

9 Mental health-related Supported Accommodation Assistance Program services

The Supported Accommodation Assistance Program (SAAP) National Data Collection (NDC) includes data on the use of SAAP services by those clients with psychiatric or other mental health problems, defined by their having [mental health-related closed support periods](#). This section presents information on these mental health related closed support periods, provided by SAAP agencies in 2008–09.

Key points

- In 2008–09, there were over 20,000 mental health-related closed support periods recorded for over 16,000 clients
- Unaccompanied males and females aged 25 and over were the most common client group with mental health-related closed support periods
- Nearly 40% of clients were self-referred
- The most common length of stay was over 4 weeks and up to 13 weeks.

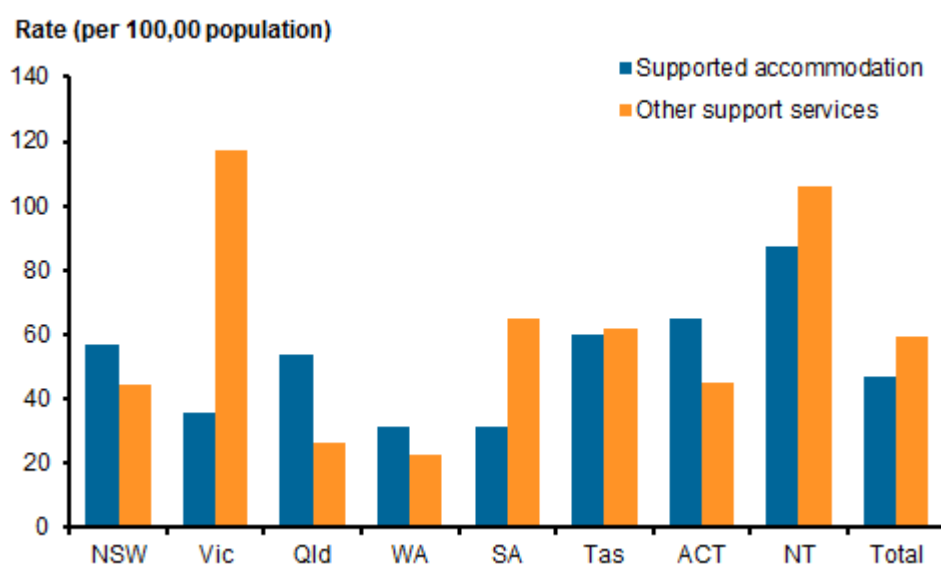
The SAAP is governed by the *Supported Accommodation Assistance Act 1994*, with funding provided jointly by the Australian Government and the state and territory governments. The primary aim of SAAP is to provide people ([SAAP clients](#)) who are homeless or at risk of being homeless with transitional [supported accommodation](#) and [other support services](#) in order to help them achieve the greatest possible degree of self-reliance and independence. Agencies funded through SAAP provide a range of both accommodation and non-accommodation support services.

Data presented in this section have been extracted from the Client Collection component of the SAAP NDC, one of three distinct segments of the SAAP NDC held by the Australian Institute of Health and Welfare. The Client Collection contains information on clients receiving SAAP support lasting for at least 1 hour. However, while participation and consent rates are high, not all SAAP agencies participate in the SAAP NDC and not all clients of participating agencies give valid consent to providing their details to the NDC. For further details regarding the scope and coverage of the SAAP Client Collection, see the [data source section](#).

Mental health-related supported accommodation by states and territories

In 2008–09, there were 22,924 mental health-related closed support periods reported for 16,476 clients, representing 13.8% of the total number of closed support periods reported. Of these, 10,110 (44.1%) involved supported accommodation services, which may include other support services, while 12,814 (55.9%) involved a range of other support services, which did not include accommodation.

The Northern Territory had the highest rate of supported accommodation services per 100,000 population (87.5) whereas Western Australia had the lowest (22.3) (Figure 9.1). For other support services, the rate was highest for Victoria (117.4) which was nearly double that of the national average (59.2).



