist homelessness agencies may support clients in a number of non-housing areas to reduce their vulnerability to homelessness. These include changes in educational enrolment status, labour force status and income.

Education

- Educational enrolment remains stable; for clients whose support had ended, there was little change in the proportion of clients enrolled in education/training from the beginning to the end of support (approximately 21% at the start and end).
- Among those who also had an identified need for support relating to education or training assistance, 41% were enrolled in education/training at the beginning of support, and this increased to 42% at the end of support (Supplementary table CLIENTS.23).

Employment

- Employment increases following support; among those clients who had an identified need for employment assistance, the proportion of clients who were employed increased from 13% at the start of support to 22% at the end of support (Figure CLIENTS.15).

Figure CLIENTS.15: Clients needing assistance relating to employment, by labour force status at beginning and at end of support, 2017-18



Note: Proportions include only clients with closed support at the end of the reporting period, less 'Not stated'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.24.

Income

SHS agencies often provide services to clients aged 15 and over needing assistance to obtain or maintain a government payment or employment assistance:

- Agencies assisted clients receiving a government payment; of those who needed this type of assistance, the proportion of clients reporting a government payment or allowance as their main income increased from 72% at the start of support to 78% at the end of support.
- There was a reduction in those reporting that they received no income from 13% to 8% and the proportion awaiting government benefits halved (from 7% to 3%) (Figure CLIENTS.16).

Figure CLIENTS.16: Clients needing assistance to secure an income, by main source of income at beginning and at end of support, 2017–18



Note: Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table CLIENTS.25.

### Achievement of case management goals

Case management plans enable agency workers to assist a client to work towards agreed goals. In some cases, support periods are too short to allow for a case management plan; for example, when a client stays for a 24-hour period or less. In other cases, a client may decline a case management plan. Case management approaches can differ across SHS services and over time as state and territory policies and practices change:

- For those clients with closed support, 63% (or about 142,300 clients) had a case management plan—51% in their own right and 12% were part of another client’s case management plan, often as part of a family. The proportion of clients with a case management plan was similar in 2016–17 (62%).
- Among those who had a plan in their own right, 70% achieved some of their case management goals, 24% achieved all their goals and 6% did not achieve any goals (Supplementary table CLIENTS.26). The proportion of clients achieving all their goals was similar when compared with the previous year (23%).
- Of the 37% of clients whose support had ended and who did not have a case management plan, the most common reason given for not having one was that the service episode was too short (71%) while a further 10% did not agree to have a case management plan.

### References

1. Australian Bureau of Statistics (ABS) 2017. Australian demographic statistics, Mar 2017. ABS cat. no. 3101.0. Canberra: ABS.
2. ABS 2017. Migration, Australia, 2015–16. ABS cat. no. 3412.0. Canberra: ABS.



## SHS geography

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## SHS geography

The rate at which people access homelessness services can vary geographically due to service availability and region-specific factors such as housing availability and affordability. This section examines people seeking specialist homelessness services (SHS) based on where the person lived in the week before presenting to a SHS agency, as reported at the first support period during 2017-18. This location may not be a permanent address, for example, people who were couch surfing the week prior to seeking services may nominate the location of their temporary accommodation. Client location has been classified by statistical area 4 (there are 88 SA4s areas in total), based on the Australian Statistical Geography Standard (ASGS) [1] (see [Technical information](#)).

### Key findings in 2017-18

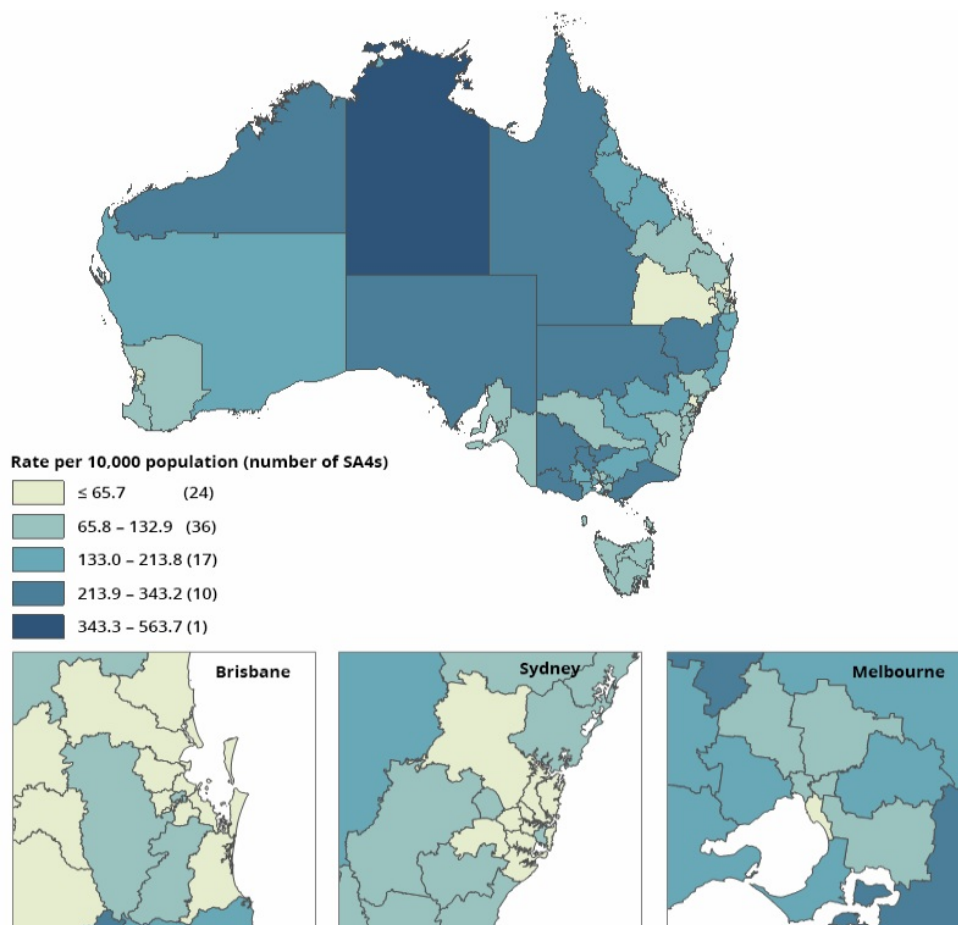
- In 2017-18, the median rate of people accessing SHS services was 97.4 clients per 10,000 population.
- The Northern Territory-Outback area had the highest rate of SHS clients (563.7 clients per 10,000 population or 5,600 clients).
- The lowest rate of SHS clients came from the Sydney-Baulkham Hills and Hawkesbury area (17.0 clients per 10,000 population).

### Geographic profile of SHS clients in 2017-18

In 2017-18, SHS agencies assisted almost 288,800 clients across Australia with 109,200 clients presenting homeless and 131,300 presenting at risk of homelessness. Taking population into consideration, the rate of people seeking SHS services varied by region in 2017-18 (Figure CLIENTLOC.1):

- More than half of the SA4 areas (60 of 88 SA4s) had less than 132.9 clients per 10,000 population accessing SHS services.
- The Northern Territory-Outback had the highest rate of SHS clients (563.7 per 10,000 population); this was higher than the Northern Territory and national rates (377.3 and 117.4 respectively).
  - Melbourne-West (Victoria) had the highest number of clients (15,100 clients or 191.1 per 10,000 population).
  - Areas with the top 5 highest rates had, on average, 351.2 clients per 10,000 population (Table CLIENTLOC.1).
- SHS clients from regional areas within Victoria, such as Latrobe-Gippsland and Shepparton, had rates of more than 250.0 clients per 10,000 population (Figure CLIENTLOC.1).
- Lower rates of less than 50.0 clients per 10,000 population were observed in more highly populated urban areas within Brisbane (Queensland) and Sydney (New South Wales) (Figure CLIENTLOC.1, inserts (a) and (b)).
  - Sydney-Baulkham Hills and Hawkesbury had the lowest client rate at 17.0 clients per 10,000 population (409 clients) (Table CLIENTLOC.1).

**Figure CLIENTLOC.1: SHS clients seeking SHS services, rate per 10,000 population by SA4, 2017-18**



#### Notes

1. Client location based on location the week before first presenting to an SHS agency in 2017-18.
2. Rates are crude rates based on the Australian estimated resident population at 30 June of the reference year.
3. Mapped SA4s (88) exclude Other Territories and non-geographic SA4s coded as No usual address, Migratory, Offshore or Shipping.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTLOC.1.

Table CLIENTLOC.1: Client rate per 10,000 ERP, highest and lowest 5 statistical area level 4 (SA4), location week before first presentation, 2017-18

State	SA4	Clients: rate per 10,000 ERP	Clients: number	Homeless (per cent)	At risk of homelessness (per cent)
<b>Highest (rate per 10,000 ERP)</b>					
Northern Territory	Northern Territory— Outback	563.7	5,558	33.6	66.4
Western Australia	Western Australia—Outback	343.2	3,347	20.9	79.1
Victoria	North West	313.5	4,768	37.1	62.9
New South Wales	Far West and Orana	270.6	3,157	49.6	50.4
Victoria	Latrobe—Gippsland	264.9	7,400	38.6	61.4
<b>Lowest (rate per 10,000 ERP)</b>					
Queensland	Sunshine Coast	24.5	897	71.2	28.8
New South Wales	Sydney—Ryde	21.4	416	32.6	67.4
New South Wales	Sydney—North Sydney and Hornsby	19.9	856	35.3	64.7
Queensland	Brisbane—West	17.3	328	48.7	51.3

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New South Wales	Sydney–Baulkham Hills and Hawkesbury	17.0	409	35.9	64.1
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#### Notes

1. Client location based on location the week before first presentation to an SHS agency in 2017-18.
2. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year.
3. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as at risk of homelessness.
4. Proportions include clients with open support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.
5. Due to improvements in the rates of agency participation and SLK validity, data are no longer weighted.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTLOC.1.

#### References

1. ABS (Australian Bureau of Statistics) 2016. Australian Statistical Geography Standard (ASGS): Volume 1–Main Structure and Greater Capital City Statistical Areas, July 2016. ABS cat. no. 1270.0.55.001. Canberra: ABS

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## SHS geography

Access to services can become increasingly difficult the further away a client is from a major city [1]. This section examines service needs and client characteristics based on the location of the Specialist Homelessness Service (SHS) agency. Clients can access services in more than one remoteness area, however, for the purpose of the analysis, clients are assigned to one remoteness area based on the SHS agency where they first sought support in 2017-18. The Australian Statistical Geography Standard (ASGS) [2] is used to classify agencies by remoteness area based on the location details of each agency (see [Technical information](#)).

### Key findings in 2017-18

- Agency client numbers increased across *Major cities* and *Inner regional* areas in 2017-18, while *Outer regional* and *Remote/very remote* numbers decreased from the previous year.
- Agencies in *Major cities* had the greatest increase in client numbers (over 1,000 clients) while agencies in *Outer regional* areas had the greatest decrease (over 700 clients) compared with 2016-17.
- The housing situation of clients when seeking assistance was very different across regional areas, with most clients in *Remote/very remote* areas (72%) at risk of homelessness, compared with just over half for all other regional areas (56-57%).
- The rate of service was highest in *Remote/very remote* areas, 1 in 37 people compared with 1 in 99 in *Major cities* and 1 in 67 in *Inner* and *Outer regional* areas in 2017-18.
- *Remote/very remote* areas had higher proportions of couples presenting with children compared with *Major cities* (19% compared with 12%) while the proportion of lone persons was higher in *Major cities* than in *Remote/very remote* areas (31% compared with 16%).

### Specialist homelessness services across urban and remote areas in 2017-18

In interpreting regional service trends, urban areas refer to *Major cities* and *Inner* and *Outer regional* areas. In 2017-18 clients from SHS agencies in urban and remote areas displayed distinct characteristics:

- 2 in 3 (66%) SHS clients with a current mental health issue and 86% of SHS clients born overseas accessed SHS in *Major cities*.
- 9 in 10 (91%) clients seeking services in *Remote/very remote* areas were Indigenous (Supplementary table INDIGENOUS.5).
- The proportion of people who were homeless upon presentation was lowest among the client groups of services in *Remote/very remote* areas: 28% compared with 44% in urban areas (*Major cities* and *Inner* and *Outer regional* areas) in 2017-18 (Table REG.1).
- In 2017-18, the median length of accommodation received by clients of services in *Major cities* was 46 nights, compared with 5 nights in *Remote/very remote* areas (Table REG.1).
- The main reason clients sought assistance varied across regional areas. Domestic and family violence and housing crisis were reported as the main reason by clients of services in *Major cities* (32%, 22%, respectively), *Inner regional* (25%, 21%), and *Outer regional* (25%, 21%) areas. Domestic and family violence was reported by almost 4 in 10 clients (38% up from 33% in 2016-17) of services in *Remote/very remote* areas and housing crisis by just 11%.

### Specialist homelessness services across urban and remote areas: 2014-15 to 2017-18

The SHS collection continues to reveal differences in client characteristics and service needs across Australia. Some key regional service trends over the past 4 years include:

- Taking into account population differences, agencies in *Remote/very remote* areas consistently reported the highest rate of homelessness service use (Table REG.1). The rate of SHS clients accessing services located in *Remote/very remote* areas was 2.7 times higher than in *Major cities* in 2017-18, up from 2.3 times in 2014-15.
- Though services in *Inner regional* areas had the largest average annual growth in client numbers (4.7%), services in *Remote/very remote* areas had the largest growth in the rate of service use, increasing on average by 5.3% each year since 2014-15.
- The proportion of Indigenous clients in *Remote/very remote* areas has increased from 89% in 2014-15 to 91% in 2017-18. *Inner regional* areas have also seen an increase in the share of clients who are Indigenous with 25% of clients identifying as Indigenous in these areas in 2017-18, a rise of 4 percentage points over the 4-year period.
- Domestic and family violence has remained the main reason clients sought assistance in all regional areas in 2017-18.

**Table REG.1: Clients by agency geographic area: at a glance—2014-15 to 2017-18**

Number of clients (proportion (per cent) of all clients)

Year		<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	Number	179,323	65,671	30,352	13,449
2017-18	Per cent	62	23	11	5

2016-17	Number	178,197	65,330	31,131	13,614
2016-17	Per cent	62	23	11	5
2015-16	Number	174,744	60,013	30,790	13,650
2015-16	Per cent	63	21	11	5
2014-15	Number	162,286	52,061	28,257	13,053
2014-15	Per cent	63	20	11	5

Rate (per 10,000 population)

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	101.5	149.6	148.2	273.0
2016-17	103.4	148.9	149.0	271.5
2015-16	103.3	138.5	147.7	267.7
2014-15	97.6	121.6	136.0	252.0

Housing situation at the beginning of first support period (proportion (per cent) of all clients)

Year		<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	Homeless	44	43	44	28
2017-18	At risk of homelessness	56	57	56	72
2016-17	Homeless	46	43	42	27
2016-17	At risk of homelessness	54	57	58	73
2015-16	Homeless	45	43	43	27
2015-16	At risk of homelessness	55	57	57	73
2014-15	Homeless	45	41	43	29
2014-15	At risk of homelessness	55	59	57	71

Length of support (median number of days)

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	35	53	39	20
2016-17	34	46	37	20
2015-16	33	41	36	17
2014-15	32	39	36	17

Average number of support periods per client

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	1.8	1.6	1.5	1.6
2016-17	1.8	1.6	1.5	1.6
2015-16	1.7	1.6	1.5	1.5
2014-15	1.7	1.5	1.5	1.5

Proportion receiving accommodation

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	27	25	36	62
2016-17	28	25	37	59
2015-16	29	27	39	62
2014-15	31	29	41	58

Median number of nights accommodated

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	46	34	23	5
2016-17	48	31	24	5
2015-16	48	34	23	5
2014-15	48	35	21	5

Proportion of a client group who had a case management plan (per cent)

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	60	66	77	65
2016-17	59	64	74	64
2015-16	59	61	75	60
2014-15	58	61	73	62

Achievement of all case management goals (per cent)

Year	<i>Major cities</i>	<i>Inner regional</i>	<i>Outer regional</i>	<i>Remote/very remote</i>
2017-18	25	17	34	24
2016-17	25	16	27	23
2015-16	24	16	31	27
2014-15	27	18	30	29

Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant National supplementary table.
3. Previous years' data can be found in the [2016-17 Specialist Homelessness Services Annual report](#).
4. Data for 2014-15 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2014-15 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.

Source: Specialist Homelessness Services Collection 2014-15 to 2017-18.

## Services needed and provided

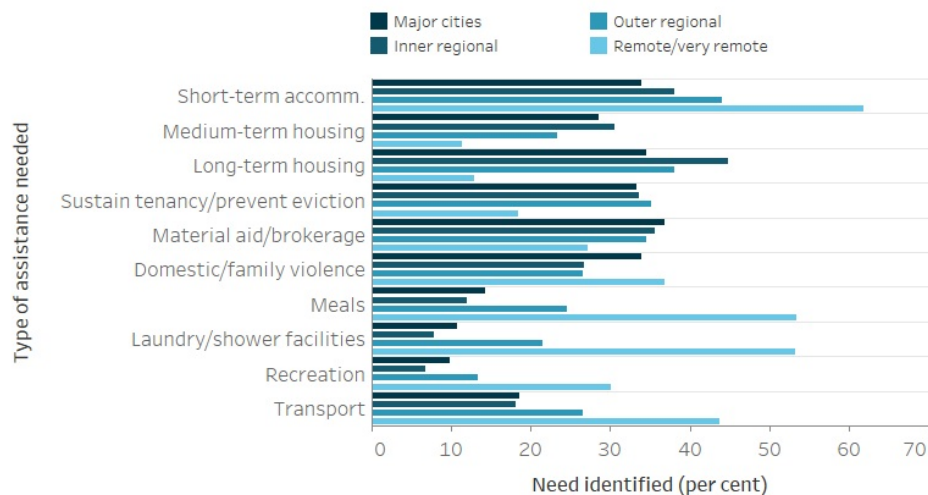
The proportion of clients needing short-term or emergency accommodation increased as remoteness of the service provider increased: *Major cities* 34%, *Inner regional* areas 38%, *Outer regional* areas 44%, and *Remote/very remote* areas 62%.

Just under half of clients of *Inner regional* services needed long-term housing. Trends for clients accessing services in *Inner regional* areas were generally similar to those in *Major cities*. However, a higher proportion of clients seeking support in *Inner regional* areas needed long-term housing (45% compared with 35% in *Major cities*).

Nearly 9 in 10 requests for accommodation were met by services in *Remote/very remote* areas (88%), while clients of services in *Major cities* and *Inner regional* areas were the least likely to receive accommodation (52% and 41% of need met, respectively). Clients in *Remote/very remote* areas were more likely to receive short-term or emergency accommodation (92%) than those in *Major cities* (52%) and *Inner regional* (50%) areas.

Need for mental health services was higher among clients of services in *Major cities* (10% or over 18,600 clients) and *Inner regional* areas (8% or over 5,400 clients) than those in *Outer regional* areas (7% or over 2,000 clients) and *Remote/very remote* areas (4% or over 500 clients).

Figure REG.1: Clients by most needed services, by remoteness area, 2017-18



**Notes**

1. Most needed excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes temporary and emergency accommodation; medium-term housing includes transitional housing; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.
3. Proportions have been calculated using the client count for each remoteness area as the denominator.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table REG.3.

## Housing outcomes

For the purpose of the SHSC, stable housing refers to clients ending support in public or community housing (renter or rent free), private or other housing (renter, rent free or owner), or institutional settings.

- Clients accessing services in *Major cities* were the least likely to end support in stable housing (67%), noting that this group was also most likely to present homeless.
- Clients of *Inner regional* services were the most likely to be housed in private or other housing following support (48%). They were also the most likely to improve their housing situation following SHS assistance with 70% housed at the end of support, up 13 percentage points from the beginning of support.
- Clients accessing agencies in *Remote/very remote* areas were more likely to report living in public or community housing (61%) at the beginning of their support. The majority of these clients (93%) were in stable housing at the end of support.

There are differences in stable housing achievements for clients who either present homeless or housed (at risk of homelessness). Across all regions, agencies were best able to assist those presenting at risk of homelessness, with 9 in 10 (90%) maintaining their housing following support. For those clients presenting homeless, agencies were able to assist around 4 in 10 clients into stable housing at the end of support.

Table REG.2: Clients by SHS agency geographic area, housing situation at beginning and end of support, 2017-18 (per cent)

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
<b>Major cities</b>		
Homeless	63.6	36.4
At risk of homelessness	9.8	90.2
<b>Inner regional</b>		
Homeless	57.9	42.1
At risk of homelessness	10.0	90.0
<b>Outer regional</b>		
Homeless	60.9	39.1

At risk of homelessness	9.7	90.3
<b>Remove/very remote</b>		
Homeless	61.0	39.0
At risk of homelessness	7.9	92.1

#### Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, [National supplementary table REG.4](#).

#### References

1. Wood G, Batterham D, Cigdem M & Mallett S 2014. The spatial dynamics of homelessness in Australia 2001-11, AHURI Final Report No.227. Melbourne: Australian Housing and Urban Research Institute. Viewed October 2018.
2. Australian Bureau of Statistics 2018. Australian Statistical Geography Standard (ASGS): Volume 5—Remoteness structure, July 2016. ABS cat. no. 1270.0.55.005. Canberra: ABS.





## Client groups of interest

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## Client groups of interest

Aboriginal and Torres Strait Islander people are more likely than non-Indigenous Australians to experience insecure housing, live in overcrowded dwellings and experience homelessness, including intergenerational homelessness. They continue to be over-represented in both the national homeless population and as users of specialist homelessness services (see [Clients, services and outcomes](#) and [1]). Indigenous Australians are a national priority homelessness cohort in the National Housing and Homelessness Agreement [2], which came into effect 1 July 2018.

Aboriginal and Torres Strait Islander people make up 3.2% of the Australian population [3], yet they made up 25% of the clients (an estimated 65,200 clients) assisted by specialist homelessness services in 2017-18. It is important to note that Indigenous status was not reported for 10% of specialist homelessness services (SHS) clients in 2017-18 (similar to 2016-17; 9%).

### Key findings in 2017-18

- Indigenous SHS client numbers increased by 1% since 2016-17 to around 65,200 in 2017-18, growing at a similar rate to the general SHS population (2% increase).
- There were more returning Indigenous clients (62%) (that is, those who had received assistance at some time in the previous 5 years) than new Indigenous clients (38%) in 2017-18.
- The length of support for Indigenous clients continues to increase, with the median number of days up from 46 in 2016-17 to 48 days in 2017-18, and is longer than that for non-Indigenous clients (44 days in 2017-18).
- The proportion of Indigenous clients receiving accommodation services decreased to 41% in 2017-18, down from 42% in 2016-17; and the median length of accommodation remained the same (20 nights) but remains significantly shorter than non-Indigenous clients (41 nights).
- Around 3,200 more Indigenous clients ended support in public or community housing and 1,100 fewer Indigenous clients were in short-term or emergency accommodation following assistance from SHS agencies in 2017-18.

### Profile of Indigenous clients in 2017-18

Of the 65,200 Indigenous clients who received services in 2017-18:

- Around 1 in 5 (22% or 14,500) were children aged under 10, compared with 15% (or around 28,200) of non-Indigenous clients.
- Just over half (53% or 34,600 clients) were aged under 25, compared with 40% of non-Indigenous clients (or 78,300 clients).
- Of all Indigenous clients, there were twice as many females aged over 18 (42% or over 27,600 clients) than males aged over 18 (21% or 13,600 clients). By comparison, of all non-Indigenous clients, 46% were females aged over 18 and 28% were male.
- There were more returning Indigenous clients (62% or 40,500 clients) than new Indigenous clients (38% or 24,700 clients). That is, more Indigenous clients had received assistance at some point in the previous 5 years than new Indigenous clients seeking assistance from a SHS in 2017-18.
- Looking at the main reason for seeking assistance, 1 in 4 (25%) sought assistance from a SHS agency because of domestic and family violence and a further 21% because of a housing crisis. Non-Indigenous clients also reported these two main reasons most commonly, with a higher proportion reporting domestic and family violence (28%) and a similar proportion reporting housing crisis (22%).
- Over 1 in 3 (35%) were living as single parents with a child or children when they approached an agency for support, similar to non-Indigenous clients (34%).

### Vulnerabilities

Indigenous clients may be facing any number of challenges when they present to a SHS agency for assistance, specifically domestic and family violence, mental health issues and problematic drug and/or alcohol use. Over half (56%) of Indigenous clients reported 1 or more of these vulnerabilities (Table INDIGENOUS.1), less than non-Indigenous clients (63%).

