

Specialist homelessness services client pathways: analysis insights:

## Specialist homelessness services client pathways: Clients supported in 2015-16

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### SHS: Clients supported in 2015-16

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Study cohort - Specialist homelessness services: Clients supported in 2015-16

#### Introduction

Specialist homelessness agencies provide services aimed at prevention and early intervention as well as crisis assistance to support people experiencing or at risk of homelessness. A general cohort was created to examine the characteristics and service use patterns of SHS clients over time.

See [Introduction to the SHS longitudinal data](#) for details on the longitudinal analyses undertaken.

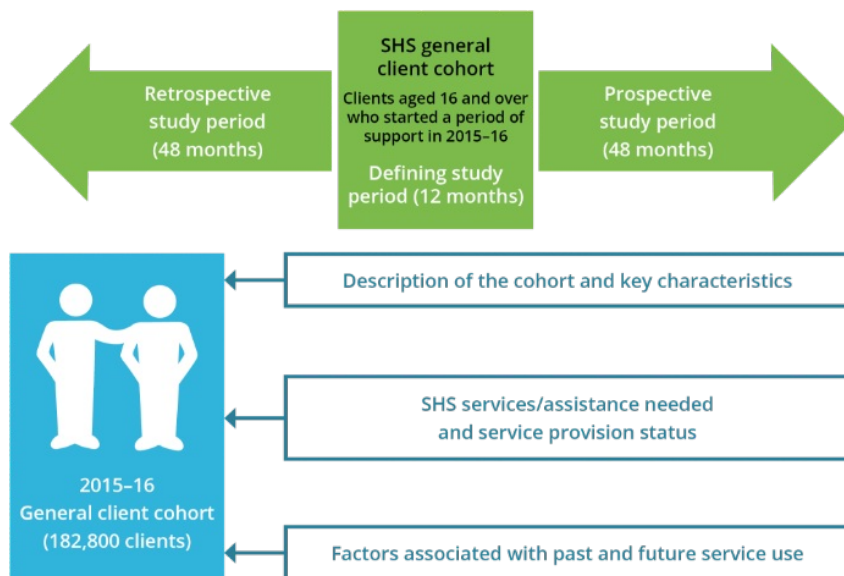
The 201516- general cohort was defined as clients aged 16 and over that commenced a period of support from a specialist homelessness service (SHS) at any time during 2015-16.

Characteristics and outcomes for the general cohort were examined using [aggregated support period data](#) for discrete study periods ([Figure GENERAL.1](#)). The defining study period covered 12 months from the first day of their first support period during 2015-16. The retrospective period for this cohort was 48 months (that is, the 48 months before the first day of the client's first support period in 2015-16). The prospective study period for each client ranged for the 48 months after the defining period ended.

Note, support periods fall into study periods solely based on the day on which they commenced; a support period that commenced in the defining period but continued into the prospective period, for example, will be aggregated into the defining study period data only.

A general cohort was created to examine patterns of service usage for all clients.

**Figure GENERAL.1: 2015-16 general client cohort, longitudinal analysis overview**



Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.1.

## Key characteristics of the general cohort

There were nearly 182,800 clients in the 2015-16 General Cohort with the following key characteristics during the 12-month defining study period (which started in 2015-16) (Table GEN1516.1):

- Most clients (69% or 126,400 clients) were aged 18 to 44 years at the time of their first support period in 2015-16.
- Around 76,700 clients (42%) received their first service of 2015-16 in Victoria, nearly 41,800 (23%) in New South Wales and 13% (24,300 clients) in Queensland.
- Around 114,900 clients (63%) were female.
- Around 41,400 clients (23%) were Indigenous and about 30,800 (17%) clients were born overseas.
- Over half (55%, or almost 100,400 clients) had only one support period during the 12-month defining study period.

Less than half (44%) had used SHS services previously (Table GEN1516.1); that is, nearly 79,700 clients had used SHS services in the 48-month retrospective study period that preceded the first support period in the defining study period for each client. Of these:

- Around 33,000 clients also had a history of a current mental health issue.
- Around 16,800 clients also had a history of drug or alcohol problems.

Around 44% of clients (80,200 clients) were ongoing SHS service users, meaning they received SHS support in the 48-month prospective study period (Table GEN1516.1). Of these:

- Over 40,800 clients (22%) had a mental health issue.
- Around 10% (19,100 clients) had a drug or alcohol problem.

## Vulnerability pathways

Using data for the entire longitudinal period, SHS clients were assessed for the presence of vulnerabilities including mental health issues, drug and/or alcohol problems, and experience of family and domestic violence (FDV) issues within each of the 3 study periods - the retrospective, defining and prospective periods (Figure GENERAL.2, Table GEN1516.1, Table GEN1516.2). For more information on the derivation of these vulnerabilities, see [Methodology](#).