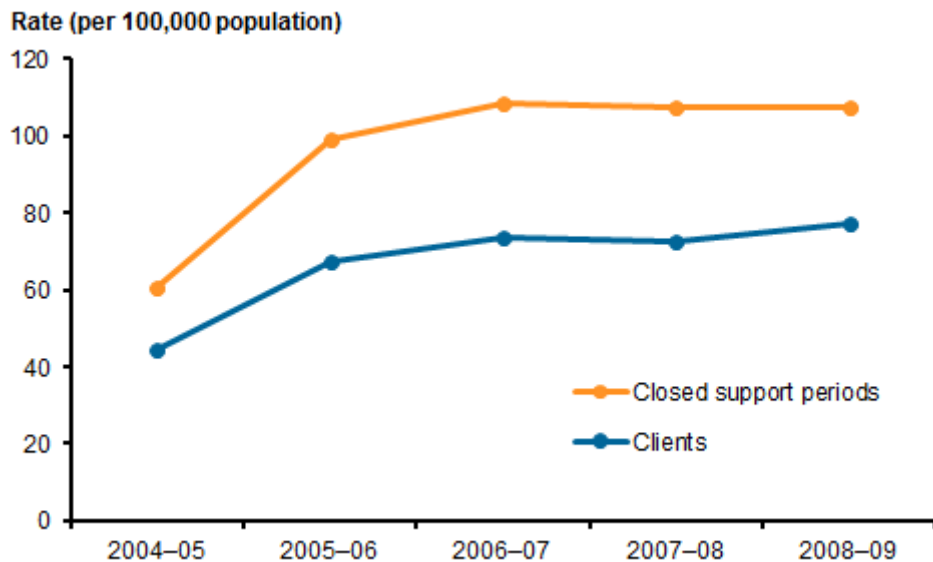
Source: Supported Accommodation Assistance Program Client Collection.

Figure 9.1: SAAP mental health-related closed support periods by rate of service type, states and territories, 2008–09

Mental health-related supported accommodation over time

The total number of SAAP clients with at least one mental health-related closed support period, increased by an annual average of 16.5% between 2004–05 and 2008–09. Over the same period, the total number of SAAP mental health-related closed support periods, increased by an annual average of 17.0%.

Between 2004–05 and 2008–09, the rate (per 100,000 population) of SAAP clients and closed support periods increased by an annual average of 15.0% and 15.5% respectively (Figure 9.2).



Source: Supported Accommodation Assistance Program Client Collection.

Figure 9.2: SAAP mental health-related closed support periods, 2004–05 to 2008–09

Supported accommodation client characteristics

Demographics

In 2008–09, clients aged 25–44 years represented over half (52.9%) of the total number of clients with at least one mental health-related closed support periods. The rate of access, as measured by the age-standardised rate, was slightly higher for male clients (107.9 per 100,000) than for females (106.3).

The age-standardised rate for Indigenous Australians was 465.4 per 100,000 for closed support periods, which was more than 5 times the rate for non-Indigenous Australians (90.4).

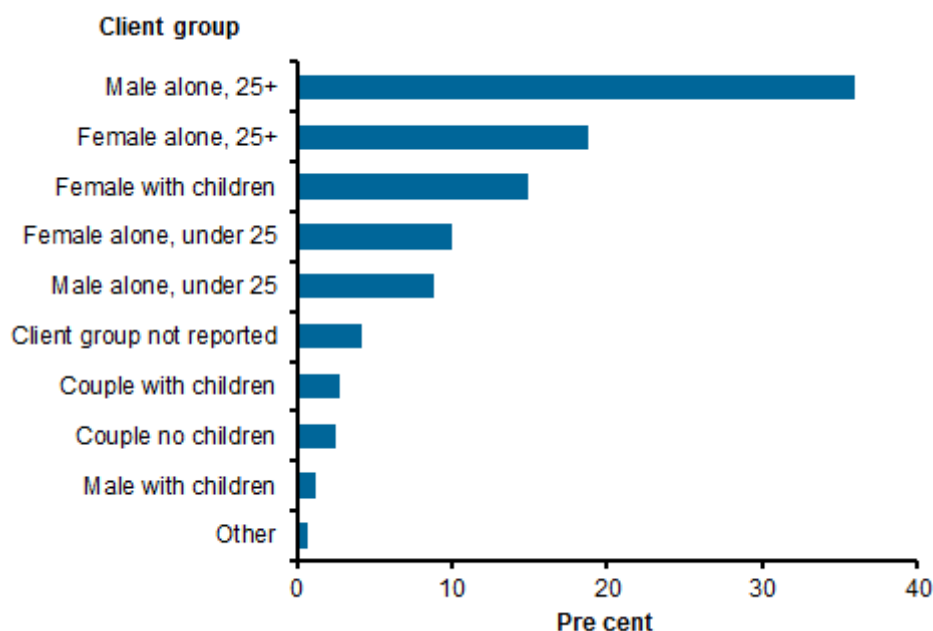
Children accompanying clients

Information is collected on children who accompany their parent(s) or guardian(s) to SAAP agencies or who require assistance from a SAAP agency as a result of their parent or guardian being a client of the same agency. The number of [accompanying children](#) is additional to the number of clients (that is, adults and unaccompanied children) detailed above.

In 2008–09, 8,085 children accompanied clients who had mental health-related closed support periods. Over three-quarters of these children were aged 0 to 12 years.