Almost 2 in 5 Indigenous clients (37% of Indigenous clients aged 10 and over or 18,600 clients) reported domestic and family violence. Almost 4,400 clients (9%) reported experiencing both domestic and family violence and mental health issues, while almost 2,300 clients (4%) reported experiencing mental health issues and drug/alcohol problems. Just over 2,300 Indigenous clients (5%) reported all three vulnerabilities (domestic and family violence, mental health issues and problematic drug and/or alcohol use)—similar rates to non-Indigenous clients (3%).

Table INDIGENOUS.1: Indigenous clients, by selected vulnerability characteristics, 2017-18

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	Yes	Yes	2,300	4.6
Yes	Yes	No	4,400	8.6

Yes	No	Yes	1,300	2.6
No	Yes	Yes	2,200	4.4
Yes	No	No	10,600	20.9
No	Yes	No	5,800	11.4
No	No	Yes	1,800	3.6
No	No	No	22,200	43.8
			<b>50,700</b>	<b>100</b>

#### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Indigenous clients: 2015-16 to 2017-18

Over 213,300 Indigenous clients have been supported by homelessness agencies since the Specialist Homelessness Services Collection (SHSC) began in 2011-12. The number of Indigenous clients has been steadily increasing over this time. The key trends identified over the past 3 years have been:

- The rate of service use by Indigenous clients has increased from 787 clients per 10,000 Indigenous people in 2015-16 to 803 in 2017-18 (Table INDIGENOUS.2).
- The gap between the rate of Indigenous and non-Indigenous SHS clients continues to widen. In 2017-18 Indigenous people were 9.4 times as likely to use specialist homelessness services as non-Indigenous people, up from 9.1 times in 2015-16.
- After taking into account differences in population size, in 2017-18 Indigenous clients accessed services at the highest rate in *Inner/outer regional* areas, consistent with 2016-17 but differing from previous years where the highest rate was in *Major cities*.
- The rate of service use among Indigenous clients living in *Remote/very remote* areas has decreased over time; from 732 Indigenous clients per 10,000 population in 2015-16 to 712 in 2017-18. The rate of use for non-Indigenous clients in the same areas has also decreased, from 41 clients per 10,000 in 2016-17 to 38 in 2017-18.
- The length of support for Indigenous clients continues to increase, with the median number of days up from 46 in 2016-17 to 48 days in 2017-18, and is longer than that for non-Indigenous clients (44 days in 2017-18).

Table INDIGENOUS.2: Indigenous clients: at a glance—2015-16 to 2017-18

	2015-16 Indigenous	2015-16 Non- Indigenous	2016-17 Indigenous	2016-17 Non- Indigenous	2017-18 Indigenous	2017-18 Non- Indigenous
<b>Number of clients</b>	61,700	190,488	64,644	196,689	65,184	194,072
<b>Proportion of all clients where Indigenous status reported</b>	24	76	25	75	25	75
<b>Rate (per 10,000 population)</b>	787.0	86.5	813.9	88.4	802.7	85.7
<b>Rate ratio</b>	9.1		9.2		9.4	
<b>Rate difference</b>	700.5		725.6		717.0	
<b>Remoteness rate (per 10,000 population)</b>						
<i>Major cities</i>	823.9	80.6	832.4	80.7	814.7	78.1
<i>Inner/outer regional</i>	789.2	110.5	852.3	115.3	845.3	115.3
<i>Remote/very remote</i>	732.4	36.4	720.9	40.7	711.9	38.2
<b>Rate ratio</b>						
<i>Major cities</i>	10.2		10.3		10.4	
<i>Inner/outer regional</i>	7.1		7.4		7.3	
<i>Remote/very remote</i>	20.1		17.7		18.7	



## Housing situation at the beginning of first support period (proportion (per cent) of all clients)

Homeless	46	43	47	43	47	43
At risk of homelessness	54	57	53	57	53	57
Length of support (median number of days)	44	37	46	39	48	44
Average number of support periods per client	1.7	1.7	1.7	1.7	1.8	1.8
Proportion receiving accommodation	44	30	42	29	41	28
Median number of nights accommodated	19	42	20	41	20	41
Proportion of a client group with a case management plan	70	61	71	61	73	63
Achievement of all case management goals (per cent)	21	23	20	22	23	22

### Notes

1. Rates were directly age-standardised as detailed in the Technical information section. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. Rate ratio is the Indigenous rate divided by the non-Indigenous rate and is used to compare the 2 service use rates. Rate difference is the Indigenous rate minus the non-Indigenous rate. They are both measures of gaps, one is relative and one is absolute'.
3. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant National supplementary table.
4. Data for 2015-16 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2015-16 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.

Source: Specialist Homelessness Services Collection 2015-16 to 2017-18.

## Housing situation

At the beginning of support, the majority of Indigenous clients were housed but at risk of homelessness (53%) when first reporting to a SHS agency for assistance, the remainder (47%) were homeless (Table INDIGENOUS.2).

## Services needed and provided

The need for accommodation assistance was broadly similar between Indigenous and non-Indigenous clients, with the exception of short-term or emergency accommodation (Figure INDIGENOUS.1). Half of Indigenous clients (51% or 33,200) needed short-term or emergency accommodation, compared with 36% (or 70,100) of non-Indigenous clients. Two-thirds of those Indigenous clients with the need for short-term or emergency accommodation received this support (67%); a higher proportion than non-Indigenous clients (56%).

Advice/information (80%), advocacy/liaison (58%) and material aid/brokerage (40%) were some of the most sought after general services for Indigenous clients. The majority of clients with these needs were provided with these services (99%, 97% and 88% respectively). Assistance for domestic and family violence was another frequently requested service (28%), with 90% of clients with this need having such assistance provided.

For some general services, needs were higher for Indigenous clients when compared with non-Indigenous clients, including meals (29% compared with 14%), laundry/shower facilities (25% compared with 11%) and transport (32% compared with 19%).

**Figure INDIGENOUS. 1: Clients by Indigenous status and by most needed services, 2017-18**



*Notes*  
 1. Most needed excludes 'Other basic assistance', 'Advice/information' and 'Advocacy/liaison on behalf of client'.  
 2. Short-term accommodation includes emergency accommodation, and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction; medium-term housing includes transitional housing.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table INDIGENOUS.3.

## Housing outcomes

The outcomes presented in this section examine the changes in clients' housing situations from the start to end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For Indigenous clients (Supplementary table INDIGENOUS.4):

- 2 in 3 (65% or 27,700) Indigenous clients were housed at the end of support. This represents an increase of 4,200 clients in housing following SHS support (or up from 53% at the beginning of support).
- The most common housing outcome following support was public or community housing (38% or 16,200 clients) followed by private rental (25% or 10,600) (Figure INDIGENOUS.2). In contrast, for non-Indigenous clients, the most common housing outcomes at the end of support were private rental (50%) followed by public or community housing (16%).
- Most of the Indigenous clients who ended support homeless were in short-term or emergency accommodation (15% or 6,300 clients) and couch surfing (14% or 6,100 clients) with 6% rough sleeping (or 2,300 clients).

**Figure INDIGENOUS.2: Clients by Indigenous status and by housing situation at the beginning and end of support, 2017-18**



*Notes*  
 1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.  
 2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.  
 3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table INDIGENOUS.4.

Of those clients who were housed but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings):

- 9 in 10 (89% or 19,500 clients) were assisted to maintain their tenancy following SHS support. This is a similar proportion to non-Indigenous clients (90% or 61,200 clients).
- Around 9 in 10 of those living in public or community housing (86% or 10,600 clients) were assisted to maintain their tenancy, and a further 5% (600 clients) were assisted into private or other housing. By comparison, 84% of non-Indigenous clients (or 9,500 clients) living in public or community housing were assisted to maintain their tenancy, and a further 9% (or 1,000 clients) were assisted into private or other housing.
- Almost 3 in 4 (74% or 6,400 clients) of those living in private or other housing were assisted to maintain their tenancy, and a further 12% (or 1,000 clients) were assisted into public or community housing. By comparison, 85% (or 44,700 clients) of non-Indigenous clients living in private or other housing were assisted to maintain their tenancy, and a further 5% (or 2,800 clients) were assisted into public or community housing.

Of those clients who were homeless (that is, living either with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free)) when they began SHS support (Table INDIGENOUS.3):

- The majority of Indigenous clients who presented as homeless, remained homeless (62%) at the end of support.
- Around 4 in 10 (38% or 7,200 clients) were assisted into housing (compared with 39% or 18,800 non-Indigenous clients).
- Almost half of Indigenous and non-Indigenous clients in short-term or emergency accommodation were assisted into housing (45% or 3,000 Indigenous clients compared with 45% or 8,100 non-Indigenous clients).

Table INDIGENOUS.3: Indigenous and non-Indigenous clients, housing situation at beginning and end of support, 2017-18 (per cent)

Situation at beginning of support	Indigenous homeless	Non-Indigenous homeless	Indigenous housed	Non-Indigenous housed
Homeless	61.7	60.5	38.3	39.5
At risk of homelessness	11.4	9.6	88.6	90.4

#### Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table INDIGENOUS.4 .

#### References

1. Australian Bureau of Statistics (ABS), 2012. Census of population and housing: estimating homelessness, 2011. ABS cat. no. 2049.0. Canberra: ABS.
2. Council on Federal Financial Relations 2018. National Housing and Homelessness Agreement.
3. ABS 2018. Australian demographic statistics, Mar 2018. ABS cat. no. 3101.0. Canberra: ABS.



## Client groups of interest

Domestic and family violence is the main reason women and children leave their homes in Australia [1] and is consistently one of the most common reasons clients seek assistance from specialist homelessness services (SHS) (see [Clients, services and outcomes](#)). Women and children affected by family and domestic violence are a national priority cohort listed in the National Housing and Homelessness Agreement [2], which came into effect on 1 July 2018.

While SHS agencies mainly assist people who are victims of domestic and family violence, they may also assist perpetrators of violence who seek homelessness services. Currently, the Specialist Homelessness Services Collection (SHSC) cannot separately identify these groups.

### Key findings in 2017-18

- Overall, 42% of clients (or 121,100) reported experiencing domestic and family violence at some point during the reporting period, an increase from 40% in 2016-17.
- Nearly half (47%) were single parents with a child or children.
- Many were children: One-fifth of clients were aged 0-9 (22% or over 26,500), and nearly 41,700 (34%) clients were aged under 18 (a 4% increase from 2016-17 for those aged under 18).
- Almost all adults were female: Adults aged 25-34 were the largest proportion of adult service users (20% or 24,500 clients); most of these clients (94%) were female.
- On average, each client received assistance twice from homelessness agencies over the 12 month period (2.0 support periods per client) for a total of 43 days.
- The largest improvement in housing situation was among clients in public or community housing—up from 16% at the start of support to 23% at the end of support.

### Profile of clients experiencing domestic and family violence in 2017-18

In 2017-18, SHS agencies assisted around 121,100 clients who had experienced domestic and family violence. In 2017-18, compared with 2016-17:

- There were about 6,300 (5%) more clients seeking assistance for domestic and family violence, which is consistent with the growth rate of the general SHS population (5%).
- The growth in client numbers was largely due to increases in Victoria (over 6,600 clients) and New South Wales (around 900 clients).
- More than 3 in 4 (78%) were female, similar to the previous year (77%).
- Almost half were single parents, with 47% of all clients seeking assistance for domestic and family violence living in single parent households, similar to 2016-17.
- Most were housed when seeking support, with 61% at risk of homelessness when first presenting for support, consistent with the previous year (61%).
- There was a similar distribution of 'new' and 'returning' clients compared with the previous year (48% and 52%, respectively). While this trend was observed in New South Wales, Victoria and Queensland, there was a higher proportion of returning clients in South Australia, Tasmania, the Australian Capital Territory and the Northern Territory than in the previous year.
- 1 in 4 clients (22%) were Indigenous, similar to the overall SHS population in 2017-18, and the proportion of Indigenous clients in 2016-17.

### Vulnerabilities

In 2017-18, 94,700 clients aged 10 years and over experienced domestic and family violence. Of these, 37% (or 34,800 clients) also reported experiencing at least one additional vulnerability (either a mental health issue or problematic drug and/or alcohol use). Almost two-thirds (63% or 59,900) of clients experiencing domestic and family violence did not report experiencing an additional vulnerability (Table DV.1).

**TABLE DV.1: Clients who have experienced domestic and family violence (aged over 10), by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	No	No	59,900	63.2
Yes	Yes	No	24,300	25.7
Yes	No	Yes	2,600	2.8
Yes	Yes	Yes	7,900	8.3
			<b>94,660</b>	<b>100</b>

## Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

## Clients experiencing domestic and family violence: 2013-14 to 2017-18

The number of clients reporting they had experienced domestic and family violence has increased since 2013-14. Key trends identified over the past 5 years include:

- Nationally, the number of clients reporting they had experienced domestic and family violence and sought assistance from specialist homelessness agencies has risen, on average 9% each year since 2013-14. This represents an increase in the rate from 36.6 per 10,000 population in 2013-14 to 49.2 per 10,000 population in 2017-18 (Table DV.2). Most of these additional clients were single parent households (with a child or children).
- Tasmanian SHS agencies experienced the greatest average annual growth of domestic and family violence clients (13% each year), followed by the Northern Territory (11% each year); however, Victoria has the most number of clients.
- The proportion of clients who were homeless upon presentation has increased, from 37% in 2013-14 to 39% in 2017-18.
- The proportion of clients ending support with improved housing outcomes increased over the period, particularly for those in private housing (from 46% in 2013-14 to 48% in 2017-18).

Table DV.2: Clients who have experienced domestic and family violence: at a glance—2013-14 to 2017-18

	2013-14	2014-15	2015-16	2016-17	2017-18
Number of clients	84,774	92,349	105,619	114,757	121,116
Proportion of all clients	33	36	38	40	42
Rate (per 10,000 population)	36.6	39.3	44.3	47.4	49.2
<b>Housing situation at the beginning of first support period (proportion (per cent) of all clients)</b>					
Homeless	37	37	38	39	39
At risk of homelessness	63	63	62	61	61
Length of support (median number of days)	43	40	38	39	43
Average number of support periods per client	1.8	1.8	1.9	1.9	2.0
Proportion receiving accommodation	44	41	39	37	35
Median number of nights accommodated	34	32	31	31	31
Proportion of a client group with a case management plan	63	64	64	64	65
Achievement of all case management goals (per cent)	17	22	21	20	20

## Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

## Housing situation

At the beginning of support, the majority of clients experiencing domestic and family violence were at risk of homelessness (61% or about 73,900 clients). Two in 5 (39% or about 47,200) clients were homeless when first reporting to a SHS agency for assistance in 2017-18 (Supplementary Table DV.4).

## Reasons for seeking assistance

There were 2 main reasons why clients within this group sought assistance from SHS agencies. Domestic and family violence was identified as the main reason for 7 in 10 clients (71%), while housing crisis was identified as the main reason by 10% of clients.

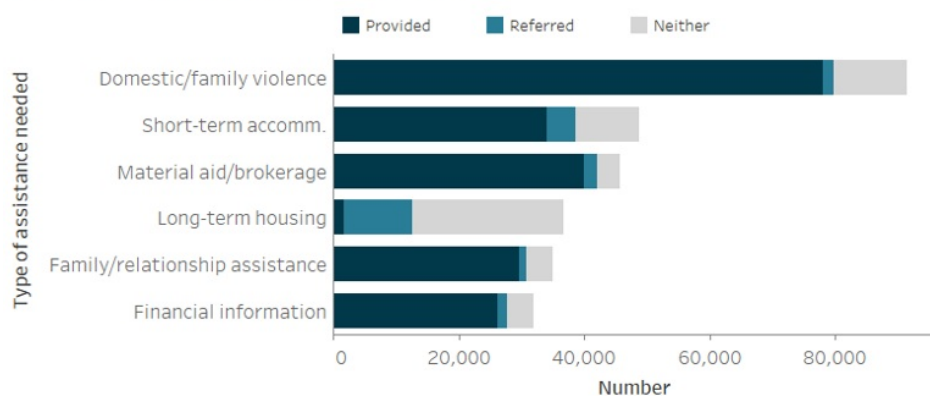
## Services needed and provided

More than 3 in 4 (76% or 91,500) SHS clients who had experienced domestic and family violence needed specific assistance for this reason, including therapeutic discussion or group sessions, counselling and specialised support services. Of those identified as needing assistance for domestic and family violence, 85% were provided assistance.

The next most common services requested by this client group were (Figure DV.1):

- advice/information (75% or over 90,900), with 99% receiving this service
- advocacy/liaison (55% or over 66,800), with 97% receiving this service
- short-term or emergency accommodation (40% or over 48,800), with 70% receiving this service
- material aid/brokerage (38% or over 45,700), with 88% receiving this service
- long-term housing (30% or over 36,600) with 4% receiving this service.

Figure DV.1: Clients who have experienced domestic and family violence, by top 6 services and service provision status, 2017-18



### Notes

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes emergency accommodation.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table DV.3.

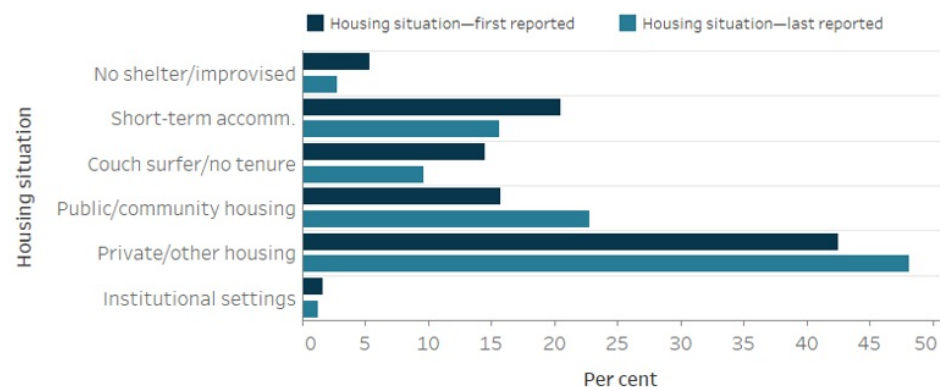
## Housing outcomes

The outcomes presented in this section examine the changes in clients' housing situations from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. It is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For clients experiencing domestic and family violence whose support ended in 2017-18 (Figure DV.2):

- the proportion of clients experiencing homelessness decreased from 40% to 28% (this decrease was largest for those living in short-term or emergency accommodation (from 21% to 16%)).
- almost half (48%) were living in private or other housing (renter or rent free) following support—up from 43% at the start of support.
- almost 1 in 4 (23%) were living in public or community housing following support—up from 16% at the start of support.

**Figure DV.2: Clients who have experienced domestic and family violence, by housing situation at the beginning and end of support, 2017–18**



**Notes**  
 1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.  
 2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.  
 3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table DV.4.

Of those clients who were housed, but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent free), private or other housing (renter or rent free), or in an institutional setting (Table DV.3):

- 9 in 10 (89% or about 30,600 clients) were successfully assisted to maintain their tenancy
  - 81% (7,400) remained in public or community housing and a further 8% were housed in private or other housing
  - 83% (20,300) remained in private or other housing and a further 6% were housing in public or community housing.

Of those clients experiencing domestic and family violence who were homeless when they began support:

- 46% (10,500 clients) were assisted into stable housing at the end of support, the majority into private or other housing.
  - 57% (6,000) were assisted into private or other housing.
  - 40% (4,200) were assisted into public or community housing.

Agencies were best able to assist those in short-term or emergency accommodation (50% or over 5,900 clients) and couch surfers (44% or about 3,600 clients) into housing.

**TABLE DV.3: Clients who have experienced domestic and family violence, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	53.6	46.4
At risk of homelessness	11.0	89.0

**Notes**

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table DV.4.

**References**

1. Spinney A, 2012. Home and safe? Policy and practice innovations to prevent women and children who have experienced domestic and family violence from becoming homeless. Final report no. 196. Melbourne: Australian Housing and Urban Research Institute.
2. Council on Federal Financial Relations 2018. National Housing and Homelessness Agreement.



## Client groups of interest

The 2015 ABS Survey of Disability, Ageing and Carers (SDAC) estimates that almost 1 in 5 Australians (18.3% of the total population) have a disability. This estimate includes all those with any disability, ranging from mild to severe disabilities [1]. The measure of disability in the Specialist Homelessness Services Collection (SHSC) identifies those who always or sometimes need help or supervision with one or more core activities (self-care, mobility and communication) due to a long-term health condition or disability.

In 2017-18, 23,400 specialist homelessness services (SHS) clients reported one or more limitations with a core activity (self-care, mobility, and/or communication). Of these, 7,900 clients (or 3% of all SHS clients) reported that they always or sometimes needed assistance. It is this subgroup of people living with disability, those with severe or profound core activity limitation, who are described in this section. In this report, 'severe or profound core activity limitation' is sometimes abbreviated to 'severe or profound disability'.

The analysis of the availability and appropriateness of homelessness services for this group of clients contributes to information about people with disability across a range of government services.

### Key findings in 2017-18

- 7,900 clients assisted by homelessness agencies reported a severe or profound core activity limitation.
- A similar number of females (4,000 or 51%) reported severe or profound disability as males (3,900 or 49%).
- Most clients with a severe or profound disability were housed but at risk of homelessness when they sought assistance (54%).
- The age group with the highest proportion of adult clients with a severe or profound disability was 45-54. This age group had a higher proportion of female clients (54% compared with 46% male), in line with the general SHS population of the same age group (60% female and 40% male).
- Housing outcomes improved following support, with fewer clients homeless (30% down from 44% at the start of support).
- Most clients with severe or profound disability ended support housed (70% or almost 3,400); many in private or other housing (1,800 or 37%), up from 56% at the beginning of support. Public and community housing saw the greatest increase in client numbers from 17% at the start of support up to 27%.
- Clients with severe or profound disability received an average of 2.5 support periods; this is higher than the general SHS population (1.7).
- Over half of this client group (63%) had received homelessness services at some time in the previous 5 years.

### The reporting of disability in the SHSC

The SHSC disability questions are asked of all clients and are based on core activity limitations and whether the client has any need for assistance with these activities. It is important to note that data for clients with disability who require assistance may not be comparable across age groups due to differences in the interpretation of the SHSC disability questions. This issue mainly relates to young children, and therefore any comparisons between age groups should be made with caution.

Further details about measuring disability in the SHSC and the definition of a client with severe or profound core activity limitation are provided in [Technical information](#).

### Profile of clients with severe or profound disability in 2017-18

In 2017-18, 23,400 SHS clients had a core activity limitation. Of these, 7,900 clients (or 3% of all SHS clients) answered that they 'always/sometimes need help and/or supervision' with self-care, mobility or communication (Supplementary table DIS.1). Of these clients with a severe or profound disability:

- There were equal proportions male (49% or 3,900 clients) and female (51% or 4,000 clients).
- The proportion of those aged 55 or over was double that of the general SHS population (16% compared with 8%).
- Over 1 in 5 were Indigenous (22%), similar to all SHS clients (23%).
- 2 in 3 (68%) accessed services in *Major cities* and 20% in *Inner regional* areas, similar to the general SHS population (62% and 23% respectively).
- Over 1 in 3 (37%) were living alone when they approached homelessness services for assistance, higher than the general SHS population (30%).

In 2017-18, clients with profound or severe disability:

- received a median of 76 days of support, almost double the general SHS population (median 39 days) (Table DIS.2 and Table CLIENT.1). This may reflect these clients have more complex needs upon presentation
- were more likely to receive accommodation (38%) than the general SHS population (29%), and for those who did, the length of supported accommodation was much longer (median 58 nights compared with 32 nights for the general SHS population)
- had an average of 2.5 support periods per client. This was higher than the general SHS population (1.7 support periods per client)
- were more likely to be returning clients. Nationally, 63% of these clients had received SHS assistance at some time in the previous 5 years.



## Vulnerabilities

Living with disability may not be the only challenge faced by this group of clients. Almost 3 in 4 (74% or nearly 4,500) clients with severe or profound disability aged 10 and over also reported experiencing additional vulnerabilities including mental health issues, problematic drug and/or alcohol use or domestic and family violence (compared with 62% of the total SHS population). Of those clients with severe or profound disability who did present with additional vulnerabilities (Table DIS.1):

- 1 in 3 (31%) reported experiencing a mental health issue. A further 15% experienced both a mental health issue and domestic and family violence.
- A further 7% of clients experienced all three vulnerabilities.