Around one-third of clients (63,000) had mental health issues in the defining period. Of these, nearly 11,000 (17% of clients with mental health issues in the defining period) had mental health issues in both the retrospective and prospective periods, whereas 15% (9,100 clients) only had mental health issues in the past (retrospective period) in addition to the defining study period. Nearly 20% (12,400 clients) had ongoing mental health issues only (in both the defining and prospective periods).

Figure GENERAL.2 and Table GEN1516.2 show vulnerability pathways for clients experiencing FDV, clients with a mental health issue and those with problems with drugs or alcohol.

### Figure GENERAL.2: General client cohort 2015-16, vulnerability pathways

This interactive Sankey diagram shows the 2015-16 general cohort clients who experienced three vulnerabilities, clients who had experienced FDV, clients with a mental health issue and those with problems with drugs or alcohol in the defining study period and whether clients also experienced these vulnerabilities in the past and future study periods. These vulnerability pathways are shown separately, using radio buttons to select between vulnerability types. Using data for the entire longitudinal period, SHS general cohort clients were assessed for the presence of these vulnerabilities within each of the three study periods - the retrospective, defining and prospective periods.

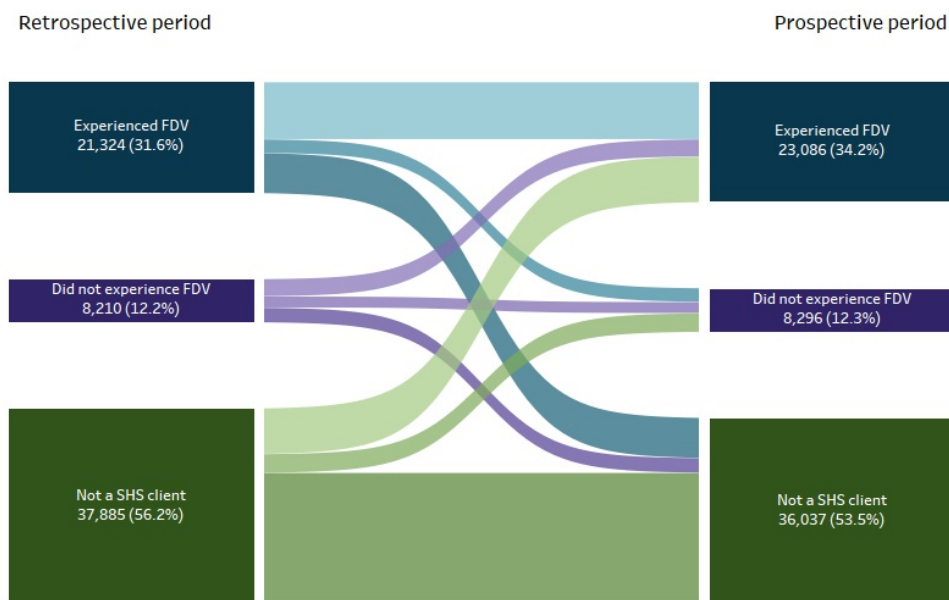
Vulnerability data and pathways for all states and territories and Australia can be selected and displayed. Most clients at the national level only experienced the vulnerability in the defining study period and were not SHS clients in the retrospective and prospective study periods. The second largest category were clients who had experienced the vulnerability in all three periods (past, defining and future).

Aus
  NSW
  Vic
  Qld
  WA
  SA
  Tas
  ACT
  NT

Choose a vulnerability

Experienced family and domestic violence  
 Mental health issues  
 Problematic drug/alcohol use

Of the clients in the 2015-16 general cohort, nationally there were 67,419 clients who experienced family and domestic violence during the defining period. The following figure shows the number who were SHS clients in the past (retrospective) or future (prospective) and the presence/absence of the selected vulnerability.



Notes

1. Percentages are calculated using total clients who experienced the selected vulnerability in the defining period as the denominator (67,419).
2. The defining study period covered 12 months from the first day of their first support period during 2015-16. The retrospective period for this cohort was 48 months (that is, the 48 months before the first day of the client's first support period in 2015-16). The prospective study period for each client ranged for the 48 months after the defining period ended.