Client groups

In the SAAP data collection, each client is allocated to a client group based on the client's sex, age group and mode of presentation to the SAAP agency. In 2008–09, the client group with the highest proportion of mental health-related closed support periods was unaccompanied males aged 25 years and over (36.0%), followed by unaccompanied females aged 25 years and over (18.8%) (Figure 9.3).



Source: Supported Accommodation Assistance Program Client Collection.

Figure 9.3: SAAP mental health-related closed support periods by client group type, 2008–09

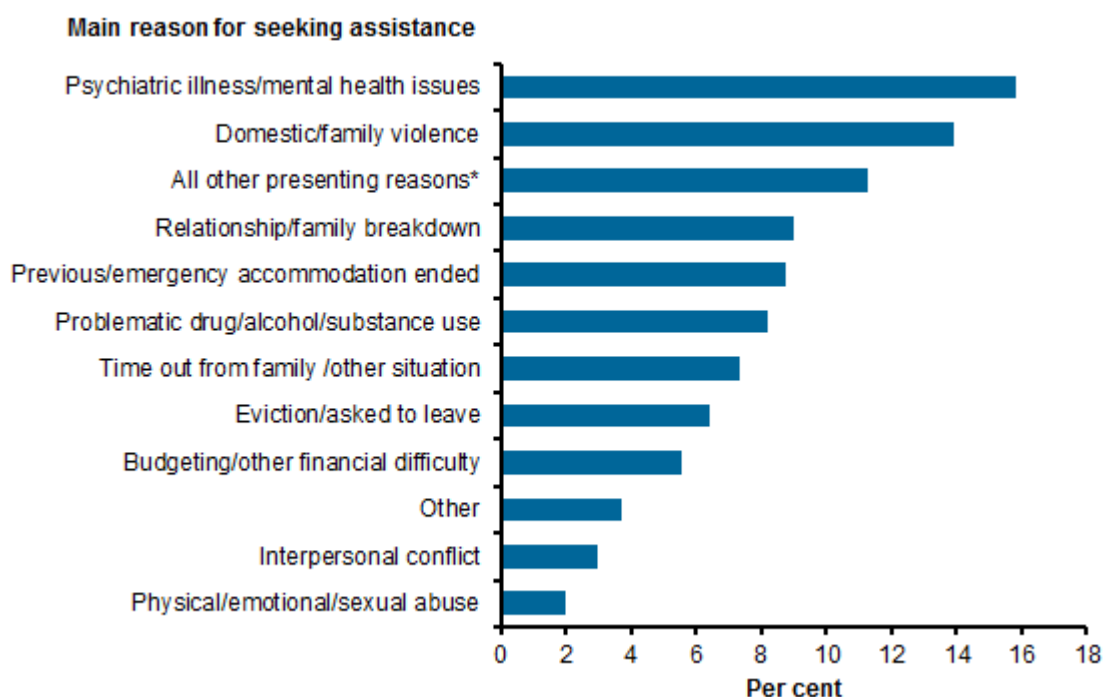
Mental health-related closed support period characteristics

Source of referral to SAAP services

Self-referral was the most common form of referral to SAAP services for mental health-related support periods (38.3%), followed by referrals from other SAAP agencies or workers (8.9%) and referrals from other non-government organisations (8.2%).

Main reason for seeking SAAP assistance

Of those clients receiving a mental health-related closed support period, *Mental health issues* or *Psychiatric illness* were the most common main reasons for seeking assistance. However, various family problems appeared to be the dominant theme in other main reasons for clients seeking SAAP assistance (Figure 9.4).



* All other presenting reasons includes the categories gambling, gay/lesbian/transgender issues, itinerant, other health issues, overcrowding issues, recent arrival to area with no means of support, recently left institution and rent too high.

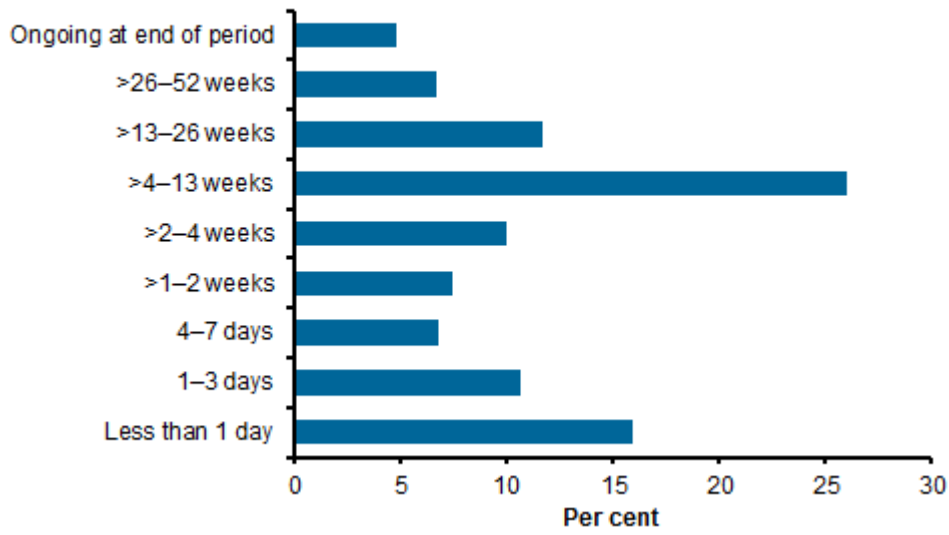
Source: Supported Accommodation Assistance Program Client Collection.