**Table DIS.1: Clients with severe or profound core activity limitations by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	No	No	500	8.4
No	Yes	No	1,900	30.9
No	No	Yes	150	2.6
Yes	Yes	No	870	14.5
No	Yes	Yes	620	10.4
Yes	No	Yes	40	0.7
Yes	Yes	Yes	400	6.7
No	No	No	1,550	25.9
			<b>4,500</b>	<b>100</b>

### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

## Clients with severe or profound disability: 2013-14 to 2017-18

It is important to note that changes over time should be made with caution due to changes in the interpretation of the disability questions (see [Technical notes](#) for more information).

Key trends identified over the previous 5 years of collection include:

- Despite an increase in the number of clients with a severe or profound disability across the 4 years to 2016-17, the number declined by 28% to 7,900 in 2017-18 (Table DIS.2).
- The median number of nights of accommodation increased from 50 nights in 2016-17 to 58 nights in 2017-18.
- Fewer people with severe or profound disability received accommodation; in 2017-18, 38% received accommodation, down from 42% five years earlier.

**Table DIS.2: Clients with severe or profound core activity limitation: at a glance—2013-14 to 2017-18**

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	6,979	8,789	9,812	10,988	7,902
<b>Proportion of all clients</b>	3	3	4	4	3
<b>Rate (per 10,000 population)</b>	3.0	3.7	4.1	4.5	3.2
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	43	43	44	44	46
At risk of homelessness	57	57	56	56	54
<b>Length of support (median number of days)</b>	68	59	64	65	76

Average number of support periods per client	2.3	2.2	2.3	2.3	2.5
Proportion receiving accommodation	42	40	39	39	38
Median number of nights accommodated	58	55	55	50	58
Proportion of a client group with a case management plan	73	68	70	70	74
Achievement of all case management goals (per cent)	18	19	18	18	22

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18.

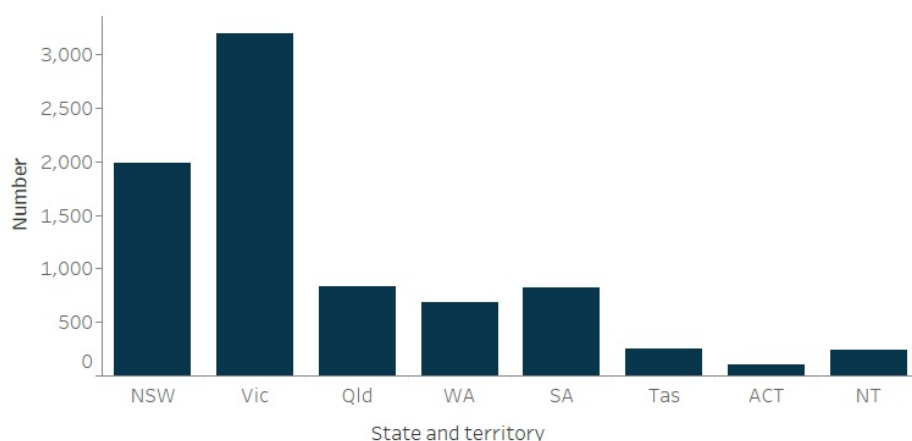
Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

## States and territories

Almost 4 in 10 clients with severe or profound disability accessed SHS services in Victoria (39% or 3,200 clients). This was followed by New South Wales (24% or 2,000 clients), Queensland and South Australia (both 10% or around 800 clients) (Figure DIS.1).

In 2017-18, the Northern Territory had the highest rate of SHS clients with severe or profound disability (9.8 clients per 10,000 people), followed by Victoria (5.1 clients), while Queensland had the lowest rate (1.7 per 10,000 people) (Supplementary table DIS.4). Clients in Victoria received the most support periods on average (3.4 support periods per client), followed by Western Australia (2.3 support periods per client) and Tasmania (2.1 support periods per client).

Figure DIS.1: Clients with severe or profound core activity limitation, by state and territory, 2017-18



Source: Specialist Homelessness Services Collection 2017-18, National supplementary table DIS.4

## Main source of income

In 2017-18, of clients aged 15 and over with severe or profound disability (over 4,700), 88% reported that their main source of income was a government payment, in particular:

- Disability Support Pension (49% compared with 16% of all SHS clients)
- Newstart Allowance (19% compared with 29% of all SHS clients)
- Age Pension (7% compared with 3% of all SHS clients)
- Parenting Payment (5% compared with 18% of all SHS clients).

A larger proportion of male clients with severe or profound disability (52%) reported that their main source of income was the Disability Support Pension, compared with females (47%). Males were also more likely to report the Newstart Allowance as their main source of income (22%), compared with females (17%).

## Employment and education status

Of the 5,700 clients with severe or profound disability aged 15 and over:

- Over half were not in the workforce (59% or 3,200 clients). A further 37% (or 2,000 clients) were unemployed, that is, actively looking for work, which was lower than the SHS client population (48%) (Supplementary table DIS.14).
- 3% of these clients (or less than 200 clients) were employed. By comparison, 12% of the total SHS client population were employed.
- The proportion of clients aged 15-24 whose educational enrolment status was reported and who were not enrolled in education was similar to that of the general SHS client group (69% and 68% respectively) (Supplementary table DIS.16).
- 1 in 7 clients (14% or around 100 clients) aged 5-14 whose educational enrolment status was reported were not enrolled in education at the beginning of support, similar to the general SHS population (13%).

## Source of referral

Similar to other SHS clients, most clients with severe or profound disability seek support from SHS agencies with a formal referral (67% or 5,300 clients). Both government and non-government agencies can make formal referrals including hospitals, family and child support agencies and mental health services. In 2017-18, referrals for clients with a severe or profound disability were most commonly made by:

- a specialist homelessness agency/outreach worker (17% or 1,300 clients)
- family and/or friends (7% or 600 clients)
- telephone/crisis referral agency (6% or over 400 clients).

An additional 1 in 10 (11% or over 800 clients) were referred by another agency (government or non-government).

## Reasons for seeking assistance

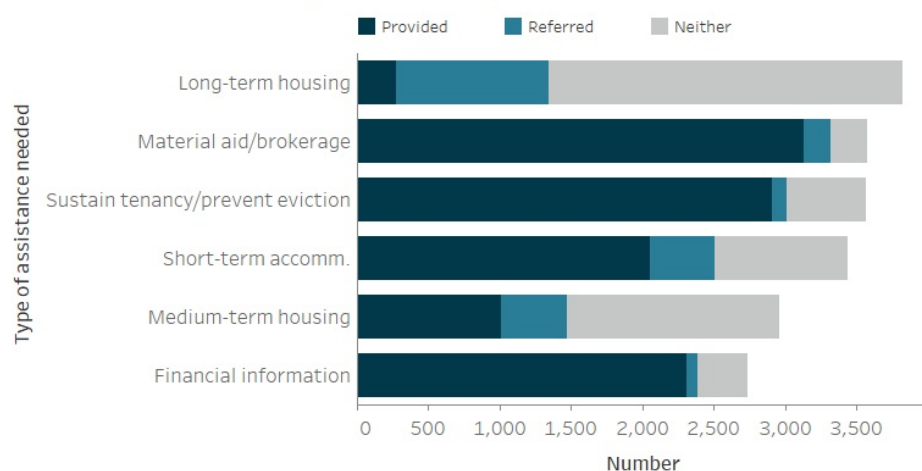
The most common main reason this group of clients reported for seeking assistance was housing crisis (25%). Less than 1 in 5 (18%) reported the main reason they had sought assistance was for domestic and family violence, which was lower than the general SHS population (30%).

## Services needed and provided

Clients with severe or profound core activity limitation were more likely to need some specific services than the general SHS client population; for example, mental health services (19% compared with 9%) and assistance to sustain housing tenure (45% compared with 33%). Considering housing needs of clients with a profound or severe disability in 2017-18:

- Almost half needed long-term housing (48% or 3,800 clients), 37% (or 3,000 clients) needed medium-term/transitional housing and 44% (or 3,400 clients) needed short-term or emergency accommodation (Figure DIS.2).
- Most of those needing short-term or emergency accommodation received it (60% or 2,100 clients) while one-third (34% or 1,000 clients) of those needing medium-term/transitional housing received it. Less than 1 in 10 clients with severe or profound disability received the long-term housing needed (7% or less than 300 clients) (Figure DIS.2).

Figure DIS.2: Clients with severe or profound core activity limitation, by most needed services and service provision status, 2017-18



### Notes

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.

2. Short-term accommodation includes emergency accommodation; sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction; and medium-term housing includes transitional housing.

3. 'Neither' indicates a service was neither provided nor referred.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table DIS.5.

Other services that were needed by SHS clients with severe or profound disability:

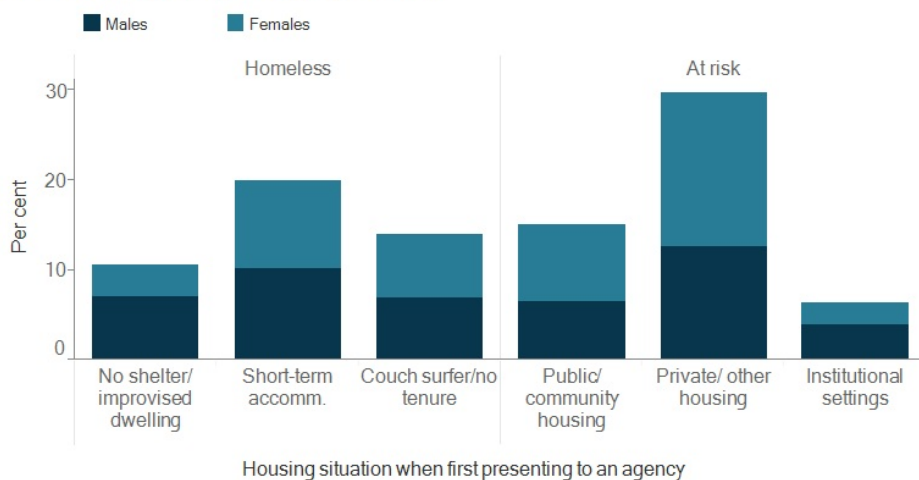
- Many requested advice/information (83%), advocacy/liaison (68%) and material aid/brokerage (45%).
- 1 in 5 clients (22% or 1,700) needed health/medical services and over half (57%) of clients with these identified needs had these services provided. Less than 1 in 5 clients (17% or over 1,300) were identified as needing mental health services with half (53%) of these clients receiving these services (Supplementary Table DIS.5).
- 4% of clients (or about 300 clients) needed support and assistance specifically for their physical disability. Similarly, 4% (or over 300 clients) needed services specifically for their intellectual disability. Less than half (44% and 42% respectively) of these identified needs for disability services were met.
- Clients with severe or profound disability were more likely to need family relationship assistance (22% or over 1,700 clients), assistance with challenging social/behavioural problems (21%) and assistance for trauma (17%) than the general SHS population (18%, 13% and 12% respectively).

### Housing situation at the start of support

Upon presentation to SHS agency in 2017-18, 54% of clients with severe or profound disability were housed but at risk of homelessness (Figure DIS.3). Of these, 30% were in private or other housing, 15% were in public or community housing and 6% in institutional settings. The remaining 46% of clients were homeless at the start of SHS support including 11% sleeping rough, 20% in short-term accommodation and 14% couch surfing.

The housing situation at the start of support for clients with severe or profound disability was broadly similar to the total population of SHS clients.

**Figure DIS.3: Clients with severe or profound core activity limitation, by housing situation at beginning of support, 2017-18**



*Note:* Per cent calculations based on total clients, excluding 'not stated'.

*Source:* Specialist Homelessness Services Collection 2017-18, National supplementary table DIS.6.

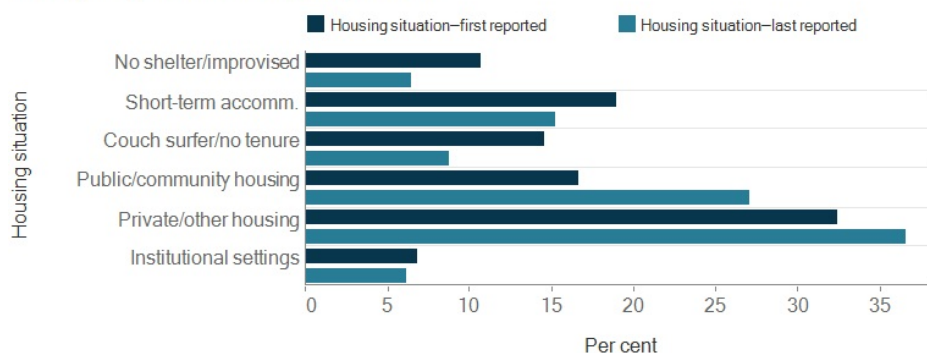
### Housing and other outcomes

The outcomes presented in this section examines the changes in clients' housing situations from the start to end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For clients with severe or profound disability (Figure DIS.4):

- More were living in public or community housing at the end of support, increasing from 17% of clients at the beginning of support to 27% at the end (from 800 to 1,300 clients).
- At the end of support more clients were living in private or other housing, increasing from 1,600 clients at the beginning of support (32%) to 1,800 clients (37%).
- The proportion who were couch surfing decreased from 15% (or 700 clients) at the beginning of support to 9% (or 400 clients) at the end of support.

**Figure DIS.4 Clients with severe or profound core activity limitation, by housing situation at beginning and end of support, 2017-18**



*Notes*  
 1. Per cent calculations based on Total clients, excluding 'Not stated'.  
 2. No shelter/improvised includes inadequate dwellings, short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table DIS.7.

Of those clients who were housed but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings) (Table DIS.3):

- 9 in 10 clients (89% or 2,300 clients) were assisted to maintain their housing tenancy.
- Around 8 in 10 (82%) of those living in public or community housing remained in this housing. A further 7% of those in public or community housing moved into private or other housing at the end of support.
- Many of those (78%) living in private or other housing were assisted to maintain their tenancy with a further 10% assisted into public or community housing.

Of those clients who were homeless when they began SHS support; that is, living either with no shelter or improvised/inadequate dwelling, short-term temporary accommodation or in a house, townhouse or flat with relatives (rent-free) (Table DIS.3):

- Less than half were assisted (46% or 900 clients) into housing at the end of support.
- Agencies were best able to assist those living in short-term or emergency accommodation (53%) and those couch surfing (44%) into housing.

**Table DIS.3: Clients with severe or profound core activity limitation, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housing
Homeless	54.3	45.7
At risk of homelessness	11.3	88.7

**Notes**

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist homelessness services 2017-18, National supplementary table DIS.7.

Education and employment status remained nearly unchanged following support. For example, there was little difference in the proportion of pre- and post-support clients who were unemployed (37% compared with 38%) or not in the labour force (59% compared with 58%).

**Reference**

1. Australian Bureau of Statistics (ABS) 2016. Disability, ageing and carers, Australia. First Results, 2015. ABS cat. no. 4430.0. Canberra: ABS.

## Client groups of interest

Young people require access to a range of accommodation and support services as they grow and develop their skills to live independently. Young people experiencing homelessness can face increased disadvantage than other cohorts, as they lack access to family support and networks, compounding the need for crisis and transitional housing assistance [1]. Children and young people are a national priority cohort listed in the National Housing and Homelessness Agreement [2], which came into effect on 1 July 2018.

According to Census data, there were approximately 27,700 homeless youth aged 12-24 years in 2016, representing 24% of the total estimated homeless population; up from 25,200 people in 2011 and 21,900 in 2006 [3,4,5].

Of the approximate 27,700 homeless youth in 2016, 59% (or 16,400) were living in 'severely' crowded dwellings, and 18% (or 5,000) were in supported accommodation for the homeless. Additionally, 10% (or 2,900) were staying temporarily with other households, and 9% (or 2,600) were living in boarding houses [3].

Although young people are over-represented in the homeless population, homeless estimates for youth are likely to have been underestimated in the Census [3]. For example, a usual address may be reported for 'couch surfers' because the young person is staying in a household on Census night. Their homelessness is masked as their characteristics look no different to other youth who are not homeless, but visiting another household on Census night [3].

### Key findings in 2017-18

- There were around 43,200 young people aged 15-24 who presented alone to a specialist homelessness services (SHS) agency in 2017-18.
- Over half (52% or 22,500) of young clients were homeless at presentation to a SHS agency.
- A quarter (11,200 young people or 26%) were aged 15-17.
- Over 1 in 5 (22%) sought assistance due to unstable housing (housing crisis).
- More than half (55%) had received services in the previous 5 years.
- There were improvements in housing outcomes with fewer young clients homeless following support (40%, down from 53% at the beginning of support).
- Most young clients at risk of homelessness were assisted to maintain a housing tenancy (86%).

### Profile of young people presenting alone in 2017-18

Of the 43,200 young people (aged 15-24) presenting alone to a specialist homelessness agency in 2017-18:

- Almost 2 in 3 (64% or 27,500 clients) clients were female.
- Just over half (55%) were returning clients, that is, they were assisted at some point in the previous 5 years.
- One in 4 (25%) were Indigenous.
- Two in 5 (41%) were living alone.
- Over 3 in 5 (61% or 26,400) presented to SHS agencies located in *Major cities*; 3% (or 1,500 clients) in *Remote/very remote* areas.

### Vulnerabilities

Three of the main vulnerabilities reported in the SHS client population are mental health issues, domestic and family violence and problematic drug and/or alcohol use. Almost two-thirds (63% or 27,100) of young clients presenting alone reported at least one of these vulnerabilities (Table YOUNG.1):

- 2 in 5 reported mental health issues (41% or 17,700 clients).
- Almost 2 in 5 (37% or 15,800 clients) reported domestic and family violence.
- 5 per cent (or 2,300 clients) reported all three vulnerabilities.
- More than 1 in 3 (37%) reported experiencing none of these vulnerabilities, in line with all SHS clients (38%).

**Table YOUNG.1: Young people presenting alone, by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	Yes	Yes	2,300	5.3
Yes	No	Yes	400	1.0
Yes	Yes	No	5,000	11.5
Yes	No	No	8,100	18.7
No	Yes	Yes	2,200	5.2

No	Yes	No	8,200	18.9
No	No	Yes	900	2.2
No	No	No	16,100	37.2
			<b>43,200</b>	<b>100</b>

#### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 15-24.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Young people presenting alone: 2013-14 to 2017-18

Since 2013-14, the number of young people presenting alone to an agency has remained relatively constant. Key trends over the past 5 years are (Table YOUNG.2):

- The rate of service use by young people presenting alone to SHS agencies has decreased from 19 young people per 10,000 in 2013-14 to 18 in 2017-18.
- Of all young people presenting alone between 2013-14 and 2017-18, over 1 in 4 (27%) were Indigenous.
- The median number of days of support and nights of accommodation for young people presenting alone was 49 days and 45 nights.
- Around 1 in 5 clients achieved all their case management goals across 2013-14 to 2017-18. This group remains one of the least likely of all priority groups to achieve all their case management goals.

**Table YOUNG.2: Young people (15-24 years) presenting alone: at a glance—2013-14 to 2017-18**

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	44,414	41,780	43,165	42,131	43,180
<b>Proportion of all clients</b>	17	16	15	15	15
<b>Rate (per 10,000 population)</b>	19.2	17.8	18.1	17.4	17.6
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	50	52	52	52	52
At risk of homelessness	50	48	48	48	48
<b>Length of support (median number of days)</b>	46	44	44	47	49
<b>Average number of support periods per client</b>	1.7	1.8	1.8	1.8	1.9
<b>Proportion receiving accommodation</b>	36	35	34	31	31
<b>Median number of nights accommodated</b>	41	41	41	44	45
<b>Proportion of a client group with a case management plan</b>	57	58	60	60	63
<b>Achievement of all case management goals (per cent)</b>	16	20	18	18	19

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.
4. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

## Housing situation

At the beginning of support around half of young people presenting alone to SHS agencies were homeless (52% or about 22,500 clients). A further 20,700 (or 48%) young people presenting alone were at risk of homelessness (Table YOUNG.2).

## Reasons for seeking assistance

In 2017-18, the main reason young people presenting alone sought assistance included: housing crises (22% or 9,600 clients), domestic and family violence (18% or 7,800 clients), inadequate or inappropriate dwelling conditions (11% or 4,800 clients), and relationship/family breakdown (11% or 4,600 clients).

## Services needed and provided

For young people presenting alone, the most common needs identified (excluding basic services such as advice/information, or advocacy/liaison) were accommodation related, with 63% requesting some form of accommodation (Figure YOUNG.1):

- Just over 4 in 10 requested short-term or emergency accommodation (41%), with 53% of those who needed it provided this accommodation.
- Just under 4 in 10 requested medium-term/transitional housing (38%), with 28% of those who needed it provided this accommodation.
- Just over 4 in 10 requested long-term housing (41%), with just 1 in 20 (5%) of those who needed it provided this accommodation.

Compared with the overall SHS population, young people presenting alone were more likely to be identified as needing assistance with:

- living skills/personal development (34% compared with 20% of the overall SHS population)
- education (20% compared with 8%)
- medium-term/transitional housing (38% compared with 28%)
- employment (16% compared with 6%).

The need for these services was unmet in some cases. Nearly 1 in 6 (17%) of those who identified a need for educational assistance were not provided that service, as were 54% of those who identified a need for medium-term/transitional housing, and 21% for employment assistance.

**Figure YOUNG.1: Young people presenting alone, by top 6 most needed services and service provision status, 2017-18**



### Notes

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes temporary and emergency accommodation; medium-term housing includes transitional housing; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.
3. A client may request multiple services and assistance types; therefore client counts are not mutually exclusive.
4. 'Neither' indicates a service was neither provided nor referred.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table YOUNG.3

## Housing outcomes

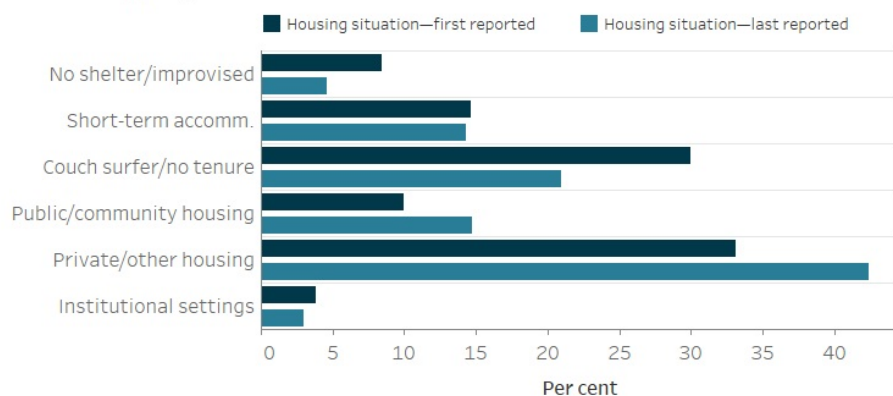
The outcomes presented in this section examine the changes in clients' housing situations from the start to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in future.

For young people presenting alone (Figure YOUNG.2):

- The proportion of homelessness reduced: from 53% (or 14,300 clients) at the beginning of support to 40% (or 10,300 clients) at the end of support.
- The most common housing outcome for young people presenting alone was private or other housing (as a renter, rent free or owner) (42%, or 10,900 clients)—an increase from 33% (or 8,900 clients) at the beginning of support.
- 'Couch surfing' rates reduced. At the beginning of support, 30% (or 8,100) of young people who presented alone were 'couch surfing' or staying in housing with no tenure. This decreased to 21% (or 5,400 clients) by the end of support.



Figure YOUNG.2: Young people presenting alone, by housing situation at beginning and end of support, 2017–18



*Notes*

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.
3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table YOUNG.4.

Where a young person presented housed, but at risk of homelessness (around 11,700) (that is, living either in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings) (Table YOUNG.3):

- The majority of clients (86% or 10,100 clients) were assisted to maintain their housing.
- For young people living in public or community housing, over 7 in 10 (74% or 1,900 clients) were assisted to maintain this housing, and a further 13% (or 300 clients) were assisted into private or other housing.
- Where the young person was living in private or other housing, 80% (or 6,700 clients) were assisted to maintain this housing, and a further 5% (or about 400 clients) were assisted into public or community housing.

For those young people presenting alone who were homeless when they began support (around 12,800) (that is, living either with no shelter or improvised/inadequate dwelling, short-term or emergency accommodation, or in a house, townhouse, or flat with relatives (rent free)), (Table YOUNG.3):

- Almost 2 in 5 (37% or 4,700 clients) were assisted into housing.
  - Of those clients who were in short-term or emergency accommodation at the beginning of support, 2 in 5 (40% or around 1,400 clients) were assisted into stable housing at the end of support.
  - Rough sleepers (no shelter or improvised dwelling) were the least likely to end support in stable housing (31% or 600 clients).
- Of all young people who began support homeless, 63% (or 8,100 clients) remained homeless.
- The housing situation for around 6,600 young people presenting alone was unknown at the end of support.

Table YOUNG.3: Young people presenting alone, housing situation at beginning and end of support, 2017-18 (per cent)

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	63.2	36.8
At risk of homelessness	14.3	85.7

*Notes*

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table YOUNG.4.

**References**

1. Homelessness Australia. 2017. A National Homelessness Strategy: why we need it. Strengthening the service response to people who are homeless or at risk of homelessness.
  2. Council on Federal Financial Relations 2018. [National Housing and Homelessness Agreement](#).
  3. Australian Bureau of Statistics (ABS) 2016. Census of population and housing: estimating homelessness, 2016. ABS cat. No. 2049.0. Canberra: ABS.
  4. ABS 2011. Census of population and housing: estimating homelessness, 2011. ABS cat. No. 2049.0. Canberra: ABS.
  5. ABS 2006. Census of population and housing: estimating homelessness, 2006. ABS cat. No. 2049.0. Canberra: ABS.
- 



## Client groups of interest

Older Australians are a national priority homelessness cohort in the National Housing and Homelessness Agreement, [1] recognising the severe impact homelessness may have on older Australians. During 2017-18, people aged 55 or older comprised 8% (24,100 clients) of all specialist homelessness services (SHS) clients. Specialist homelessness service use by this group is increasing with the number of clients up 33% since 2013-14 (around 18,200 clients).

For the purposes of the Specialist Homelessness Services Collection (SHSC), older people are defined as clients aged 55 years and over. For further information, see [Technical notes](#).

### Key findings in 2017-18

- There were about 24,100 people aged 55 years or older seeking homelessness services in 2017-18, an increase of 2% from 2016-17.
- 2 in 3 older clients presented housed but at risk of homelessness (67%).
- Housing outcomes improved; fewer older clients were homeless following support (down from 33% to 25%) with the largest decrease in the number of 'rough sleepers', down 4 percentage points to 7% at the end of support.
- Most older clients at risk of homelessness were assisted to maintain a housing tenancy (95%).

### Profile of older clients in 2017-18

Of the almost 24,100 older clients who received SHS support during 2017-18:

- Older clients were less likely than the general SHS population to be female (57% compared with 61%).
- Almost 2 in 3 (65%) were aged 55-64; the remaining one-third were 65 or over.
- Older clients were more likely to be living alone (59%) than the general SHS population (30%).
- Older clients were less likely than the general SHS population to be homeless on presentation than the general SHS population (33% compared with 43%).
- Half (52%) of older clients sought assistance for the first time in 2017-18; the remaining 48% had received assistance at some time in the previous 5 years.

### Vulnerabilities

Nearly half (49% or around 11,700) of older clients reported at least one vulnerability, that is, a mental health issue, domestic and family violence or problematic drug and/or alcohol use (Table OLDER.1).

- Almost 1 in 5 reported either domestic and family violence or mental health issues (19% and 18% respectively); a further 5% reported both of these issues.
- 2% reported problematic drug and/or alcohol use, while a further 3% reported both problematic drug and/or alcohol use and mental health issues.
- Very few older clients reported all three vulnerabilities (1%).

**Table OLDER.1: Older clients (55 years and older), by selected vulnerability characteristics, 2017-18 (per cent)**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	No	No	4,600	19.1
Yes	Yes	No	1,300	5.4
Yes	No	Yes	100	0.4
No	Yes	Yes	700	2.9
No	Yes	No	4,300	17.9
No	No	Yes	500	2.0
Yes	Yes	Yes	200	0.8
No	No	No	12,400	51.4
			<b>24,100</b>	<b>100</b>

Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 55 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Older clients: 2013-14 to 2017-18

Since 2013-14, the number of older clients seeking assistance from SHS agencies has increased at a greater rate than other age groups. Key trends identified in this client population over the 5 years to 2017-18 are (Table OLDER.2):

- The rate of older clients is increasing; the rate has increased from 8 older clients per 10,000 age-specific population in 2013-14 to 10 in 2017-18.
- The days of support received is increasing; the median number of days older clients receive support has increased from 21 days in 2013-14 to 28 days in 2017-18.
- The proportion receiving accommodation is decreasing; the proportion receiving any accommodation has fallen from 21% in 2013-14 to 16% in 2017-18. In addition, the median number of nights accommodated has decreased, down from 33 nights in 2013-14 to 29 nights in 2017-18.

Table OLDER.2: Older clients (55 years and older): at a glance—2013-14 to 2017-18

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	18,182	18,741	21,610	23,567	24,094
<b>Proportion of all clients (per cent)</b>	7	7	8	8	8
<b>Rate (per 10,000 population)</b>	7.9	8.0	9.1	9.7	9.8
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	33	33	34	35	33
At risk of homelessness	67	67	66	65	67
<b>Length of support (median number of days)</b>	21	24	25	27	28
<b>Average number of support periods per client</b>	1.5	1.5	1.5	1.5	1.6
<b>Proportion receiving accommodation (per cent)</b>	21	19	18	17	16
<b>Median number of nights accommodated</b>	33	31	31	30	29
<b>Proportion of a client group with a case management plan</b>	45	48	50	51	52
<b>Achievement of all case management goals (per cent)</b>	30	31	27	26	27

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.
4. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

### Housing situation

At the beginning of support, the majority of older clients were at risk of homelessness (67% or about 16,100 clients). One in 3 (33% or 8,000) older clients were homeless when first reporting to SHS agencies for assistance in 2017-18.

## Reasons for seeking assistance

The three main reasons why clients within this group sought assistance from SHS agencies in 2017-18 were:

- housing crisis (21% or 5,000 clients)
- domestic and family violence (21% or 4,900)
- financial difficulties (17% or 4,000).

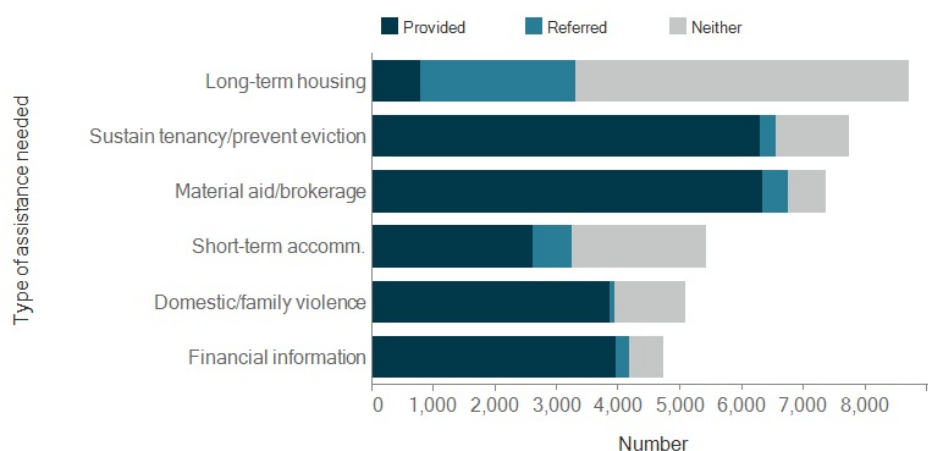
## Services needed and provided

In 2017-18, older SHS clients were less likely to request accommodation services (46%) than the general SHS population (56%), potentially due to the lower proportion of older clients presenting homeless. However, of those who did request accommodation, most needed long-term housing (36%) and they were almost twice as likely as the general SHS population to be provided with this form of accommodation.

Other services most commonly needed by older clients during 2017-18 were:

- assistance to sustain tenancy or prevent tenancy failure or eviction (32%) with 81% provided this assistance
- material aid/brokerage (31%) with 86% provided this assistance
- short-term or emergency accommodation (23%) with 48% provided this assistance (Figure OLDER.1).

**Figure OLDER.1: Older clients, by most needed services and service provision status (top 6), 2017-18**



### Notes

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes temporary and emergency accommodation; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.
3. 'Neither' indicates a service was neither provided nor referred.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table OLDER.3.

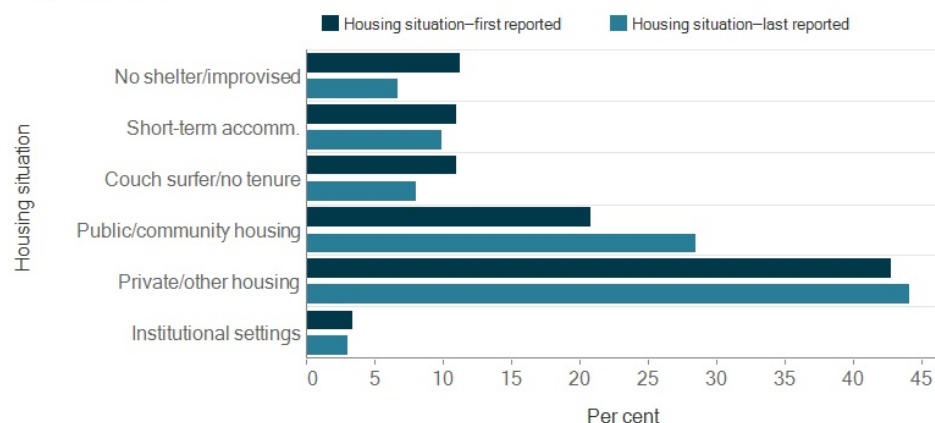
## Housing outcomes

The outcomes presented in this section examine the changes in a client's housing situation from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods were closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For older clients (Figure OLDER.2):

- The majority of older clients were at risk of homelessness upon presentation to an SHS agency (67%) with most living in private or other housing at the time (43%). This trend continued throughout support, with older clients most commonly ending their support in private or other housing (44% or about 6,800). The proportion of older clients in public or community housing following support also increased from 21% to 28% in 2017-18.
- There was a reduction in the proportion of older clients 'rough sleeping' (no shelter or improvised/inadequate dwelling), falling from 1 in 10 clients (11% or 1,700 clients) at the commencement of support to 7% (or around 1,000 clients) at the end of support.

**Figure OLDER.2: Older clients, by housing situation at beginning of support and end of support, 2017-18**



*Notes*  
 1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.  
 2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.  
 3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table OLDER.4.

The majority of older clients were housed but at risk of homelessness when they began support (Table OLDER.3). For those older clients who had ended support:

- Agencies were best able to assist those in public or community housing or private or other housing; 95% were assisted to maintain some form of housing.
  - Around 9 in 10 older clients were able to maintain their public or community housing tenancy (92% or 2,900 clients) with a further 4% assisted into private or other housing.
  - Nearly 9 in 10 older clients were able to maintain their private or other housing tenancy (87% of 5,600 clients) with a further 7% assisted into public or community housing.
- For those older clients who were homeless when they began support, agencies were able to assist 35% into either public or community housing, private or other housing or institutional settings.

**Table OLDER.3: Older clients, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	65.1	34.9
At risk of homelessness	5.1	94.9

*Notes*

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18. National supplementary table OLDER.4.

**Reference**

1. Council on Federal Financial Relations 2018. [National Housing and Homelessness Agreement](#).



## Client groups of interest

People with mental health issues are a group who are particularly vulnerable to homelessness. People living with a mental illness can be isolated, have disrupted family and social networks and sometimes suffer poor physical health, all of which impacts their capacity to find and maintain adequate housing. Several studies suggest that when people with mental health issues are supported by homelessness agencies, they are more likely to remain housed rather than returning to homelessness, in particular rough sleeping [1,2,3,4].

Specialist homelessness services (SHS) clients with a current mental health issue are identified as such if they provided any of the following information:

- They indicated that at the beginning of support they were receiving services or assistance for their mental health issues or had in the last 12 months.
- Their formal referral source to the SHS was a mental health service.
- They reported 'mental health issues' as a reason for seeking assistance.
- Their dwelling type either a week before presenting to an agency, or when presenting to an agency, was a psychiatric hospital or unit.
- They had been in a psychiatric hospital or unit in the last 12 months.
- At some stage during their support period, a need was identified for psychological services, psychiatric services or mental health services.

### Key findings in 2017-18

- The number of clients experiencing a current mental health issue increased 4% from the previous year to just over 81,000 clients in 2017-18.
- Less than half of clients were living alone (45%) when they sought assistance.
- Almost 2 in 3 (64%) were returning clients, having received services in the 5 years to 2017-18.
- Around half were housed but at risk of homelessness when seeking support from a SHS agency (52%) and the remaining 48% presented as homeless.
- Following support, fewer clients were homeless (36%, down from 48%) with 'rough sleepers' dropping 6 percentage points to 8% (about 3,200 clients) at the end of support.

### Profile of clients with a current mental health issue in 2017-18

Of the 81,000 clients reporting a current mental health issue in 2017-18:

- Around half (48%) were homeless when they presented to an agency for assistance. This is higher than the general SHS population (43%).
- They were more likely to present to a SHS agency alone (45%) or as a lone parent with child(ren) (23%) rather than as a couple with child(ren) (8%) or in a group (8%). In comparison, less than 1 in 3 (30%) of the general SHS population presented alone.
- Clients with a mental health issue were more likely than the general SHS population to come back to a SHS agency for support (2.4 support periods per client compared with 1.7). They also received a median of 72 days of support, almost twice as many days as the general SHS population (37 days of support).
- Most (64% or 51,900 clients) were 'returning' clients, that is, they had received homelessness services at some time in the previous 5 years up to 2017-18.
- Two in 3 clients (66%) with a current mental health issue received assistance from specialist homelessness services in *Major cities*.
- Nearly 1 in 5 clients (18% or 14,700 clients) experiencing a mental health issue were Indigenous. This is lower than the general SHS population (25%).

### Vulnerabilities

Of the 81,000 SHS clients who were experiencing mental health issues, over half (54%) were also experiencing additional vulnerabilities (Table MH.1). For example:

- 3 in 10 clients (30% or 24,300 clients) reported both mental health issues and experiencing domestic and family violence.
- 14% (or 11,200 clients) were experiencing both mental health issues and drug or alcohol issues.
- A further 1 in 10 (10% or 7,900 clients) were experiencing all three vulnerabilities; domestic and family violence, drug or alcohol issues and mental health issues.

These figures provide an insight into the multiple disadvantages clients experiencing mental health issues face and suggest the need for an integrated service response to homelessness for these clients.

**Table MH.1: Clients with a current mental health issue, by selected vulnerability characteristics, 2017-18 (per cent)**

Mental health issue	Domestic and family violence	Problematic drug and/or alcohol use	Clients	Per cent
---------------------	------------------------------	-------------------------------------	---------	----------

Yes	Yes	No	24,300	30.0
Yes	No	Yes	11,200	13.8
Yes	No	No	37,600	46.4
Yes	Yes	Yes	7,900	9.7
			<b>81,000</b>	<b>100</b>

#### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Clients with a current mental health issue: 2013-14 to 2017-18

The number of clients presenting with a current mental health issue has been increasing since the beginning of the Specialist Homelessness Services Collection (SHSC) in 2011-12. Various factors, including increased identification, community awareness and reduced stigma, have all potentially driven the increase in self-identification and reporting of mental illness among SHS clients. Key trends identified over the 5 years to 2017-18 include:

- Clients with a current mental health issue are one of the fastest growing client groups within the SHSC, growing at an average rate of 10% per year since 2013-14. Between 2016-17 and 2017-18 the increase was 4%, a smaller increase than in the previous periods.
- The rate of SHS service use by these clients has increased from 24 people per 10,000 population in 2013-14 to 33 people per 10,000 in 2017-18 (Table MH.2).
- The amount of support provided is increasing: an average of 2.4 support periods per client and a median of 72 days of support during 2017-18, compared with 2.3 periods and 67 days in 2013-14.

Table MH.2: Clients with a current mental health issue: at a glance—2013-14 to 2017-18

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	56,281	63,062	72,364	77,569	81,004
<b>Proportion of all clients</b>	22	25	26	27	28
<b>Rate (per 10,000 population)</b>	24.3	26.8	30.3	32.0	32.9
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	50	50	50	50	48
At risk of homelessness	50	50	50	50	52
<b>Length of support (median number of days)</b>	67	62	64	68	72
<b>Average number of support periods per client</b>	2.3	2.3	2.3	2.4	2.4
<b>Proportion receiving accommodation</b>	44	42	39	37	37
<b>Median number of nights accommodated</b>	48	44	44	45	43
<b>Proportion of a client group with a case management plan</b>	69	70	70	71	72
<b>Achievement of all case management goals (per cent)</b>	18	19	17	18	19

#### Notes



1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.
4. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

## Housing situation

At the beginning of support, around half of the clients with a current mental health issue were at risk of homelessness (52% or about 42,100 clients) in 2017-18. A similar proportion (48% or almost 38,900) of clients experiencing a current mental health issue were homeless upon their first presentation to a SHS agency.

## Reasons for seeking assistance

The main reasons clients presenting with a current mental health issue sought assistance were: housing crises (25%, or 19,800 clients), domestic and family violence (19%, or 15,200 clients), or inadequate or inappropriate dwelling conditions (11%, or 9,000 clients).

## Services needed and provided

Compared with the general SHS population, clients with a current mental health issue were more likely to identify a need in 2017-18 for:

- accommodation services (70% compared with 56%), in particular long-term housing (52% compared with 36%)
- health/medical services (21% compared with 10%)
- drug and alcohol services (10% compared with 4%).

Of the accommodation services needed by clients with a current mental health issue (Figure MH.1):

- Around 38,700 clients (48%) needed short-term or emergency accommodation; 58% of these clients were provided this assistance.
- Over 33,500 clients (41%) needed medium-term/transitional housing; 26% of these clients were provided this assistance.
- About 41,700 clients (52%) needed long-term housing; 5% of these clients were provided this assistance.

Of those clients experiencing a current mental health issue, about 3 in 10 (29% or 23,700) identified a need for mental health-based services. Specifically:

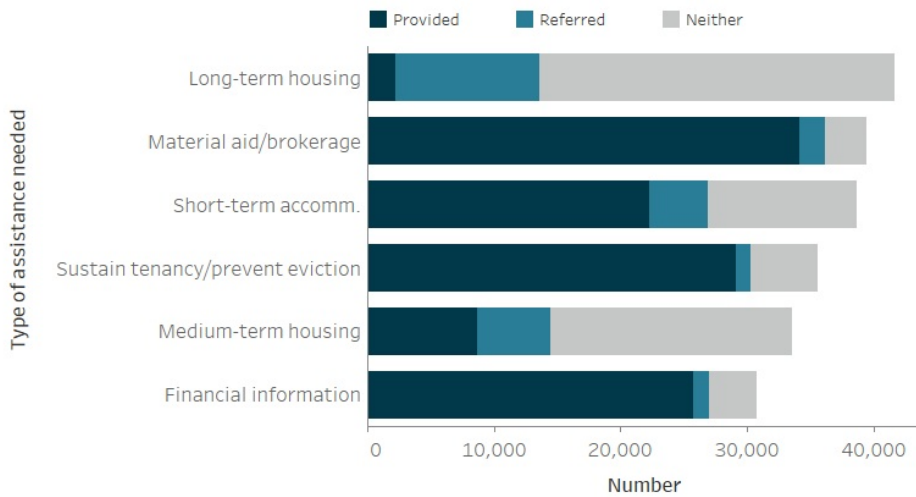
- 25% (or 20,570 clients) identified a need for mental health services with 46% of these requests met.
- 11% (or 8,900 clients) identified a need for psychological services with 36% of these requests met
- 7% (or 5,300 clients) identified a need for psychiatric services with 39% of these requests met.

Clients experiencing a current mental health issue were also identified as needing:

- advocacy/liason services (70% or 56,500 clients) with assistance provided to 97% of these clients
- assistance to sustain tenancy (44% or 35,600 clients) with assistance provided to 82% of these clients
- financial information (38% or 30,800 clients) with assistance provided to 84% of these clients.

These services were needed by clients with a mental health issue at higher rates than the general SHS population (advocacy/liason services 54%, assistance to sustain tenancy 33% and financial information 25%).

Figure MH.1: Clients with a current mental health issue, by top 6 most needed services and service provision status, 2017-18



Notes

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes temporary and emergency accommodation; medium-term housing includes transitional housing; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table MH.3.

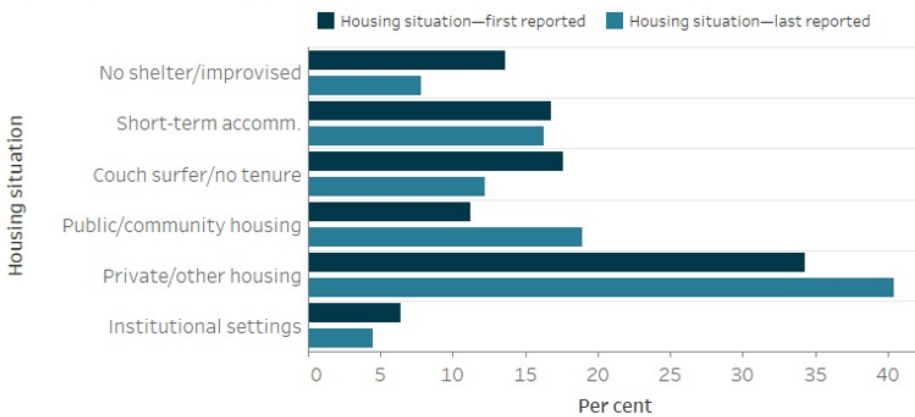
### Housing outcomes

The outcomes presented in this section examine the changes in clients' housing situations from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For clients with a current mental health issue (Figure MH.2):

- 64% (or 31,500 clients) ended support housed, an increase from 52% (or 26,800) at the start of support.
- Under 20,000 clients (40%) were in private rental at the end of support, increasing from 34% at the commencement of support.
- Around 9,300 clients (19%) were in public or community housing, which is an increase of 3,500 clients from the commencement of support.
- Less than 1 in 10 (8%) were homeless and rough sleeping (see Glossary[CJ1] ) at the end of support which is almost half the rate at the beginning of support (14%).

Figure MH.2: Clients with a current mental health issue, by housing situation at the beginning and end of support, 2017-18



Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.
3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table MH.4.

Of those clients who were housed but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings) (Table MH.2):

- The majority (86% or 21,300 clients) were also housed at the end of support.
- 8 in 10 (79% or 13,100 clients) clients in private or other housing were assisted to maintain this tenancy, and a further 7% were assisted into public or community housing at the end of support.

- Most of those (80% or 4,400 clients) in public or community housing were assisted to maintain this tenancy, with an additional 9% (almost 500 clients) assisted into private or other housing.

Of those clients who were homeless (that is, living either with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free)) when they began SHS support (Table MH.3):

- 2 in 5 (40% or 8,800 clients) were assisted into housing at the end of support while 60% (or 13,300 clients) remained homeless.
- Agencies were able to assist 45% of those in short-term or emergency accommodation (or 3,500 clients) into housing, as well as 41% of couch surfers (nearly 3,400 clients). In both instances, the majority of clients were housed in private or other housing at the end of support.

A challenge for SHS agencies is finding suitable housing options for clients. SHS agencies were able to assist many clients with a current mental health issue to either find or maintain housing, however, consistent with other studies, exiting homelessness for these clients can be difficult [5].

**Table MH.3: Clients with mental health issues, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	60.2	39.8
At risk of homelessness	14.4	85.6

*Notes*

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table MH.4.

**References**

1. Mental Health Council of Australia (MHCA) 2009. Home Truths: Mental Health, Housing and Homelessness in Australia.
2. Du C, Jacobs K, Loo S & Murray S 2013. The role of informal community resources in supporting stable housing for young people recovering from mental illness: key issues for housing policy-makers and practitioners. AHURI Final Report No. 199. Australian Housing and Urban Research Institute Limited.
3. Wood L, Flatau P, Zaretsky K, Foster, S, Vallesi, S & Miscenko, D 2016. What are the health, social and economic benefits of providing public housing and support to formerly homeless people? AHURI Final Report No. 265. Melbourne: Australian Housing and Urban Research Institute Limited.
4. Australian Bureau of Statistics (ABS) 2014. Mental Health and Experiences of Homelessness, Australia, 2014. ABS cat. no. 4329.0.00.005. Canberra: ABS.
5. Chamberlain C & Johnson G 2013. Pathways into adult homelessness. *Journal of Sociology*, 49(1): 60-77.