Figure 9.4: SAAP mental health-related closed support periods by main presenting reason for seeking assistance, 2008–09

Length of support period

The distribution of the length of stay for mental health related support periods is shown in Figure 9.5. The most common length of stay was 4–13 weeks (26.0%). Less than 5% of the support periods were still ongoing at the end of the reference period.

Length of support period



Source: Supported Accommodation Assistance Program Client Collection.

Figure 9.5: SAAP mental health-related closed support periods by length of support, 2008-09

Supported Accommodation Assistance Program National Data Collection

From 1985 to 31 December 2008, the Supported Accommodation Assistance Program (SAAP) played a major role in supporting people experiencing, or at risk of, homelessness in Australia. The SAAP National Data Collection (NDC) is a nationally consistent information system that combines information from SAAP agencies, and state and territory and Australian Government funding departments. The AIHW manages the collection.

On 1 January 2009, the SAAP V Agreement between the Australian Government and the states and territories was replaced by the National Affordable Housing Agreement (NAHA) and the National Partnership Agreement on Homelessness (NPAH). However, data collection from government-funded specialist homelessness services has continued under the new arrangements as the SAAP NDC.

The scope of the SAAP NDC includes all agencies that received funding through the national SAAP agreement and/or state and territory SAAP funds. In 2008–09, 1,525 non-government, community and local government agencies were funded nationally under the program. Of the agencies required to participate in the collection, 93.7% participated in the data collection.

The data presented were extracted from the Client Collection component of the SAAP NDC, which includes information about all clients receiving SAAP accommodation or support that is of an ongoing nature or that generally lasts for more than 1 hour on a given day. Data recorded by service providers during or immediately following contact with clients are then forwarded to the AIHW after the clients' support periods have ended or, for ongoing clients, at the end of the reporting period (30 June of each year).

Data collected include basic socio-demographic information and information on the services needed by, and provided to, each client. Information about each client's situation before and after receiving SAAP services is also collected.

There are high levels of non-response to particular questions on the data collection forms received by the AIHW. This means that caution should be exercised when interpreting the data because the results may not fully reflect the entire population of interest.

Furthermore, the protocols established for the NDC require that SAAP clients provide information in a climate of informed consent. If a client's consent is not obtained, only a limited number of questions can be completed on data collection forms. In 2008–09, valid consent was obtained from clients in 85% of support periods in participating agencies.

While data reported from the SAAP Client Collection are generally weighted to take non participation of agencies and non-consent of clients into account, unweighted data are presented in this report. Based on unweighted responses, there was a total of 165,833 closed support periods reported in the SAAP Client Collection for 2008–09. For the same period, the number of closed support periods using weighted data was estimated to be 176,798.

For further information on the SAAP collection, refer to the 2008–09 AIHW publication *Homeless people in SAAP: SAAP National Data Collection annual report* (AIHW 2010).

Caveats

The SAAP Client Collection includes information on source of referral, presenting reasons and type of assistance. Information from each of these data elements has been used to indicate whether or not a SAAP support period was mental health related and, in turn, how many clients received mental health related closed support periods.

The number of mental health-related closed support periods reported is an underestimate of the actual number of such support periods for the following reasons:

- Data presented in this chapter are unweighted, meaning that there has been no adjustment for undercounting support periods due to the non-participation of some agencies and the non-consent of some SAAP clients to the provision of their data. The data, therefore, are not comparable with other data published from the SAAP Client Collection, nor between Mental health services in Australia publications.
- Information on presenting reasons for seeking assistance is only collected from clients who give consent. In addition, consenting clients with mental disorders may not report 'psychiatric illness' as a presenting reason.
- Information is collected by workers in SAAP agencies; these workers may not be trained to assess a client's need for psychiatric or psychological services.

It is important to note that some clients who were identified as having had mental health-related closed support periods may have had other closed support periods for which no mental health-related information was reported. These latter support periods are not included in the data presented.

Reference

AIHW 2010. Government-funded specialist homelessness services: SAAP National Data Collection annual report 2008-09 Australia. Cat. no. HOU 219. Canberra: AIHW.