## Client groups of interest

Australians without stable accommodation after leaving health or social care arrangements can find themselves particularly vulnerable to homelessness. In particular, research has shown that young people exiting care can experience a range of poor outcomes, including homelessness and/or housing instability [1]. Recognising this vulnerability, people exiting institutions and care into homelessness are a national priority cohort listed in the National Housing and Homelessness Agreement [2], which came into effect on 1 July 2018.

The *Beyond 18* study, currently being undertaken by the Australian Institute of Family Studies and the Victorian Department of Human Services, has found care leavers aged 18 years and over have a higher than average risk of homelessness, partially due to a shortage of affordable and appropriate housing [3].

In the context of the Specialist Homelessness Services Collection (SHSC), clients are identified as leaving care if, in their first support period during 2017-18 (either the week before or at the beginning of the support period):

- their dwelling type was: hospital, psychiatric hospital or unit, disability support, rehabilitation, aged care facility; or
- their reason for seeking assistance was: transition from foster care/child safety residential care, or transition from other care arrangements.

### Key findings in 2017-18

- There were around 6,900 clients seeking support who were identified as having left care in 2017-18. More than half (57%) of these were aged 18-44 years, 10% (almost 700 clients) were aged 0-9.
- Two in 5 (41%) sought assistance as they were transitioning from foster care, child safety residential placements or other care arrangements.
- Almost 3 in 4 (74%) clients leaving care were at risk of homelessness at first presentation to Specialist Homelessness Services (SHS) agencies.
- Housing crisis was the most common main reason for seeking assistance from homelessness agencies, reported by 1 in 5 (20%) clients, followed by transitioning from other care arrangements (12%).
- 3 in 4 (76%) needed accommodation services.
- The median length of support was 63 days, and 48 nights of accommodation.
- At the end of support, 23% of clients were housed in private or other housing, 27% were living in institutional settings, and 17% were in public or community housing (renter or rent free).
- Around 1 in 3 were homeless at the end of support with 20% in short-term or emergency accommodation, 8% couch surfing and 5% with no shelter or living in an inadequate dwelling.

### Profile of clients leaving care in 2017-18

Of the 6,900 clients leaving care seeking SHS support in 2017-18:

- Over half (53%) were leaving either a psychiatric hospital (19%), rehabilitation facility (18%) or a hospital (15%).
- Just over 2 in 5 clients (41% or 2,800 clients) sought assistance because they were transitioning from foster care/child safety residential placements or other care arrangements.
- The majority were male (55% or 3,800 clients).
- Around 1 in 4 clients leaving care were Indigenous (23%).
- More than 3 in 5 had received services in the past: returning clients made up 61% (or 4,200) of this group and 39% (or 2,700) were new clients. That is, more clients had received services at some point in the previous 5 years than those seeking assistance for the first time in 2017-18.
- The majority (59%) of clients were living alone when they sought assistance.

### Vulnerabilities

Three of the main vulnerabilities reported in the SHS client population are mental health issues, problematic drug and/or alcohol use, and domestic and family violence. Of the SHS clients leaving care aged 10 and over in 2017-18 (Table LCARE.1):

- Over 4 in 5 clients (83% or around 5,400 clients) presented with at least 1 vulnerability; a reflection of the care types many of these clients are leaving (for example, hospital, psychiatric hospital/unit, rehabilitation).
- The majority (66% or 4,300) of clients leaving care reported a current mental health issue, and some reported multiple vulnerabilities:
  - 1 in 5 (22% or about 1,400 clients) reported both mental health and problematic drug and/or alcohol use
  - 1 in 10 (9% or about 600 clients) reported all three vulnerabilities.
- Almost 1 in 5 (17% or 1,100 clients) did not report any of the 3 vulnerabilities.

Table LCARE.1: Clients leaving care, by selected vulnerability characteristics, 2017-18

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	No	No	300	4.7
Yes	Yes	No	600	9.1
Yes	No	Yes	130	2.0
Yes	Yes	Yes	580	8.8
No	Yes	Yes	1,400	21.5
No	Yes	No	1,700	26.8
No	No	Yes	660	10.2
No	No	No	1,100	16.7
			<b>6,500</b>	<b>100</b>

#### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

#### Clients leaving care: 2013-14 to 2017-18

Since 2013-14, the number of people leaving care and seeking assistance from specialist homelessness services has remained relatively stable. Key trends identified in this client population over the 5 years to 2017-18 are (Table LCARE.2):

- The rate of service use by clients leaving care is increasing, up from 2 people per 10,000 population in 2013-14 to 3 people per 10,000 population in 2017-18.
- Both the median length of support and number of support periods have remained steady. The longer length of support provided to these clients (compared with all SHS clients), together with the high proportion presenting with additional vulnerabilities (82%), implies that they are presenting with complex needs.
- 1 in 5 clients achieved all their case management goals, up from 16% in 2013-14.

Table LCARE.2: Clients leaving care: at a glance—2013-14 to 2017-18

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	5,573	6,084	6,869	7,104	6,917
<b>Proportion of all clients</b>	2	2	2	2	2
<b>Rate (per 10,000 population)</b>	2.4	2.6	2.9	2.9	2.8
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	33	32	30	26	26
At risk of homelessness	67	68	70	74	74
<b>Length of support (median number of days)</b>	62	58	60	62	63
<b>Average number of support periods per client</b>	1.7	1.8	1.9	1.9	1.9
<b>Proportion receiving accommodation</b>	54	52	48	46	45
<b>Median number of nights accommodated</b>	48	44	42	49	48
<b>Proportion of a client group with a case management plan</b>	70	71	70	69	71

Achievement of all case management goals (per cent)	16	19	17	18	21
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#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical Notes.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

### Housing situation

At the beginning of support, the majority of clients leaving care were at risk of homelessness (74% or about 5,100 clients). More than 1 in 4 (26% or 1,800) clients leaving care were homeless when first reporting to SHS agencies for assistance in 2017-18.

### Reasons for seeking assistance

The main reasons for seeking assistance provided by clients leaving care that differed from the general SHS population were:

- transition from other care arrangements (12%, compared with less than 1% of the general SHS population);
- transition from foster care and child safety residential placements (8%, compared with less than 1%);
- mental health issues (9%, compared with 1%);
- domestic and family violence (8%, compared with 30%).

### Services needed and provided

Over 3 in 4 (76% or 5,200) clients leaving care needed accommodation services, much higher than the general SHS population (56%) (Supplementary table LCARE.3).

- More than half (52% or 3,600 clients) needed short-term or emergency accommodation, compared with 37% of the SHS general population.
- Almost half (44% or 3,000 clients) requested medium-term/transitional housing, higher than the general SHS population (28%). Clients leaving care were more likely to be provided with this type of accommodation than the SHS general population (34% compared with 29%).
- Long-term housing was requested by 46% (or around 3,200 clients) however, this was only provided to 8% of clients who needed it.

Other services most commonly needed by these clients were living skills/personal development (37%), transport (36%), and other basic assistance (79%). These services were needed by higher proportions of clients leaving care than clients in the general SHS population (20%, 20%, and 64%, respectively).

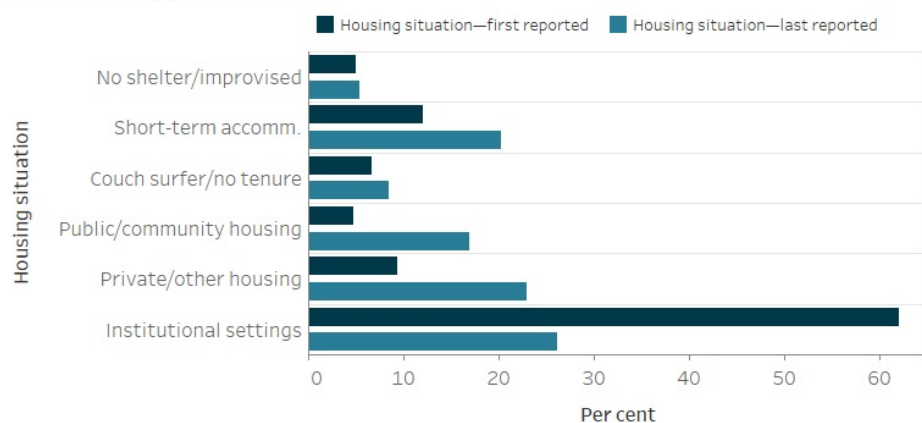
### Housing outcomes

The outcomes presented in this section examine the changes in clients' housing situations from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in future.

For clients leaving care (Figure LCARE.1):

- Around 26% (or 1,100 clients) were living in institutional settings at the end of support, compared with 3 in 5 clients (62% or nearly 2,900 clients) at the beginning of support.
- The proportion of clients in private or other housing had the greatest increase from beginning of support to the end of support, increasing from 9% to 23% (or from 400 to 950 clients).
- At the end of support, the proportion of clients classified as homeless increased (from 24% to 34%, or from 1,100 to 1,400 clients).

Figure LCARE.1: Clients leaving care, by housing situation at beginning of support and end of support, 2017–18



Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.
3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table LCARE.4.

For clients leaving care and presenting to agencies housed, but at risk of homelessness (that is, living either in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings) (Supplementary table LCARE.4):

- Almost 3 in 4 (73% or 2,300 clients) were assisted to maintain their housing.
- For clients living in public or community housing at the start of support, 3 in 4 (75% or 150 clients) were assisted to maintain their tenancy, 8% (or less than 20 clients) moved into private or other housing.
- For clients living in private or other housing almost 7 in 10 (68% or 280 clients) were assisted to maintain their tenancy, 11% (or less than 50 clients) moved into public or community housing.

Of those clients leaving care who were homeless when they began support (that is, living either with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free)) (Table LCARE.3):

- 44% (or 400 clients) were assisted into housing at the end of support.
- 56% (or 550 clients) remained homeless.

Table LCARE.3: Clients leaving care, housing situation at beginning and end of support, 2017-18 (per cent)

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	56.0	44.0
At risk of homelessness	26.6	73.4

Notes

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table LCARE.4.

References

1. Campo M, & Commerford J 2016. Supporting young people leaving out-of-home care (CFCA Paper No. 41) . Melbourne: Child Family Community Australia information exchange, Australian Institute of Family Studies.
2. Council on Federal Financial Relations 2018. National Housing and Homelessness Agreement
3. Muir S, & Hand K 2018. Beyond 18: The Longitudinal Study on Leaving Care Wave 1 Research Report: Transition planning and preparation. (Research Report) . Melbourne: Australian Institute of Family Studies.







## Client groups of interest

Finding suitable and stable accommodation is a major concern for people exiting custodial arrangements, especially for those with little or no support networks, such as from family and friends [1]. People who exit custodial settings are recognised as being at increased risk of homelessness; they are also less likely to exit homelessness [2]. The ability to secure stable housing may reduce the likelihood of reoffending [3]. People exiting institutions and care are a national priority cohort identified in the National Housing and Homelessness Agreement (NHHA) [4], which came into effect on 1 July 2018.

For the purposes of the Specialist Homelessness Services Collection (SHSC), a client is identified as transitioning from a custodial setting if they are aged 10 years or older and have provided any of the following in their first support period in 2017-18:

- their dwelling type was adult correctional facility, youth or juvenile detention centre or immigration detention centre
- they reported 'transition from custodial arrangements' as a reason for seeking assistance
- their formal referral source to the Specialist Homeless Service (SHS) was youth or juvenile correctional centre or adult correctional facility.

### Key findings in 2017-18

- In 2017-18, 8,300 people were identified as clients exiting from a custodial setting.
- Two-thirds (66% or 5,500) of clients were exiting adult correctional facilities.
- The majority of clients who exited custodial settings were male (76% or 6,300).
- Over two-thirds (69% or 5,700) of clients were living alone when they sought assistance from SHS, the highest rate of all SHS client groups.
- Two-thirds of clients (68% or 5,600) had received homelessness services at some time in the previous 5 years.

### Profile of clients exiting custodial arrangements in 2017-18

Of the 8,300 clients exiting custodial arrangements in 2017-18:

- Over one-quarter identified as Indigenous (27% or 2,200), higher than the overall SHS population (25% Indigenous).
- Over 3 in 4 (76% or 6,300) clients were male.
- Two-thirds of clients (69% or 5,700) were living alone when they presented at a SHS agency.
- Over 2 in 3 (68% or 5,600) clients were returning clients, that is, they had presented at a SHS agency at least once in the past 5 years.

### Vulnerabilities

Three of the main vulnerabilities reported in the SHS client population are mental health issues, domestic and family violence, and problematic drug and/or alcohol use. Over 3 in 5 (61% or about 5,100) clients exiting custodial arrangements reported at least one of these vulnerabilities (Table EXIT.1).

Of clients exiting custodial arrangements, the most common reported vulnerability was mental health issues (46% or about 3,900 clients) and of these clients, around 1 in 3 also had problematic drug and/or alcohol use. That is:

- 15% (or 1,300 clients) were experiencing both mental health and problematic drug and/or alcohol use.
- A further 7% (or 600 clients) were experiencing all three vulnerabilities.

Almost 2 in 5 (39% or 3,300 clients) reported none of these vulnerabilities.

**Table EXIT.1: Clients exiting custodial arrangements, by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
No	Yes	No	1,700	20.6
No	Yes	Yes	1,300	15.3
No	No	Yes	800	9.3
Yes	No	No	270	3.2
Yes	Yes	No	300	3.5
Yes	No	Yes	200	2.0
Yes	Yes	Yes	600	6.8

No	No	No	3,300	39.1
			<b>8,300</b>	<b>100</b>

#### Notes

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Clients exiting custodial arrangements: 2013-14 to 2017-18

Since 2013-14, the number of people exiting custodial arrangements and seeking assistance from specialist homelessness services has been increasing. Key trends identified in this client population over the 5 years to 2017-18 (Table EXIT.2) include:

- The number of clients has grown each year, from 6,800 in 2013-14 to 8,300 in 2017-18.
- The proportion of clients achieving all case management goals has doubled, from 11% in 2013-14 to 22% in 2017-18.
- The proportion of clients receiving accommodation has declined from 40% in 2013-14 to 37% in 2017-18.
- The median number of nights accommodated has also decreased, from 28 in 2013-14 to 22 in 2017-18.

Table EXIT.2: Clients exiting custodial arrangements: at a glance—2013-14 to 2017-18

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	6,756	6,866	7,804	8,118	8,338
<b>Proportion of all clients</b>	3	3	3	3	3
<b>Rate (per 10,000 population)</b>	2.9	2.9	3.3	3.4	3.4
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	27	31	31	32	34
At risk of homelessness	73	69	69	68	66
<b>Length of support (median number of days)</b>	53	45	44	45	49
<b>Average number of support periods per client</b>	1.8	1.8	1.9	1.9	1.9
<b>Proportion receiving accommodation</b>	40	41	38	35	37
<b>Median number of nights accommodated</b>	28	27	26	28	22
<b>Proportion of a client group with a case management plan</b>	53	50	52	53	53
<b>Achievement of all case management goals (per cent)</b>	11	16	17	18	22

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical Notes.
4. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2013-14 to 2017-18.

### Housing situation

At the beginning of support, the majority of clients exiting custodial arrangements were at risk of homelessness (66% or about 5,500 clients); that is, in public or community housing (renter or rent free), private or other housing or an institutional setting. One in 3 (34% or 2,800) clients exiting custodial arrangements were homeless when first reporting to SHS agencies for assistance in 2017-18.

## Reasons for seeking assistance

The main reasons clients exiting custodial arrangements sought assistance were transition from custodial arrangements (61% or 5,000 clients), housing crises (13%), inadequate or inappropriate dwelling conditions (5%), and financial difficulties (3%).

## Services needed and provided

Around 6,100 clients exiting custodial arrangements needed assistance with accommodation (73%). Of these clients, 50% were provided with assistance.

- For clients needing short-term or emergency accommodation (55% or 4,600), more than half (55%) were provided with assistance.
- For clients needing long-term housing (49% or 4,100), 4% were provided with assistance.
- Of the 3,200 clients (38%) needing assistance to sustain tenancy or prevent tenancy failure or eviction, 86% (or 2,700) received this assistance.

Certain services were requested by clients exiting custodial arrangements more frequently than by the overall SHS population. Some of these include:

- short-term or emergency accommodation (55%, compared with 37% of the overall SHS population)
- long-term housing (49%, compared with 36%)
- medium-term/transitional housing (40%, compared with 28%)
- advocacy/liason on behalf of client (64%, compared with 54%)
- drug/alcohol counselling (12%, compared with 4%).

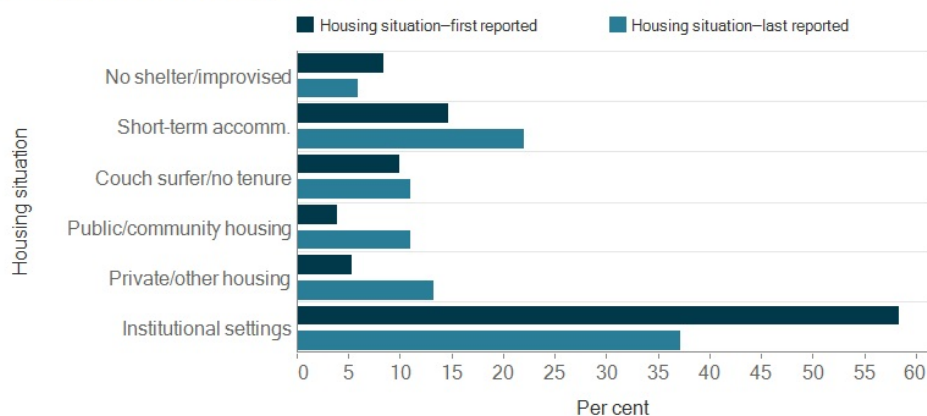
## Housing outcomes

The outcomes presented in this section examine the changes in clients' housing situations from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in future.

For clients exiting custodial arrangements in 2017-18 (Figure EXIT.1):

- The proportion of clients who reported living in institutional settings decreased to 37% (or 2,000 clients) following support; down from 58% (3,500) at the beginning of support.
- Over 1 in 5 (22% or 1,200 clients) were housed in short-term or emergency accommodation at the end of support, up from 15% (or 900 clients) at the beginning of support.
- The proportion of clients living in private or other housing (as a renter, rent free or owner) more than doubled from the beginning of support (5% or 300 clients) to the end of support (13% or 700 clients).

**Figure EXIT.1: Clients exiting custodial arrangements, by housing situation at beginning of support and end of support, 2017-18**



### Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.

2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfers/tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free, and private/other housing includes both renting or rent free.

3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table EXIT.4.

Of those clients who were housed, but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings (Table EXIT.3):

- 3 in 4 (75% or 2,700 clients) were housed at the end of support, mostly in institutional settings (52% or 1,900 clients).
- over 2 in 3 clients (67% or 150 clients) living in public or community housing were assisted to maintain this tenancy and a further 10% were assisted into private or other housing at the end of support.
- those living in private or other housing were assisted to maintain their tenancy, with 70% (or 200 clients) still in private or other housing and a further 7% in public or community housing at the end of support.

Of those clients who were homeless (that is, living either with no shelter or improvised/inadequate dwelling, short-term or emergency accommodation, or in a house, townhouse, or flat with relatives (rent free)) when they began SHS support (Table EXIT.3):

- the majority remained homeless (66% or 1,100 clients) at the end of support compared with 34% (or 580 clients) who were housed at the end of support.
- agencies were best able to assist those living in short-term or emergency accommodation into housing (37% or 280 clients) with 14% (or 110 clients) assisted into private/other housing and 13% (or 100 clients) assisted into public or community housing.

**Table EXIT.3: Clients exiting custodial arrangements, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
Homeless	66.2	33.8
At risk of homelessness	25.0	75.0

#### Notes

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18. National supplementary table EXIT.4.

#### References

1. Woodall J, Dixey R & South J 2013. Prisoners' perspectives on the transition from the prison to the community: implications for settings-based health promotion. *Critical Public Health* 23:188-200.
2. Johnson G, Scutella R, Tseng Y, & Wood G 2015. Entries and exits from homelessness: a dynamic analysis of the relationship between structural conditions and individual characteristics. AHURI Final Report No. 248, Australian Housing and Urban Research Institute Limited, Melbourne.
3. Australian Government. 2008. *The road home: a national approach to reducing homelessness*. Canberra: Commonwealth of Australia.
4. Council on Federal Financial Relations 2018. National Housing and Homelessness Agreement.



## Client groups of interest

Care and protection orders (CPOs) are legal orders or arrangements that place some responsibility for a child's welfare with child protection authorities. They set up arrangements to provide support and assistance for vulnerable children and young people to protect them from abuse, neglect or other harm, or where their parents are unable to provide adequate care or protection [1]. Young people are a national priority homelessness cohort in the National Housing and Homelessness Agreement [2], which came into effect as of 1 July 2018.

AIHW's Child protection Australia annual report showed that in 2016-17 around 168,000 children in Australia were receiving child protection services and of them, around 64,000 were on a care and protection order (approximately 1 in 85 children aged 0-17). The rates of children on care and protection orders has continued to rise, increasing from 8 per 1,000 population to 10 per 1,000 population between 2012-13 and 2016-17. This increase may not necessarily reflect an increase in abuse, neglect or harm but could indicate an increase in community awareness, a greater willingness to report suspected cases for investigation and/or changes to the legislation and definitions [3].

For the purposes of the Specialist Homelessness Services Collection (SHSC), a client is identified as being under a care or protection order if they are aged under 18 and they were under a care and protection order and had the following care arrangements in any support period in the reporting period:

- residential care
- family group home
- relatives/kin/friends who are reimbursed
- foster care
- other home-based care (reimbursed)
- relatives/kin/friends who are not reimbursed
- independent living.

### Key findings in 2017-18

- In 2017-18, 8,700 children and young people were on a CPO and received assistance from a specialist homelessness services (SHS) agency.
- More than half (56%) of these clients on a CPO were aged 0-9. Males were more likely than females to be in this age range (59% of male clients compared with 53% of females).
- Domestic and family violence was identified as the main reason for seeking assistance for 1 in 3 (33%) clients on a CPO.
- The most common care type arrangement for clients on a CPO was 'parents' (62%).
- More than half of clients on a CPO had received SHS services in the past 5 years (54%).
- Clients on a CPO were more likely than the general SHS population to be homeless on presentation, and SHS agencies were successful in improving housing outcomes: for example, 19% were in public or community housing at the start of support, and this increased to 32% by the end of support.

### Profile of children on care and protection orders in 2017-18

Of the 8,700 SHS clients aged 0-17 on a CPO in 2017-18:

- Half were female (51%), the same as the proportion of female 0-17 year olds in the general SHS population (51%).
- Over half (56% or 4,900 clients) were aged 0-9. Males were more likely than females to be in this age range (59% of males compared with 53% of females).
- Over half were living with a lone parent when they sought assistance (52% or 4,400 clients). Over 1,100 clients (13%) were living in a couple family with one or more children on presentation to a SHS agency and 1,400 were living in 'other family group' (17%), which includes grandparents and other relatives.
- More than 1 in 3 were Indigenous (36% or 3,100 clients), compared with 29% of general SHS clients aged 0-17.
- 3 in 5 accessed services in *Major cities* (60% or 5,200 clients) while 1 in 5 (21% or 1,800 clients) accessed services in *Inner regional* areas. These are similar to those of the general SHS population aged 0-17 (61% and 21%, respectively).
- Half were returning clients (54% or 4,700 clients), that is, they had received assistance from homelessness services at some time in the previous 5 years.
- Clients on a CPO received significantly more days of SHS support than the general SHS population (median of 97 days compared with 39 days) and more nights of accommodation (median of 66 nights compared with 32 nights).

### Vulnerabilities

The majority of clients on a CPO (64% or over 2,500 clients) aged 10 and over presenting to SHS agencies reported additional vulnerabilities (Table CPO.1):

- Domestic and family violence was most commonly reported (46% or 1,800 clients), with some reporting both domestic and family violence and mental health issues (17% or 600 clients).

- A further 7% of clients (or 300 clients) were experiencing all three vulnerabilities; domestic and family violence, mental health issues and problematic alcohol or drug issues.

**Table CPO.1: Children on care and protection orders, by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	Yes	Yes	300	7.0
Yes	Yes	No	600	16.9
Yes	No	Yes	100	2.1
No	Yes	Yes	100	2.8
Yes	No	No	800	20.2
No	Yes	No	500	13.9
No	No	Yes	60	1.6
No	No	No	1,400	35.6
			<b>3,800</b>	<b>100</b>

**Notes**

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

**Children on care and protection orders: 2015-16 to 2017-18**

In 2017-18, 8,700 children aged 0-17 who were SHS clients were identified as having a care and protection order (3% of all SHS clients). That is, 1 in 10 clients aged 0-17 years receiving assistance from a SHS agency were on a CPO (Table CPO.2). There was little change in client numbers between 2015-16 and 2017-18. Given changes to the collection of CPO data, 2017-18 data cannot be directly compared with data prior to 2015-16 (see [Technical notes](#)).

Over the three years, clients on a CPO:

- received longer support (97 median number of days in 2017-18 compared with 86 days in 2015-16)
- were less likely to receive accommodation (51% in 2017-18 compared with 55% in 2015-16)
- were equally likely to have all case management goals achieved (17% in 2017-18 compared with 18% in 2015-16).

**Table CPO.2: Children on care and protection orders: at a glance—2015-16 to 2017-18**

	2015-16	2016-17	2017-18
<b>Number of clients</b>	8,859	8,680	8,669
<b>Proportion of all clients</b>	3	3	3
<b>Rate (per 10,000 population)</b>	3.7	3.6	3.5
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>			
Homeless	50	51	51
At risk of homelessness	50	49	49
<b>Length of support (median number of days)</b>	86	98	97
<b>Average number of support periods per client</b>	1.7	1.7	1.8
<b>Proportion receiving accommodation</b>	55	53	51

<b>Median number of nights accommodated</b>	68	69	66
<b>Proportion of a client group with a case management plan</b>	86	84	85
<b>Achievement of all case management goals (per cent)</b>	18	15	17

#### Notes

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Due to changes in the reporting of children on a care and protection order in 2015-16, as detailed in the online technical information, data are not comparable with previous years.
4. Data for 2015-16 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2015-16 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.
5. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2015-16 to 2017-18.

### Care arrangement type

Care arrangement type refers to the type of living arrangement a child on a CPO can be placed into. This can include a wide range of living arrangements including living with family or relatives, foster or residential care or independent living.

The most common type of care arrangement for clients on a CPO was parents (62% or almost 5,400 clients).

- Two-thirds (67%) of those living with parents on a CPO were aged 0-9.
- 9 in 10 (90%) of those in independent living arrangements were aged 15-17. Making up 23% of all clients on a CPO, 15-17 year olds were over-represented in residential care (64%) and 'other living arrangements' (57%).
- Female clients on a CPO were more likely than males to report their care arrangement as independent living (60% compared with 40%) and residential care (57% compared with 43%).

The most common care type for Indigenous clients on a CPO was parents (56% or 1,800 clients); lower than for non-Indigenous clients (64% or 3,400 clients). Indigenous clients on a CPO were more likely than non-Indigenous clients to have care type arrangements of relative(s)/kin who are reimbursed (14% compared with 11%) and family group home (7% compared with 3%).

### Housing situation

At the beginning of support, half of the clients on a CPO were homeless (51% or 4,400 clients). A similar proportion of clients on a CPO (49% or 4,200 clients) were at risk of homelessness when first reporting to SHS agencies for assistance in 2017-18.

### Reasons for seeking assistance

While clients can identify a number of reasons for seeking assistance, agencies also record the main reason for seeking assistance:

- Domestic and family violence was the most common main reason CPO clients sought assistance with one-third (33%) of clients reporting this reason.
- Housing crisis was the next most common reason provided by clients (20%).

### Services needed and provided

Nearly 7 in 10 clients on a CPO needed accommodation services (69% or 6,000 clients), higher than the general SHS population (56%) (Supplementary Table CPO.3).

- Almost half (46% or 4,000 clients) of clients needed short-term or emergency accommodation, compared with 37% of the general SHS population. Most children on a CPO who needed short-term or emergency accommodation were provided with it (77%).
- Over one-third (36% or 3,100 clients) of children on a CPO requested medium-term/transitional housing, higher than the general SHS population (28%). Clients on a CPO were almost twice as likely as the general SHS population to be provided with this accommodation (54% of those who requested it compared with 29%, respectively).
- Long-term housing was needed by 35% (or 3,100 clients) of clients; provided to 5% of these clients.

Other general services most commonly needed by these clients were advocacy/liaison on behalf of client (68%), material aid/brokerage (45%), assistance for domestic/family violence (40%) and transport (37%). Higher proportions of clients on a CPO needed these services compared with clients in the general SHS population (54%, 36%, 32% and 20%, respectively).

CPO clients were also more likely than all SHS clients to report needing family/relationship assistance (37% compared with 18%), child protection services (27% compared with 5%), school liaison (17% compared with 5%) and assistance for trauma (25% compared with 12%).

## Housing outcomes

The outcomes presented in this section examines the changes in clients' housing situations from the start to end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For 5,700 children on care and protection orders who had finished support (Figure CPO.1):

- Most were housed (65% or almost 3,000 clients), while 35% were homeless (or 1,600 clients) at the end of support.
- Many of the clients who were housed at the end of support were in public or community housing (32%) and private or other housing (32%). Public or community housing saw the greatest change, increasing from 19% of clients on a CPO at the beginning of support.
- The number of clients (1,300) living in short-term or emergency accommodation at the start of support declined to almost 1,000 at the end of support.
- Around 1 in 5 children (19% or 900 clients) were 'couch surfing' at the beginning of their support. This dropped to 12% (or 500 clients) by the end of support.

Figure CPO.1: Children on care and protection orders, by housing situation at beginning of support and end of support, 2017-18



### Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.
3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CPO.4.

Of those clients who were housed but at risk of homelessness at the beginning of support (that is, living in either public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings) (Table CPO.3):

- 8 in 10 (82%) were assisted to maintain their housing at the end of support.
- Agencies assisted 8 in 10 clients (79% or under 700 clients) living in public or community housing to maintain their tenancy, with a further 5% assisted into private/other housing.
- Agencies assisted two-thirds of clients (67% or 800 clients) living in private/other housing to maintain their tenancy, with a further 13% assisted into public or community housing.

Of those clients who were homeless (that is, living either with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free)) when they began SHS support (Table CPO.3):

- Half (49% or 1,000 clients) were assisted into housing at the end of support.
- More than half of rough sleepers (51% or around 100 clients) and those in short-term or emergency accommodation (52% or about 600 clients) were successfully assisted into housing. In both instances, the majority were housed in public or community housing.

Table CPO.3: Children on care and protection orders, housing situation at beginning and end of support, 2017-18 (per cent)

Situation at beginning of support	Situation at end of support: homeless	Situation at end of support: housed
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Homeless	51.4	48.6
At risk of homelessness	17.9	82.1

#### Notes

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CPO.4.

#### References

1. Australian Institute of Health and Welfare (AIHW) 2017. Child protection Australia 2015-16. Child welfare series no. 66. Cat. no. CWS 60. Canberra: AIHW.
2. Council on Federal Financial Relations 2018. [National Housing and Homelessness Agreement](#).
3. Australian Institute of Criminology 2005. Children on care and protection orders in Australia. Crime facts info no. 101. Canberra: Australian Institute of Criminology. Viewed 24 September 2018.

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## Client groups of interest

Research suggests that prevalence of substance use disorders among people experiencing homelessness exceed general population estimates [1]. Research undertaken by the University of Melbourne for the Department of Social Services has demonstrated a strong association between substance use and homelessness, in particular current substance use behaviour and current state of homelessness [2]. Analysis of responses from *The Journeys Home Survey* indicate risky drinking and cannabis use were positively related to homelessness. While illegal street drugs and IV drug use were also positively related to homelessness, the association was not as strong [2].

Specialist homelessness services (SHS) clients aged 10 and over are identified with problematic drug and/or alcohol use if, at the beginning of or during support, the client provided any of the following information:

- recorded their dwelling type as rehabilitation facility
- required drug or alcohol counselling
- was formally referred to the SHS service from an alcohol and drug treatment service
- had been in a rehabilitation facility or institution during the past 12 months
- reported problematic drug, substance or alcohol use as a reason for seeking assistance or the main reason for seeking assistance.

### Key findings in 2017-18

- Over 27,200 SHS clients (9%) had a problematic drug and/or alcohol use issue in 2017-18.
- Clients received more frequent support (3.0 support periods per client) over a longer period (median support length 86 days) than other client groups.
- More than 3 in 4 (78%) needed accommodation.
- Over 7 in 10 (72%) had received homelessness services in the 5 years prior to 2017-18.
- More than one-third (37%) identified a need for drug and/or alcohol counselling.
- The proportion of clients who presented to a SHS agency with 'problematic drug or substance use' as the main reason for seeking assistance was 6%; for 'problematic alcohol use', it was 3%.
- Of clients who had finished support, 45% ended support homeless, down from 56% at the start of support. The most common housing situation at the end of support was private or other housing (24%).
- Agencies assisted 8 in 10 clients (78%) with problematic drug and/or alcohol use who were at risk of homelessness to maintain a housing tenancy.

### Profile of clients with problematic drug and/or alcohol use in 2017-18

In 2017-18, SHS agencies assisted 27,200 clients with problematic drug and/or alcohol use. Of these clients:

- More than half were male (54% or 14,600 clients). This is different to the overall SHS client profile, where most clients were female (61%).
- Almost 1 in 5 clients (19% or 5,000) were leaving or had recently left an alcohol and drug treatment rehabilitation facility when they first presented at a SHS agency.
- Almost 3 in 10 clients (29%) were Indigenous, compared with 23% in the overall SHS population.
- Over half of these clients (56%) were living alone.
- They were more likely to have received services in the past. Returning clients made up 72% (or 19,700) of this group, and the remaining 28% (or 7,500) were new clients. That is, more clients had received services at some point in the previous 5 years than those seeking assistance for the first time in 2017-18.

### Vulnerabilities

Many clients who reported problematic drug and/or alcohol use were also facing additional challenges, which may make them more vulnerable to homelessness. Eight in 10 (80% or nearly 21,700) also reported additional vulnerabilities such as domestic and family violence and mental health issues (Table SUB.1).

Of SHS clients with problematic drug and/or alcohol use in 2017-18:

- 4 in 5 (80% or 21,700 clients) reported experiencing mental health issues and/or domestic and family violence.
- Almost 1 in 3 (29% or 7,900 clients) reported all three vulnerabilities.
- 1 in 5 (20% or 5,500 clients) reported none of these additional vulnerabilities; only problematic drug and/or alcohol use.

**Table SUB.1: Clients with problematic drug and/or alcohol use, by selected vulnerability characteristics, 2017-18**

Domestic and family violence	Mental health issue	Problematic drug and/or alcohol use	Clients	Per cent
Yes	Yes	Yes	7,900	29.0

Yes	No	Yes	2,600	9.6
No	Yes	Yes	11,200	41.3
No	No	Yes	5,500	20.1
			<b>27,200</b>	<b>100</b>

*Notes*

1. Client vulnerability groups are mutually exclusive.
2. Clients are aged 10 and over.
3. Totals may not sum due to rounding.

Source: Specialist Homelessness Services Collection 2017-18.

### Clients with problematic drug and/or alcohol use: 2013-14 to 2017-18

Since 2013-14, the number of clients presenting to services with problematic drug and/or alcohol use has risen from about 22,500 in 2013-14 to 27,300 clients in 2017-18. This group has consistently made up around 1 in 10 SHS clients for each of the past 5 years. Key trends identified in this client population over the 5 years to 2017-18 include (Table SUB.2):

- These clients have continued to be more likely than the general SHS population to be homeless on first presentation to agencies. This has remained at about 56% over the past 5 years, compared with 2 in 5 clients in the general SHS population.
- The service use rate for this group has remained constant at 11 clients per 10,000 population.
- This group of clients has consistently received more frequent SHS support, over a longer period, with more nights of accommodation provided than the general SHS population. This service use pattern suggests these clients present with complex needs.
- The proportion of these clients with a case management plan has remained high over time; however, those achieving all case management goals has remained low. This group remains one of the least likely of all SHS cohorts to meet all goals.

**Table SUB.2: Clients with problematic drug and/or alcohol use: at a glance—2013-14 to 2017-18**

	2013-14	2014-15	2015-16	2016-17	2017-18
<b>Number of clients</b>	23,253	24,225	26,505	27,295	27,158
<b>Proportion of all clients</b>	9	9	9	9	9
<b>Rate (per 10,000 population)</b>	10.0	10.3	11.1	11.3	11.0
<b>Housing situation at the beginning of the first support period (proportion (per cent) of all clients)</b>					
Homeless	57	59	58	57	56
At risk of homelessness	43	41	42	43	44
<b>Length of support (median number of days)</b>	82	74	77	83	86
<b>Average number of support periods per client</b>	2.6	2.7	2.9	2.9	3.0
<b>Proportion receiving accommodation</b>	56	53	51	49	50
<b>Median number of nights accommodated</b>	41	39	37	40	40
<b>Proportion of a client group with a case management plan</b>	75	74	74	75	75
<b>Achievement of all case management goals (per cent)</b>	14	16	13	13	14

*Notes*

1. Rates are crude rates based on the Australian estimated resident population (ERP) at 30 June of the reference year. Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.
2. The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.
3. Data for 2013-14 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2013-14 to 2016-17 are comparable with unweighted data for 2017-18. For further information, please refer to the Technical notes.
4. In 2017-18, age and age-related variables were derived using a more robust calculation method. Data for previous years have been updated with the improved calculation method for age. As such, data prior to 2017-18 contained in the SHS Annual Report may not match that contained in the SHS Annual Report Historical Tables.

Source: Specialist Homelessness Services Collection 2017-18.

### Source of referral

Around 1,400 clients with problematic drug and/or alcohol use (5%) were formally referred to a SHS agency by an alcohol and drug treatment service in 2017-18:

- The main source of formal referral to a SHS agency for clients with problematic drug and/or alcohol use was by another specialist homelessness agency or outreach worker (16% or 4,300 clients), followed by another government or non-government agency (10% or 2,800 clients).
- One-third of clients (33% or 8,800) had no formal referral to a SHS agency.

### Housing situation

At the beginning of support, over half of clients were homeless (56% or about 15,200 clients). Over 2 in 5 (44% or 11,900) clients experiencing problematic drug and/or alcohol use were at risk of homelessness when first reporting to SHS agencies for assistance in 2017-18.

### Reasons for seeking assistance

The main reasons for clients presenting with problematic drug and/or alcohol use were:

- housing crisis (25% compared with 21% of the overall SHS population)
- domestic and family violence (13% compared with 30%)
- inadequate/inappropriate dwelling conditions (12% compared with 10%).

The proportion of clients who presented to a SHS agency with 'problematic drug or substance use' as the main reason for seeking assistance was 6% while for 'problematic alcohol use', it was 3%.

### Services needed and provided

Of those clients with problematic drug and/or alcohol use in 2017-18, 37% (around 10,100 clients) identified a need for drug or alcohol based services (Figure SUB.1):

- almost half (48% or 4,800) of these requests were met
- almost 1 in 5 (18%) were referred to another agency
- over 1 in 3 (35%) went unmet (not provided or referred).

Compared with the general SHS population, clients with problematic drug and/or alcohol use were more likely to identify a need for:

- transport (43% compared with 20%)
- assistance with challenging social/behavioural problems (35% compared with 13%)
- living skills/personal development (42% compared with 20%).

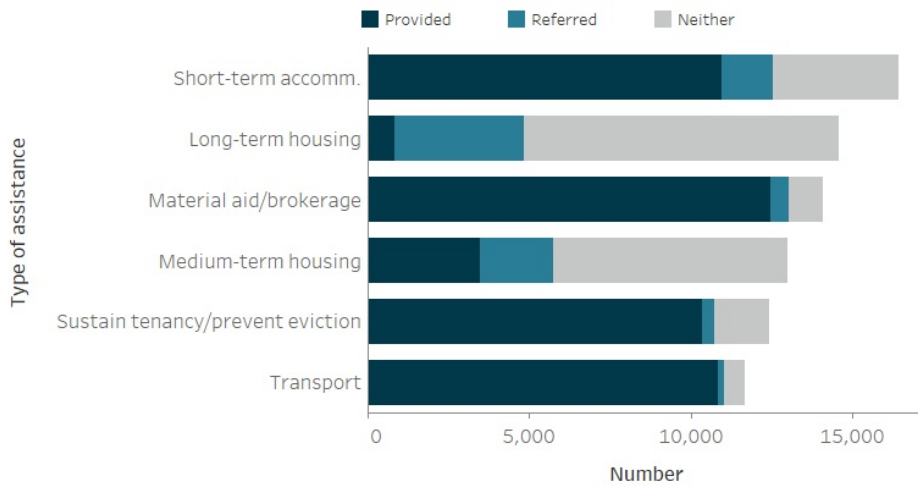
Clients with problematic drug and/or alcohol use also identified needing:

- advice/information (92% or around 24,800 clients) with assistance provided to 99% of these clients
- advocacy/liaison on behalf of client (75% or nearly 20,200 clients) with assistance provided to 97% of these clients.
- material aid/brokerage (52% or 14,100 clients) with assistance provided to 89% of these clients.

The services which were least likely to be provided to clients with problematic drug and/or alcohol use were:

- long-term housing (54% or around 14,600 clients needed assistance) with assistance provided to 6% of these clients
- medium-term/transitional housing (48% or around 13,000 needed assistance) with assistance provided to 27% of these clients
- psychological services (12% or around 3,000 needed assistance) with assistance provided to 37% of these clients.

**Figure SUB.1: Clients with problematic drug and/or alcohol use, by top 6 services and service provision status, 2017–18**



*Notes*

1. Excludes 'Other basic assistance', 'Advice/information', and 'Advocacy/liaison on behalf of client'.
2. Short-term accommodation includes temporary and emergency accommodation; medium-term housing includes transitional housing; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.

Source: Specialist Homelessness Services Collection 2017–18, National supplementary table SUB.3.

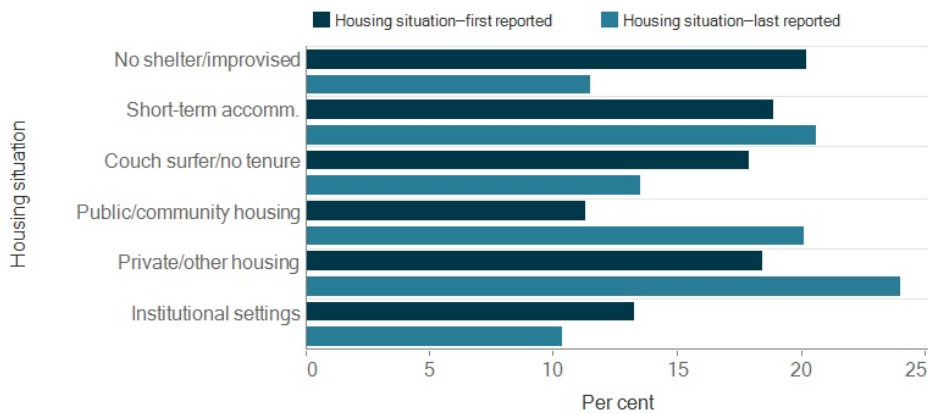
**Housing outcomes**

The outcomes presented in this section examine the changes in clients' housing situations from the start of support to the end of support. Only clients who ceased receiving support by the end of the financial year are included in this section—meaning their support periods had closed and they did not have ongoing support at the end of the 2017-18 reporting period. However, it is important to note that a proportion of these clients may seek assistance from SHS agencies again in the future.

For clients with problematic drug and/or alcohol use (Figure SUB.2):

- The proportion of clients who were homeless at presentation to a SHS agency decreased from 57% (or 9,600 clients) to 46% (or 7,100) by the end of support, with 21% (or 3,200) in short-term or emergency accommodation at the end of support.
- Around 3,800 clients (24%) were in private or other housing following support, increasing from 3,100 (18%) at the commencement of support.
- Around 3,200 clients (20%) were living in public or community housing following support, increasing from 1,900 (11%) at the commencement of support.

**Figure SUB.2: Clients with problematic drug and/or alcohol use, by housing situation at beginning of support and end of support, 2017–18**



*Notes*

1. The SHSC classifies clients living with no shelter or improvised/inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent free) as homeless. Clients living in public or community housing (renter or rent free), private or other housing (renter or rent free), or in institutional settings are classified as housed.
2. No shelter/improvised includes inadequate dwellings; short-term accommodation includes temporary and emergency accommodation; couch surfer/no tenure includes living in a house, townhouse or flat with relatives rent free; public/community housing includes both renting or rent free; and private/other housing includes both renting or rent free.
3. Proportions include only clients with closed support at the end of the reporting period.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table SUB.4.

Of those clients with problematic drug and/or alcohol use who were housed but at risk of homelessness when they began support; that is, living either in public or community housing (renter or rent-free), private or other housing (renter or rent-free) or in institutional settings (Supplementary Table SUB.4):

- 78% (or 5,000 clients) were assisted to maintain their housing at the end of support.

- For those clients living in public or community housing at the start of support, 3 in 4 (75% or 1,300 clients) were assisted to maintain their tenancy while 7% (or 120 clients) moved into private or other housing.
- For clients living in private or other housing, 1 in 3 (66% or 1,900 clients) were assisted to maintain their tenancy while 9% (or 250 clients) moved into public or community housing.

Of those clients with problematic drug and/or alcohol use who were homeless when they began support; that is, living either with no shelter or improvised/inadequate dwelling, short-term or emergency accommodation or in a house, townhouse, or flat with relatives (rent-free) (Supplementary Table SUB.4):

- 37% (or 3,100 clients) were assisted into housing at the end of support.
- Of those who began support in short-term or emergency accommodation, 44% (or nearly 1,200 clients) were housed at the end of support.
- Of those who began support rough sleeping, 31% (or almost 900 clients) were housed at the end of support.

**Table SUB.3: Clients with problematic drug and/or alcohol use, housing situation at beginning and end of support, 2017-18 (per cent)**

Situation at beginning of support	Situation at end of support:	
	homeless	housed
Homeless	62.9	37.1
At risk of homelessness	22.3	77.7

**Notes**

1. The SHSC classifies clients living with no shelter or improvised/ inadequate dwelling, short-term temporary accommodation, or in a house, townhouse, or flat with relatives (rent-free) as homeless. Clients living in public or community housing (renter or rent-free), private or other housing (renter or rent-free), or in institutional settings are classified as housed.
2. Proportions include only clients with closed support at the end of the reporting period. Per cent calculations are based on total clients, excluding 'Not stated/other'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table SUB.4.

**References**

1. Flatau P, Conroy E, Clear A & Burns L 2010. The integration of homelessness, mental health and drug and alcohol services in Australia. AHURI Positioning Paper No. 132. Melbourne: Australian Housing and Urban Research Institute.
2. Bevitt A, Chigavazira A, Heralut N, Johnson G, Moschion J, Scutella R, Tseng Y-P, Wooden M & Kalb G 2015. Journeys Home Research Report No. 6: Complete findings from Waves 1 to 6. Melbourne: Melbourne Institute of Applied Economic and Social Research.
3. AIHW (Australian Institute of Health and Welfare) 2016. Exploring drug treatment and homelessness in Australia: 1 July 2011 to 30 June 2014. Cat. no. CSI 23. Canberra: AIHW.

## Client groups of interest

The Australian Defence Force (ADF) indicator was introduced into the Specialist Homelessness Services Collection (SHSC) in July 2017. The aim was to provide a better understanding of the extent to which veterans may need support from specialist homelessness services (SHS) agencies, as they were identified as a potentially vulnerable group with respect to homelessness.

In order to apply the ADF indicator, an agency records whether the client is a current or former ADF member, either on a full or part-time basis. The ADF indicator is not applicable to clients who may have served in non-Australian defence forces or reservists who have never served as a permanent ADF member. The ADF question is not asked of clients under the age of 18. Note that differences between the results of this and other publicly reported estimates may be due to differences in how an ADF member is defined.

It is important to note that variability in the implementation of this item means that coverage is incomplete and limited analyses are possible for 2017-18. As is common with new data items, there was a high number of 'don't know' (14%) or 'not applicable' (29%) responses to the ADF question in 2017-18. A 'don't know' response is selected if the information is not known or the client refuses to provide the information while a 'not applicable' response is selected if the client is under the age of 18. It is expected that data quality will improve over time. Further details about the ADF indicator in the SHSC are provided in [Technical information](#).

### Key findings

- In 2017-18, specialist homelessness services agencies assisted 1,295 clients who identified as current or former members of the Australian Defence Force.
- More than half (638 clients) were at risk of homelessness when they sought assistance.
- Almost 2 in 3 were male (66% or more than 850 clients).
- Overall, clients aged 45-54 were the largest age group, accounting for 1 in 4 clients (25% or more than 320 clients). This was closely followed by clients aged 35-44 (25% or more than 300 clients).

**Table ADF.1: Clients who have identified as current or former members of the Australian Defence Force: at a glance—2017-18**

	2017-18
<b>Number of clients</b>	1,295
<b>Housing situation at the beginning of the first support period (proportion (per cent) of clients)</b>	
Homeless	49
At risk of homelessness	51
<b>Length of support (median number of days)</b>	43
<b>Average number of support periods per client</b>	2.0
<b>Proportion receiving accommodation</b>	35
<b>Median number of nights accommodated</b>	31
<b>Proportion of a client group with a case management plan</b>	65
<b>Achievement of all case management goals (per cent)</b>	20

*Note:* The denominator for the proportion achieving all case management goals is the number of client groups with a case management plan. Denominator values for proportions are provided in the relevant national supplementary table.

*Source:* Specialist Homelessness Services Collection 2017-18.

### Characteristics of clients who have identified as current or former members of the Australian Defence Force in 2017-18

In 2017-18, clients who self-identified as current or former members of the ADF (Table ADF.1):

- were supported for 43 days (median)
- around 1 in 3 (35%) clients received accommodation with a median of 31 nights of accommodation
- had an average of 2 support periods per client
- 2 in 3 (65%) had a case management plan and 1 in 5 (20%) had all case management goals achieved.

Around half (49%) of clients who self-identified as members of the ADF were experiencing homelessness at the time of seeking SHS support, which was higher than the general SHS population (43%).

The highest number of clients identified as current or former members of the ADF were in Victoria (Table ADF.2).

**Table ADF.2: Clients who identified as current or former members of the Australian Defence Force by states and territories, 2017-18**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	National
<b>Number</b>	<b>331</b>	<b>525</b>	<b>239</b>	<b>107</b>	<b>61</b>	<b>60</b>	<b>17</b>	<b>39</b>	<b>1,295</b>
<b>Housing situation at the beginning of support</b>									
Homeless	169	225	157	40	39	28	4	13	620
At risk of homelessness	149	279	81	66	22	32	13	25	638

*Notes*

1. Housing situation at the start of support excludes not stated.
2. Clients may access services in more than one state or territory. Therefore the total will be less than the sum of jurisdictions.

Source: Specialist Homelessness Services Collection 2017-18.





## Unmet demand for specialist homelessness services

Specialist homelessness services (SHS) agencies in Australia provide assistance to thousands of people each day. On average, an estimated 62,000 people were supported each day in 2017-18. However, there were also people who approached agencies who were unable to be offered any assistance. These people may have approached more than one agency or returned to the same agency another day. An instance where no assistance is received by a person who approaches a service is referred to as an 'unassisted request for service'. A limited amount of data are collected about these instances.

There may be a range of reasons an agency cannot assist a person. For example, the person may be seeking a specialised service not offered by that particular agency, the agency may not have the capacity to provide assistance at that time or the person may not be in the target group for the agency. See [Technical notes](#) and [Glossary](#) for information on the way in which unassisted requests for services are measured in the Specialist Homelessness Services Collection (SHSC).

Unmet demand data is presented from 2 perspectives:

1. **Unassisted requests** for services relate to people who are not able to be offered any assistance by the SHS agency.
2. **Unmet need** captures those clients who had some but not all of their identified needs met by the agency.

The SHSC captures limited information about unassisted requests for services (that is, point 1 above) as it is not always appropriate for SHS agencies to collect the same level of detailed information as they would if the person became a client.

### 1. Unassisted requests for services

#### Key findings

- In 2017-18, on average, there were 236 requests per day which were unable to be met; a total of 86,100 unmet requests for 2017-18, 9,300 fewer than in 2016-17 (95,400).
- Almost 3 in 4 daily unassisted requests included a need for some type of accommodation support (74%).
- Most commonly, agencies were unable to meet requests for accommodation because there was no accommodation available at the time.
- The majority of unassisted requests for assistance came from females (66%).

Some key trends in unmet demand since 2013-14 have been:

- The number of unassisted requests has varied over time (Table UNASSISTED.1). The decrease in unassisted requests in 2017-18 was primarily due to reductions in Western Australia and Victoria. For further details, see the data quality information in the [Technical information](#) section.
- Two-thirds of the unassisted requests were from females (66%) in 2017-18, up from 59% in 2013-14.
- In contrast to the changes occurring in the number of unassisted requests for services, the number of clients (that is, those who were assisted) and the number of support periods increased over the same period.

Table UNASSISTED.1: Unassisted requests for service: at a glance—trends over time 2014-15 to 2017-18

	2014-15 Assisted Clients	2014-15 Unassisted requests	2015-16 Assisted Clients	2015-16 Unassisted requests	2016-17 Assisted Clients	2016-17 Unassisted requests	2017-18 Assisted Clients	2017-18 Unassisted requests
Number	255,657	119,910	279,196	100,302	288,273	95,392	288,795	86,103
Sex (per cent): Female	59	65	59	64	60	66	61	66
Sex (per cent): Male	41	35	41	36	40	34	39	34
<b>Living arrangement (per cent)</b>								
Lone person	29	63	29	63	29	60	30	58
Sole parent	34	33	34	33	35	35	35	37

Couple with child(ren)	13	0	13	0	13	0	12	0
Couple without children	5	2	5	2	5	2	5	2
Other family group	18	2	18	2	18	3	18	3

*Note:* Data for 2014-15 to 2016-17 have been adjusted for non-response. Due to improvements in the rates of agency participation and SLK validity, 2017-18 data are not weighted. The removal of weighting does not constitute a break in time series and weighted data from 2014-15 to 2016-17 are comparable with unweighted data for 2017-18.

*Source:* Specialist Homelessness Services Collection 2014-15 to 2017-18.

### Unassisted requests and future service use

Analysis of how often a person requested assistance and how many later became clients of SHS agencies can only be examined and understood where the statistical linkage key (SLK) was complete and valid (just over half (52%) of all unassisted requests). In 2017-18, on average, each person who was not assisted approached an agency 1.5 times, the same average as in 2016-17.

In 2017-18, 47% of people with a valid SLK later went on to become clients and received services during the year, similar to the proportion in 2016-17 (46%). The outcomes for the remaining 53% were not known; they may have received assistance from a non-SHS service, used their own support networks or continued to experience unstable housing.

### Number of unassisted requests for services

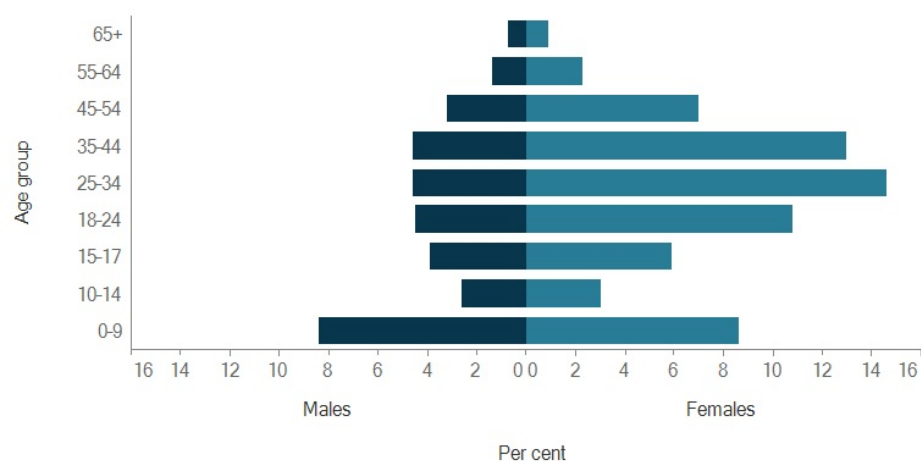
Across Australia, on average, there were 236 requests per day that could not be met in 2017-18 (Figure UNASSISTED.1):

- Two-thirds of these requests came from females. About 156 daily unassisted requests (or 66% of all requests) were made by females and 80 by males (34%). This reflects the overall SHS client population, which is predominantly female.
- 1 in 4 (28%) unassisted requests were from females aged 25-44.
- 4 in 5 unassisted requests from single adults with children were from females (78%), and most of these females were aged between 25 and 44 (56% of adult single females with children).

Compared with 2016-17, in 2017-18:

- The number of unassisted requests fell for both sexes (about 1,900 fewer unassisted requests for males and 2,700 fewer for females).
- The largest decrease for females was in the group aged 18-24 presenting to an agency alone, not as part of a family. For males, it was also among the group aged 18-24 presenting alone.

**Figure UNASSISTED.1: Proportion of unassisted requests, by sex and age group, 2017-18**



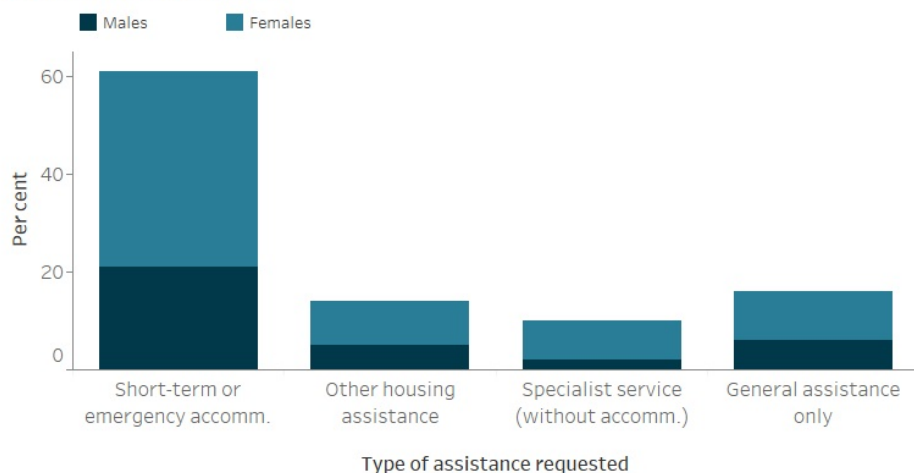
*Source:* Specialist Homelessness Services Collection 2017-18, National supplementary table UNMET.1.

### What services were requested?

On average, 74% of daily unassisted requests included a need for some type of accommodation support:

- The majority of unassisted daily accommodation requests related to short-term or emergency accommodation (61%) (Figure UNASSISTED.2). Females were more likely than males to have requests for short-term or emergency accommodation unmet (66% and 34% respectively).
- Unassisted requests for short-term or emergency accommodation were lower than in 2016-17. There was, on average, 12 fewer unmet requests per day for this type of assistance.

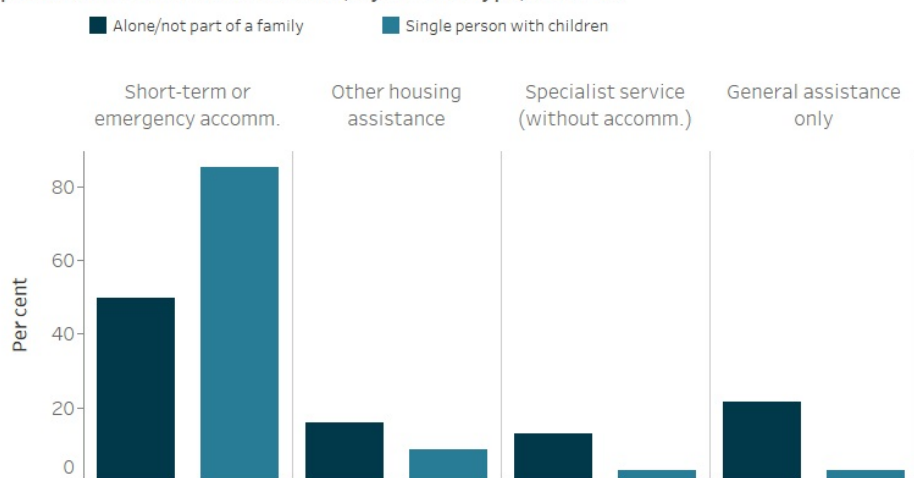
Figure UNASSISTED.2: Services requested as proportion of daily unassisted requests, by sex, 2017–18



Source: Specialist Homelessness Services Collection 2017–18, National supplementary table UNMET.5.

More than 9 in 10 (94%) daily unassisted requests for services from single persons with children were for accommodation needs, compared with 66% for single persons without children (Figure UNASSISTED.3).

Figure UNASSISTED.3: Proportion of unassisted requests for services by single person with or without children, by service type, 2017–18



Source: Specialist Homelessness Services Collection 2017–18, National supplementary table UNMET.6.

Most commonly, agencies reported that they could not meet requests for any accommodation because there was no accommodation available at the time of the request (45% of unmet requests for accommodation) (Supplementary table UNMET.7). This figure is similar to 2016-17 (48%). On fewer than 1 in 10 occasions, a person did not accept the service offered (9%).

## 2. Clients’ unmet need for services

Clients seeking support from SHS agencies often need a wide range of services. Some needs arise more than once in a support period, and this makes it difficult to assess the extent to which the need has been met from the available data. In this section, each client need and the services provided to meet that need are only identified once in each support period. Clients may have also been referred to another service for assistance. This information is not included here.

### Key findings in 2017-18

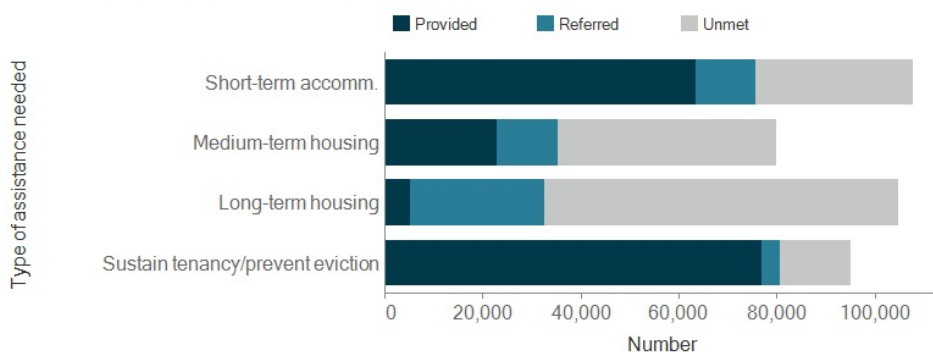
- Long-term housing options were provided to 5% (or 5,200) of the 104,600 (36%) clients needing this service.
- The ability of agencies to keep up with the demand for certain specialist services is line with the previous year. For example, 1 in 3 (32%) mental health service requests were neither provided nor referred in 2017-18, similar to that for 2016-17 (33%). Clients needing mental health services grew by 2% (or over 600 clients).

## Unmet need for accommodation and housing assistance services

Accommodation was the most common need identified. In 2017-18, over half (56%) of all clients needed at least 1 type of accommodation service (Figure UNMET NEED.1):

- Nearly 2 in 5 clients (37% or 107,600 clients) needed short-term or emergency accommodation; 6 in 10 (59%) of those requesting this service were provided with assistance.
- One-third of clients (36% or 104,600 clients) identified a need for long-term housing; about 5% (or 5,200 clients) of these clients were provided with this service.
- The numbers of clients requesting either short-term or emergency accommodation or long-term housing were similarly large; however, the difference in the proportions of clients receiving these types of accommodation highlights the substantial unmet need for long-term housing encountered by SHS clients.

**Figure UNMET NEED.1: The number of clients with unmet needs for accommodation and housing assistance services, 2017-18**



*Notes*  
 1. Unmet includes 'Not provided or referred'.  
 2. Short-term accommodation includes temporary and emergency accommodation; medium-term housing includes transitional housing; and sustain tenancy/prevent eviction includes assistance to sustain tenancy or prevent tenancy failure or eviction.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.15.

### Client unmet need for general and specialised services

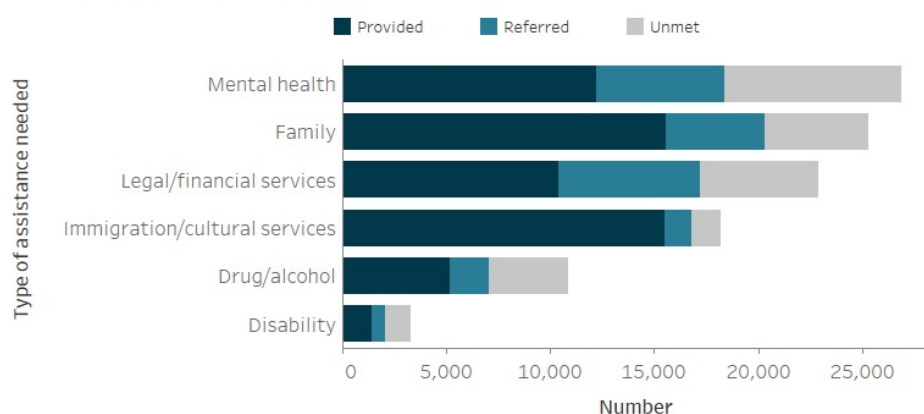
Some types of needs were able to be met by the agency for a significant proportion of clients. For example, of the nearly 225,000 clients who needed advice/information, 98% were provided assistance, and of the 155,000 clients requesting advocacy/liaison, 96% were provided with assistance (Supplementary table CLIENTS.15).

Other types of client needs were less commonly met. For example, among those clients who required legal services (3%, or almost 9,800 clients), the level of unmet need was substantial, around 28% at the end of support. This may be related to the specialist skills required to provide legal services and the limited availability of these skills within the SHS agencies and other services that clients may be referred to.

The level of unmet need for broad groups of specialised services can be determined (Figure UNMET NEED.2):

- Mental health services, including psychological, psychiatric and mental health services, were one of the most common specialised services identified as needed by clients; however, these needs were frequently unmet with around 3 in 10 clients (32%) neither provided nor referred these services.
- Similarly, over one-third of the clients identifying a need for disability services (37%) or drug and alcohol services (35%) did not have their needs met, however, overall, these services were less needed than mental health services.
- Immigration and cultural services, which were needed by 6% of SHS clients (about 18,200 people), were provided for most requiring them (85%).

**Figure UNMET NEED.2: The number of clients with unmet needs for specialised services (grouped), 2017-18**



*Note:* Unmet includes 'Not provided or referred'.

Source: Specialist Homelessness Services Collection 2017-18, National supplementary table CLIENTS.15.





## Technical information

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## Technical information

### Key data quality information: Specialist Homelessness Services Collection, 2017-18

The AIHW plays a role in developing and maintaining national metadata standards. This work contributes to improving the quality and consistency of national health and welfare statistics. The AIHW works closely with governments and non-government organisations to achieve greater adherence to these standards in administrative data collections to promote national consistency and comparability of data and reporting.

One of the main functions of the AIHW is to work with the states and territories to improve the quality of administrative data and to compile, analyse and disseminate national data sets based on data from each jurisdiction.

Data Quality Statements are developed for each data set and made available on the AIHW Metadata Online Registry (METeOR). The 2017-18 Specialist Homelessness Services Collection [Data Quality Statement](#) is available from METeOR.

New in 2017-18 are data on clients aged 18 and older who identify as current or former members of the Australian Defence Force. Variability in the implementation of this item means that coverage is incomplete and limited comparisons are possible for 2017-18.

#### Breaks in time series

*Clients subject to care and protection orders:* Improvements made in 2015-16 to the method used to identify clients subject to care and protection orders mean that data from 2011-12 to 2014-15 are not comparable with data from 2015-16 onwards.

*Source of income—DVA pension or payment:* In 2017-18, the response options for source of income were updated and the three response options relating to payments or pensions from the Department of Veterans Affairs (disability pension—DVA, service pension—DVA and war widow(ers) pension—DVA) were replaced with a single response option of 'DVA pension or payment'. As the single 'DVA pension or payment' option can include more payment types than the three options previously available, data on the 3 DVA pension or payments from 2011-12 to 2016-17 are not comparable with data on 'DVA pension or payment' from 2017-18 onwards.

#### Data issues that require caution when making comparisons

*Disability:* Data for clients with disability who require assistance may not be comparable across age groups due to differences in the interpretation of the disability questions; this issue relates mainly to young children.

*Presenting unit type:* Data for presenting unit type may not be comparable across age groups due to differences in interpretation of presenting units and how they are recorded. This issue mainly concerns young children and presenting unit type 'lone person'.

*Housing crisis, financial difficulties and housing affordability:* Improvements made during 2014-15 resulted in changes to the way agencies were required to report 'main reason' and 'reasons for seeking assistance'. In addition, wording providing a specific example of housing crisis was removed from the section relating to reason for seeking assistance. Caution should be used when making comparisons over time as the reporting of these items may be inconsistent between agencies. These changes in agency reporting were evident in the data from all states and territories.

*Children presenting alone:* South Australia has a comparatively high number of children reported as presenting alone. This may be due to a difference in how presenting units are recorded in South Australia's client management system. Caution should be used when comparing data for children presenting alone in South Australia with other states and territories.

*Case management:* Some aspects of case management are recorded differently in South Australia's client management system. Caution should be used when comparing data on case management for South Australia with other states and territories.

#### Improvements to data items

*Mandatory data items:* Changes made in 2014-15 resulted in a substantial improvement in data quality for mandatory data items and in particular resulted in a decline in the number of non-response or missing values for these data items. Care should be used when comparing results from 2011-12 to 2013-14 with results from 2014-15 onwards.

*Housing situation:* Following improvement in the derivation for housing situation used in the SHSC in 2016-17, clients with a tenure status of 'life tenure scheme' are now counted under the housing situation category 'private or other housing (renter, rent-free or owner)' if their dwelling status was 'housing/townhouse/flat'. This change has very little impact on housing situation percentages and hence does not constitute a break in time series.

*Age:* In 2017-18, age and age-related variables were derived using a more robust calculation method. Caution should be used when comparing results with publications from December 2018 onwards that include 2017-18 data with other publications.

New South Wales homelessness services underwent a period of major transition in 2014-15 that affected continuity of reporting for some service providers. These issues did not affect New South Wales data for 2017-18, 2016-17 or 2015-16. As outlined in the [Data Quality Statement](#) caution should be used when making comparisons of 2014-15 data with other years' figures for New South Wales or with data for

other states and territories. Other jurisdictional-specific information can be found in the Data Quality Statement.

Further information on the data quality of 2017-18 SHSC data can be found in the Explanatory notes in the national and state and territory [Supplementary tables](#).

## Imputation and weighting

Due to improvements in agency response and SLK validity rates, data for 2017-18 were not weighted. As the aim of the imputation strategy was to account for low rates of agency response and SLK validity in previous years, unweighted data for 2017-18 onwards are directly comparable with weighted data for 2011-12 to 2016-17. The removal of weighting does not constitute a break in time series.

The annual SHS report and accompanying products uses financial year data, and for 2011-12 to 2016-17, these data are weighted. However, other AIHW publications that analyse the pathways of individual clients over time, including publications using SHS data linked with data from other collections, do not use weighted data.

Comparisons between years of counts of clients and support periods should use weighted data for 2011-12 to 2016-17 and unweighted data from 2017-18 onwards. These counts can be obtained from the annual report and accompanying data products.

## Data derivations

### Homelessness status and other housing categories

All clients of specialist homelessness services are considered to be either homeless or at risk of homelessness. Homelessness and at-risk status is determined by the specific criteria described below. Clients who did not provide sufficient information to make this assessment are excluded.

These categories are designed to, as far as is possible, align with the ABS statistical definition of homelessness (ABS 2012a). However, there are some key areas where alignment may not occur. The ABS definition includes people living in severely crowded dwellings and as no specific question on crowding is included in the SHSC, this group cannot be separately identified.

Also, the ABS exclude certain groups of people from the homeless count where they appear to have accommodation alternatives or where there is a clear choice about the type of accommodation (for example, people who are travelling, people returning from overseas, certain owner builder or hobby farmers, and students living in halls of residence). However, if people in these circumstances become clients of specialist homelessness agencies, they are included here as either homeless or at risk of homelessness, depending on their housing situation as reported.

Clients are considered to be homeless if they are living in any of the following circumstances:

- No shelter or improvised dwelling: includes where dwelling type is no dwelling/street/park/in the open, motor vehicle, improvised building/dwelling, caravan, cabin, boat or tent; or tenure type is renting or living rent-free in a caravan park.
- Short-term temporary accommodation: dwelling type is boarding/rooming house, emergency accommodation, hotel/motel/bed and breakfast; or tenure type is renting or living rent-free in boarding/rooming house, renting or living rent-free in emergency accommodation, or renting or living rent-free in transitional housing.
- House, townhouse or flat (couch surfing or with no tenure): dwelling type is House/townhouse/flat, and tenure type is no tenure or conditions of occupancy is couch surfing.

Clients are considered to be at risk if they are living in any of the following circumstances:

- Public or community housing (renter or rent free): dwelling type is house/townhouse/flat and tenure type is renter or rent-free in public housing, or renter or rent-free in community housing.
- Private or other housing (renter, rent-free or owner): dwelling type is house/townhouse/flat and tenure type is renter or rent free in private housing, life tenure scheme, owner–shared equity or rent/buy scheme, owner–being purchased/with mortgage, owner–fully owned, or other renter or rent free.
- Institutional settings: dwelling type is hospital, psychiatric hospital/unit, disability support, rehabilitation, boarding school/residential college, adult correctional facility, youth/juvenile justice correctional centre, aged care facility or immigration detention centre.

### Support periods

The period of time a client receives services from a specialist homelessness agency is referred to as a support period. A support period starts on the day the client first receives a service and ends when:

- the relationship between the client and the agency ends
- the client has reached their maximum amount of support the agency can offer
- a client has not received any services from the agency for a whole calendar month and there is no ongoing relationship.

The end of the support period is the day the client last received services from the agency.

### Calculating total length of accommodation (and total length of support)

To calculate accommodation and support length, every night (for length of accommodation) or day (for length of support) the client received support or accommodation in 2017-18 is added together. This means that the total number of days/nights presented for clients does not necessarily represent a consecutive number of days/nights the client received support/accommodation. For example, a client who received accommodation for 7 nights may have had 2 separate periods of accommodation: 1 for 5 nights and another for 2 nights.



## Agency remoteness area

Agencies have been classified according to their remoteness area (RA) as defined by the Australian Statistical Geography Standard (ASGS) Remoteness Structure (ABS 2018). The latest available version of the RA indicator (from the 2016 Census) has been developed by the ABS. The Remoteness Areas divide Australia into five classes of remoteness on the basis of relative access to services. Access to services is measured using the Accessibility and Remoteness Index of Australia (ARIA+), developed by the Hugo Centre for Migration and Population Research at the University of Adelaide. ARIA+ is derived by measuring the road distance from a point to the nearest Urban Centres and Localities in five separate population ranges.

Using this classification, agencies participating in the SHSC were assigned to an RA based on their recorded state, suburb, postcode and/or Local Government Area (LGA) values. Where available, a combination of these fields was used to assign RA for a given agency to improve accuracy.

## Client geography

Clients have been assigned to a region based on where they lived in the week before presenting to a SHS agency. Regions are defined by the 2016 Australian Statistical Geography Standard (ASGS), developed by the ABS (ABS 2016).

Clients are assigned to only one region, based on the location details (locality, postcode and state/territory) provided in the first support period in the reference year. The first support period is defined as the support period with the earliest start date in the financial year.

Where there are multiple support periods that meet this criteria (i.e. share the same start date):

- then the support period with latest end date will be used
- else a support period will be randomly selected (i.e. where support periods have the same start and end dates).

In 2017-18, approximately 12% of clients could not be assigned to a statistical area 2 (SA2) region due to missing or incomplete address information.

## Identifying and meeting service needs

### Identifying clients' needs for a service

The SHSC collects information on the needs of clients during their period of support from a specialist homelessness agency. Needs may be identified by the client and/or the service provider. Although this information is collected at the beginning of a support period, updated at the end of each month a client is supported and again at the end of each support period, each individual need is only recorded once in any collection month. For these analyses, a client need for a service is recorded if the client needed that service at any time in 2017-18. For example, a client is recorded as needing short-term accommodation if they were recorded as needing short-term accommodation in any collection month of 2017-18, regardless of the number of months over which this need was recorded, or the number of times during 2017-18 they presented with this need.

### Meeting clients' service needs

There are several aspects to analysing the extent to which clients' needs for assistance are met. The first is to analyse the services provided to a client directly by the specialist homelessness agency. Where agencies are unable to provide services directly to clients or unable to fully meet the need they often refer the client to other organisations (either other specialist homelessness agencies or other organisations) that can provide those services. This information is also collected in the SHSC and is considered an important form of assistance that agencies provide, although it is not possible to know if these referrals resulted in the provision of services.

All information on services that are provided, whether referred or not, are recorded in the same way as service needs. That is, a service is recorded as provided if the client was provided that type of assistance at any time in 2017-18.

In some circumstances, an agency will not be able to either provide required services directly to clients, or refer them to another organisation—this is considered to be an unmet need. Further information about unmet needs can be found in the Unmet demand section of the report.

## Indigenous clients

A client is considered as Indigenous if, in any support period in 2017-18, they identified as being of Aboriginal and/or Torres Strait Islander origin.

In the SHSC, information on Indigenous status is only provided with explicit client consent to report this information. Aboriginal and Torres Strait Islander was not reported for 10% of clients in 2017-18.

## Clients born overseas

A client is identified as overseas-born, if in the majority of support periods in 2017-18, they identified that their country of birth was a country other than Australia.

In the SHSC, information on country of birth is only provided with explicit client consent to report this information. Country of birth information was not reported for 16% of clients in 2017-18.

## Young people presenting alone

Young people are defined as clients aged 15-24 who presented alone in their first support period in the reporting period.

The age of the client is defined as the client's age on the start date of their first support period in the reporting period. For those who were ongoing clients at the beginning of the reporting period, the client's age on the first day of the reporting period is used.

### **Older people**

Older people are defined as clients aged 55 or older.

The age of the client is defined as their age on the start date of their first support period in the reporting period. For those who were ongoing clients at the beginning of the reporting period, the client's age on the first day of the reporting period is used.

### **Clients who experienced domestic and family violence**

SHSC clients were counted as experiencing domestic and family violence if any support period during the reporting period:

- 'domestic and family violence' was reported as a reason they sought assistance, or
- during any support period they required domestic or family violence assistance.

The SHSC reports on clients who are victims of domestic and family violence. Currently perpetrators of domestic and family violence who may also be receiving assistance from a homelessness agency are not able to be identified within the SHSC.

### **Clients with a current mental health issue**

A client was identified as having a current mental health issue if they provided any of the following information:

- They indicated that at the beginning of a support period they were receiving services or assistance for their mental health issues or had in the past 12 months.
- Their formal referral source to the specialist homelessness agency was a mental health service.
- They reported 'mental health issues' as a reason for seeking assistance.
- Their dwelling type either a week before presenting to an agency, or when presenting to an agency, was a psychiatric hospital or unit.
- They had been in a psychiatric hospital or unit in the last 12 months.
- At some stage during their support period, a need was identified for psychological services, psychiatric services or mental health services.

This analysis does not include clients aged under 10.

### **Clients on care and protection orders**

A client is identified as being under a care or protection order if they are aged under 18 and have provided any of the following information in any support period (any month within the support period) during the reporting period (either the week before, at the beginning of the support period or during support):

- They reported that they were under a care and protection order (and the care arrangement was known).
- They have reported 'Transition from foster care/child safety residential placements' as a reason for seeking assistance, or main reason for seeking assistance.

### **Clients with problematic drug and/or alcohol use**

A client is identified as having problematic drug and/or alcohol use if they were aged 10 years or older and have provided any of the following information either at the beginning of support or in any support period during the reporting period (either the week before or at beginning of the support period):

- Their dwelling type was recorded as rehabilitation.
- Their formal referral source to the specialist homelessness agency was a drug and alcohol service.
- During their support they required drug/alcohol counselling.
- They have been in a rehabilitation facility/institution in the last 12 months.
- They have reported 'problematic drug or substance abuse' or 'problematic alcohol use' as a reason for seeking assistance or main reason for seeking assistance.

### **Clients leaving care**

Clients are counted as transitioning from care arrangements if, in their first support period during the reporting period, either in the week before or at presentation:

- the dwelling type was: hospital (excluding psychiatric), psychiatric hospital or unit, disability support, rehabilitation or aged care facility, or
- their reason for seeking assistance was transition from foster care/child safety residential placements or transition from other care arrangements.

### **Clients who were exiting custodial arrangements**

Clients are counted as leaving a custodial setting if, in their first support period during the reporting period, either in the week before or at presentation:

- their dwelling type was: adult correctional facility, youth or juvenile justice detention centre or immigration detention centre or
- their reason for seeking assistance was: transition from custodial arrangements or
- their source of formal referral to the agency was: youth or juvenile justice detention centre, or adult correctional facility.

Some of these clients were still in custody at the time they began receiving support.

Children aged under 10 identified as exiting from adult correction facilities or youth/juvenile justice detention centres have been excluded because of concerns about the quality of the data, as children aged under 10 years cannot be charged with a criminal offence in any jurisdiction in Australia. Children aged under 10 transitioning from immigration detention centres have been retained in this group.

### **New and returning clients**

Clients are identified in the SHSC as new clients if, in their first support period during the reporting period, they:

- had not previously been assisted by a specialist homelessness agency, at any time since the collection began in 2011-12.

Clients are identified as returning if, in their first support period during the reporting period, they:

- had previously been assisted by a specialist homelessness agency at any time since the collection began in 2011-12.

This measure provides contextual information about service use patterns.

### **Unassisted requests for services**

Unassisted requests for services provide a measure of the number of instances where a person received no immediate services from a specialist homelessness agency. It is not a measure of the number of people who did not receive services from an agency. Numbers exclude multiple requests from the same person (at any agency) on the same day, but may include requests from the same person (at any agency) on different days.

The data are presented as a daily average of requests for services because the information that is used to create the SLK was not available for 48% of the unmet requests for service in 2017-18. Without a valid SLK, it is not possible to identify whether a person requested the same service more than once from the same agency or from different agencies on different days. Similarly, people who received services at a later date, thus becoming clients, cannot be identified where a valid SLK is not available.

Over recent years, a number of jurisdictions have made changes to services delivery models and in particular toward central intake service delivery models. In practice, these systems often require agency workers to provide assistance of some kind to all presenting individuals. Therefore, caution should be used when comparing data over time and between states and territories, particularly data relating to unassisted requests.

## Technical information

### Data presentation

Data presented in the report and in the supplementary tables are mainly based on ‘clients’, with some data based on ‘support periods’ or ‘client groups’ (or ‘presenting units’—which identify clients who present together to a specialist homelessness agency, including clients who present alone—and receive a service). Information on clients who are homeless, at risk of homelessness or part of a group of special interest, is mostly client-level data and information on agencies, unmet demand and trends data is predominantly support period data.

The Australian Institute of Health and Welfare (AIHW) has strict confidentiality policies which have their basis in section 29 of the *Australian Institute of Health and Welfare Act 1987 (AIHW Act)* and the *Privacy Act 1988 (Privacy Act)*. Cells in supplementary tables may be suppressed for either confidentiality reasons or where estimates are based on small numbers, resulting in low reliability. Information that results in attribute disclosure, (that is, if as well as being able to identify the entity, other details are revealed), will be suppressed unless agreement from the particular data provider to publish the data has been reached. Information on AIHW’s Privacy policy is available on the [privacy page](#).

### Population estimates used for rates calculations

All rates in this report, including historical rates, have been calculated using population estimates based on the 2011 Census. All Indigenous rates in this report are calculated using the Indigenous population estimates and projections, based on the 2011 Census.

### Population rates

Crude rates are calculated using the Australian Bureau of Statistics estimated resident population (ERP) at the start of the range (for example, rates for 2011-12 were calculated using the ERP at 30 June 2011). Rates for 2017-18 data were calculated using the preliminary ERP at 30 June 2017.

Minor adjustments in rates may occur between publications reflecting revision of the estimated resident population by the Australian Bureau of Statistics.

### Age-standardised rates

Population rates were adjusted (standardised) for age to enhance the comparison between populations over time that have different age structures. Specifically, direct standardisation has been used where age-specific rates are applied to a standard population (the ERP as at 30 June 2001, unless otherwise specified). This effectively removes the influence of age structure on the calculated rate and is referred to as the age-standardised rate. In this publication direct age-standardisation has been used to compare Aboriginal and Torres Strait Islander and non-Indigenous Australians (AIHW 2011).

### Rate ratio

Rate ratios are mainly used to compare Indigenous and non-Indigenous rates and provide a measure of the level of Indigenous over-representation. A rate ratio is calculated by dividing the client rate for Indigenous Australian by the client rate for non-Indigenous Australians.

### Average annual rates of change

The average annual rates of change or growth rates have been calculated as geometric rates:

$$\text{Average rate of change} = ((P_n/P_o)^{(1/n)} - 1) \times 100$$

where:

$P_n$  = value in the later time period

$P_o$  = value in the earlier time period

$n$  = number of years between the 2 time periods.



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## Technical information

Concept	Definition
Accommodation services	<p><b>Accommodation services</b> include short-term or emergency accommodation, medium-term/transitional housing, assistance to obtain long term housing, assistance to sustain tenancy or prevent tenancy failure or eviction and assistance to prevent foreclosures or for mortgage arrears.</p>
At risk of homelessness	<p>A person is described as <b>at risk of homelessness</b> if they are at risk of losing their accommodation or they are experiencing one or more of a range of factors or triggers that can contribute to homelessness.</p> <p>Risk factors include:</p> <ul style="list-style-type: none"><li>• financial stress (including due to loss of income, low income, gambling, change of family circumstances)</li><li>• housing affordability stress and housing crisis (pending evictions/foreclosures, rental and/or mortgage arrears)</li><li>• inadequate or inappropriate dwelling conditions, including accommodation that is unsafe, unsuitable or overcrowded</li><li>• previous accommodation ended</li><li>• relationship/family breakdown</li><li>• child abuse, neglect or environments where children are at risk</li><li>• sexual abuse</li><li>• domestic/family violence</li><li>• non-family violence</li><li>• mental health issues and other health problems</li><li>• problematic alcohol, drug or substance use</li><li>• employment difficulties and unemployment</li><li>• problematic gambling</li><li>• transitions from custodial and care arrangements, including out-of-home care,</li><li>• independent living arrangements for children aged under 18, health and mental health facilities/programs, juvenile/youth justice and correctional facilities</li><li>• discrimination, including racial discrimination (e.g. Aboriginal people in the urban rental market)</li><li>• disengagement with school or other education and training</li><li>• involvement in, or exposure to, criminal activities</li><li>• antisocial behaviour</li><li>• lack of family and/or community support</li><li>• staying in a boarding house for 12 weeks or more without security of tenure.</li><li>• The measurement of this concept in the SHSC is defined in the Data derivation section.</li></ul>
Client	<p>A <b>Specialist homelessness agency client</b> is a person who receives a specialist homelessness service. A client can be of any age. Children are also clients if they receive a service from a specialist homelessness agency. To be a client the person must directly receive a service and not just be a beneficiary of a service. Children who present with an adult and receive a service are considered to be a client. Children of a client or other household members who present but do not directly receive a service are not considered to be clients.</p>

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**SHS clients are identified as being on a care and protection order** if they are aged under 18 and provided any of the following information in any support period (any month within the support period) during the reporting period (either the week before, at the beginning of the support period or during support).

They reported that they are on a care and protection order and that they had the following care arrangements:

**Client on a care and protection order**

- residential care
- family group home
- relatives/kin/friends who are reimbursed
- foster care
- other home-based care (reimbursed)
- relatives/kin/friends who are not reimbursed
- independent living
- other living arrangements
- parents; or
- They have reported 'Transition from foster care/child safety residential placements' as a reason for seeking assistance, or main reason for seeking assistance.

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**SHS clients with a current mental health issue** are identified as such if they have provided any of the following information:

**Client with a current mental health issue**

- they indicated that at the beginning of a support period they were receiving services or assistance for their mental health issues or had in the last 12 months
- their formal referral source to the specialist homelessness agency was a mental health service
- they reported 'mental health issues' as a reason for seeking assistance
- their dwelling type either a week before presenting to an agency, or when presenting to an agency, was as a psychiatric hospital or unit
- they had been in a psychiatric hospital or unit in the last 12 months
- at some stage during their support period, a need was identified for psychological services, psychiatric services or mental health services.

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**SHS clients with a current problematic drug and/or alcohol use** are identified as such if they are 10 years or older and have provided any of the following information:

**Client with problematic drug and/or alcohol use**

- their dwelling type was recorded as rehabilitation.
- their formal referral source to the specialist homelessness agency was a drug and alcohol service.
- during their support they required drug/alcohol counselling.
- they have been in a rehabilitation facility/institution in the last 12 months.
- they have reported 'problematic drug or substance abuse' or 'problematic alcohol use' as a reason for seeking assistance or main reason for seeking assistance.

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**SHS clients with severe or profound disability** are identified as such if at any time they have provided the following information:

- they 'always/sometimes need help or supervision' with self-care, mobility or communication for any support period during the reporting period.

**Client with disability**

The definition used to identify clients with disability (for the purposes of analyses for this report) is similar to that used for ABS Census questions that measure 'core activity need for assistance'. The Census questions are a simplified version of the comprehensive questions used in the ABS Survey of Disability and Carers (SDAC). The Census's simplified questions are conceptually comparable with 'severe or profound core activity limitation' in the SDAC.

The ABS Census aims to identify people who need assistance in their day-to-day lives with any or all of the following core activities: self-care, mobility or communication (ABS 2012b). The SHSC takes a similar approach in gathering information from clients of specialist homelessness services about disability.

To align with the ABS definition of 'core activity need for assistance', clients who did not report needing assistance (such as 'have difficulty but don't need help/supervision' or 'don't have difficulty, but use aids/equipment') with self-care, mobility or communication are not included as clients with severe or profound disability for SHS analyses.

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### Measuring disability in the SHSC

A long-term health condition is one that has lasted, or is expected to last, 6 months or more.

Examples of long-term health conditions that might restrict everyday activities include severe asthma, epilepsy, mental health conditions, hearing loss, arthritis, autism, kidney disease, chronic pain, speech impediment and stroke.

Disability is a general term that covers:

- impairments in body structures or functions (for example, loss or abnormality of a body part)
- limitations in everyday activities (such as difficulty bathing or managing daily routines)
- restrictions in participation in life situations (such as needing special arrangements to attend work).

### Disability measurement in the SHSC

The SHSC collects information on whether, and to what extent, a long-term health condition or disability restricts clients' everyday activities across the following 3 life areas:

- Self-care—the client needs help/supervision with self-care (e.g. showering or bathing, dressing or undressing, using the toilet or eating food)
- Mobility—the client needs help/supervision with mobility (e.g. moving around the house, moving around outside the home, or getting into or out of a chair)
- Communication—the client needs help/supervision with communication (e.g. understanding or being understood by other people, including people they know).

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General services include:

- family/relationship assistance
- assistance for incest/sexual assault
- legal information
- material aid/brokerage
- financial information
- educational assistance
- training assistance
- employment assistance
- assistance to obtain/maintain government allowances
- assertive outreach for rough sleepers
- child care
- assistance for trauma
- assistance for challenging social/behavioural problems
- living skills/personal development
- court support
- advice/information
- retrieval/storage/removal of personal belongings
- advocacy/liaison on behalf of client
- school liaison
- structured play/skills development
- child contact and residence arrangements
- meals
- laundry/shower facilities
- recreation
- transport and
- other basic assistance.

### General services

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For the purpose of the SHSC a person is defined as homeless if they are living in either:

- non-conventional accommodation or ‘sleeping rough’, or
- short-term or emergency accommodation due to a lack of other options.

Non-conventional accommodation (primary homeless) is defined as:

- living on the streets
- sleeping in parks
- squatting
- staying in cars or railway carriages
- living in improvised dwellings
- living in the long grass.

This definition aligns closely with the cultural definition of primary homelessness.

## Homelessness

Short-term or emergency accommodation (secondary homeless) includes:

- refuges
- crisis shelters
- couch surfing or no tenure
- living temporarily with friends and relatives
- insecure accommodation on a short-term basis
- emergency accommodation arranged by a specialist homelessness agency (for example, in hotels, motels and so forth).

This definition aligns closely with the cultural definition of secondary homelessness.

The measurement of Homelessness in the SHSC is defined in the Data derivation section.

The ABS definition of homelessness for estimates derived from the Census of Population and Housing can be found in ABS catalogue 2049.0 [5].

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<b>Other support services</b>	<b>Other support services</b> refer to the assistance, other than accommodation services, provided to a client. They include domestic/family violence services, mental health services, family/relationship assistance, disability services, drug/alcohol counselling, legal/financial services, immigration/cultural services, other specialist services and general assistance and support.
<b>Specialist homelessness agency</b>	A <b>specialist homelessness agency</b> is an organisation which receives government funding to deliver specialist homelessness services to a client. These can be either not-for-profit or for profit agencies.
<b>Specialist homelessness service(s)</b>	<b>Specialist homelessness service(s)</b> is assistance provided by a specialist homelessness agency to a client aimed at responding to or preventing homelessness. The specialist homelessness services in scope for this collection include accommodation provision, assistance to sustain housing, domestic/family violence services, mental health services, family/relationship assistance, disability services, drug/alcohol counselling, legal/financial services, immigration/cultural services, other specialist services and general assistance and support.
<b>Stable housing</b>	<b>Stable housing</b> , for the purpose of the SHSC, refers to clients ending support in public or community housing (renter or rent free), private or other housing (renter, rent free or owner), or Institutional settings.

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## Technical information

### Abbreviations

<b>ABS</b>	Australian Bureau of Statistics
<b>AHURI</b>	Australian Housing and Urban Research Institute
<b>AIHW</b>	Australian Institute of Health and Welfare
<b>CPO</b>	Care and Protection Order
<b>DSS</b>	Department of Social Services
<b>NAHA</b>	National Affordable Housing Agreement
<b>NDIS</b>	National Disability Insurance Scheme
<b>NPAH</b>	National Partnership Agreement on Homelessness
<b>SDAC</b>	Survey of Disability, Ageing and Carers
<b>SHS</b>	Specialist Homelessness Services
<b>SHSC</b>	Specialist Homelessness Services Collection
<b>SLK</b>	statistical linkage key

### Symbols

<b>—</b>	nil or rounded to zero
<b>. .</b>	not applicable
<b>n.a.</b>	not available
<b>n.p.</b>	not publishable because of small numbers, confidentiality or other concerns about the quality of the data



## Technical information

1. Australian Institute of Health and Welfare (AIHW) 2016. Youth justice in Australia 2014-15. AIHW bulletin no. 133. Cat. no. AUS 198. Canberra: AIHW.
  2. Australian Bureau of Statistics (ABS) 2012a. Census of population and housing: estimating homelessness, 2011. ABS cat no. 2049.0. Canberra: ABS.
  3. ABS 2012b. Census data quality statement: core activity need for assistance. Canberra: ABS. Viewed 17 August 2016.
  4. ABS 2012c. The ASGC remoteness structure. Canberra: ABS. Viewed 17 August 2016.
  5. ABS 2012d. Information paper: a statistical definition of homelessness, 2012. ABS cat. No. 4922.0. Canberra: ABS. Viewed 17 August 2016.
  6. AIHW 2011. Principles on the use of direct age-standardisation in administrative data collections: for measuring the gap between Indigenous and non-Indigenous Australians. Data linkage series. Cat. no. CSI 12. Canberra: AIHW. Viewed 17 August 2016.
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## Fact sheets by state and territory

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# Data

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## Interactive data visualisation

Visualisation not available for printing

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## Notes

### Amendments

**12 Apr 2019** - A wording change has been made to the text above Table DV.1 to clarify the understanding around additional vulnerabilities. No data was changed.

**13 Feb 2019** - Footnote 4 added to tables YOUNG.2, OLDER.2, MH.2, EXIT.2, CPO.2, SUB.2 as historical data has been revised due to a new method for calculating age.

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## Report editions

### Newer releases

- Specialist homelessness services annual report 2021-22 |  
**Web report** | 08 Dec 2022
- Specialist homelessness services annual report 2020-21 |  
**Web report** | 07 Oct 2022
- Specialist homelessness services annual report 2019-20 |  
**Web report** | 11 Dec 2020
- Specialist Homelessness Services annual report 2018-19 |  
**Web report** | 18 Dec 2019

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### This release

Specialist homelessness services annual report 2017-18 | 13 Feb 2019

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### Previous releases

- Specialist homelessness services annual report 2016-17 |  
**Web report** | 12 Feb 2018
- Specialist homelessness services 2015-16 |  
**Web report** | 15 Dec 2016
- Specialist homelessness services 2014-15 |  
**Web report** | 11 Dec 2015
- Specialist homelessness services 2013-14 |  
**Publication** | 15 Dec 2014
- Specialist homelessness services 2012-13 |  
**Publication** | 17 Dec 2013
- Specialist Homelessness Services 2011-12 |  
**Publication** | 18 Dec 2012



## Related material

### Resources

### Related topics

- [Housing assistance](#)
- 