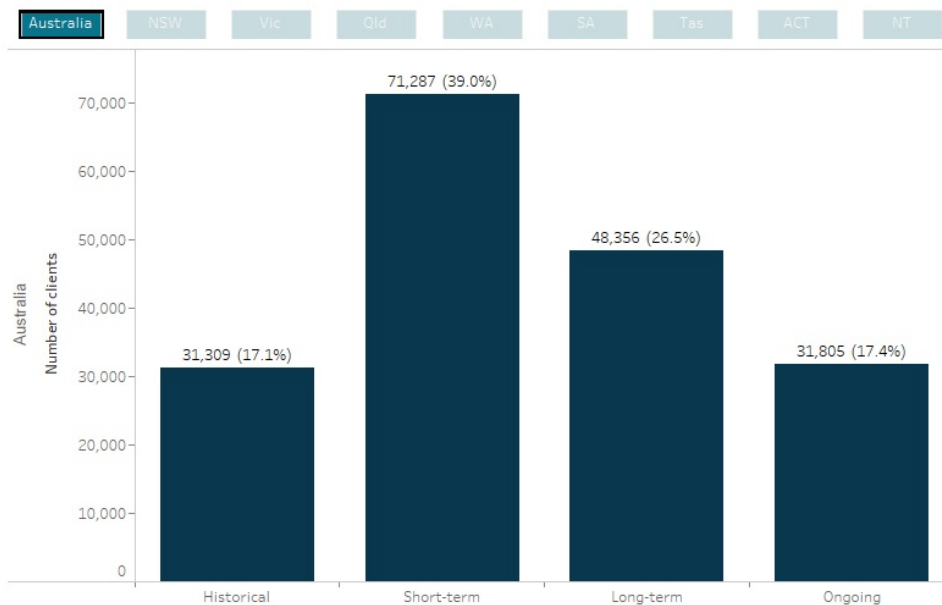
Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.2.

## Service engagement profiles

Service use patterns of the 2015-16 general cohort were examined over the entire longitudinal period (2011-21). Of the 182,800 clients that made up the study period cohort, 71,300 (39%) were short-term clients who only used services during the 12-month defining study period and 48,400 (26%) were long-term clients and had used SHS support at various times over the 10-year period; the intensity of support could have varied between clients over this time period from constant and frequent use to infrequent, sporadic use (Figure GENERAL.3, Table GEN1516.1).

### Figure GENERAL.3: General client cohort 2015-16, service engagement profiles

This interactive bar chart shows service use patterns of the 2015-16 general cohort over the entire longitudinal period (2011-21). Support information was combined from the discrete study periods into four service engagement profile groups (historical, short-term, long-term and ongoing). Engagement profiles for all states and territories and Australia can be selected and displayed. Nationally, of the 182,800 clients that made up the study period cohort, 71,300 (39%) were short-term clients who only used services during the 12-month defining study period and 48,400 (26%) were long-term clients and had used SHS support at various times over the 10-year period



Note: Short-term clients received SHS services only during the defining study period. Historical clients received SHS services in the retrospective and defining study periods. Ongoing clients received SHS services in the defining and prospective study periods. Long-term clients received SHS services in all three study periods.

Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.1.

## SHS clients - General cohort past and future service use

Services provided by SHS agencies was examined for the general cohort in each study period (Table GENERAL.1). Clients who received support in the defining period in New South Wales were least likely to have also received support in the past (33%), clients in South Australia were the most likely to have had past SHS support (52%). Clients who started support in the Northern Territory in the defining period were the most likely to receive support into the future (51%), followed by Victoria (48%).

### Table GENERAL.1. General clients 2015-16, by past (retrospective) and future (prospective) service use and state/territory

The interactive stacked horizontal bar graph shows the select top 10 services needed and the provision/referral status for the 2015-16 general cohort clients (182,800 clients) that used services in the retrospective, defining and prospective study periods. Across all study periods, short-term or emergency accommodation was one of the most needed services, over 70% of these clients were either provided this service or referred to another agency. Material aid/brokerage was also a key service needed by this cohort; this service was provided/referred to over 90% of clients.

	Past (Retrospective study period)		Defining study period	Future (Prospective study period)	
	Number	Per cent		Number	Number
NSW	13,823	33.1	41,790	15,983	38.2
Vic	37,100	48.4	76,672	36,459	47.6
Qld	10,307	42.4	24,304	9,738	40.1
WA	6,453	41.9	15,397	6,836	44.4
SA	6,976	51.6	13,507	6,319	46.8
Tas	2,011	44.5	4,523	1,905	42.1
ACT	971	42.0	2,310	752	32.6
NT	2,024	47.6	4,254	2,169	51.0
National	79,665	43.6	182,757	80,161	43.9

Note: Percentages are based on the number of clients in the defining study period for each state or territory.

Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.1.

## SHS services needed by general cohort clients

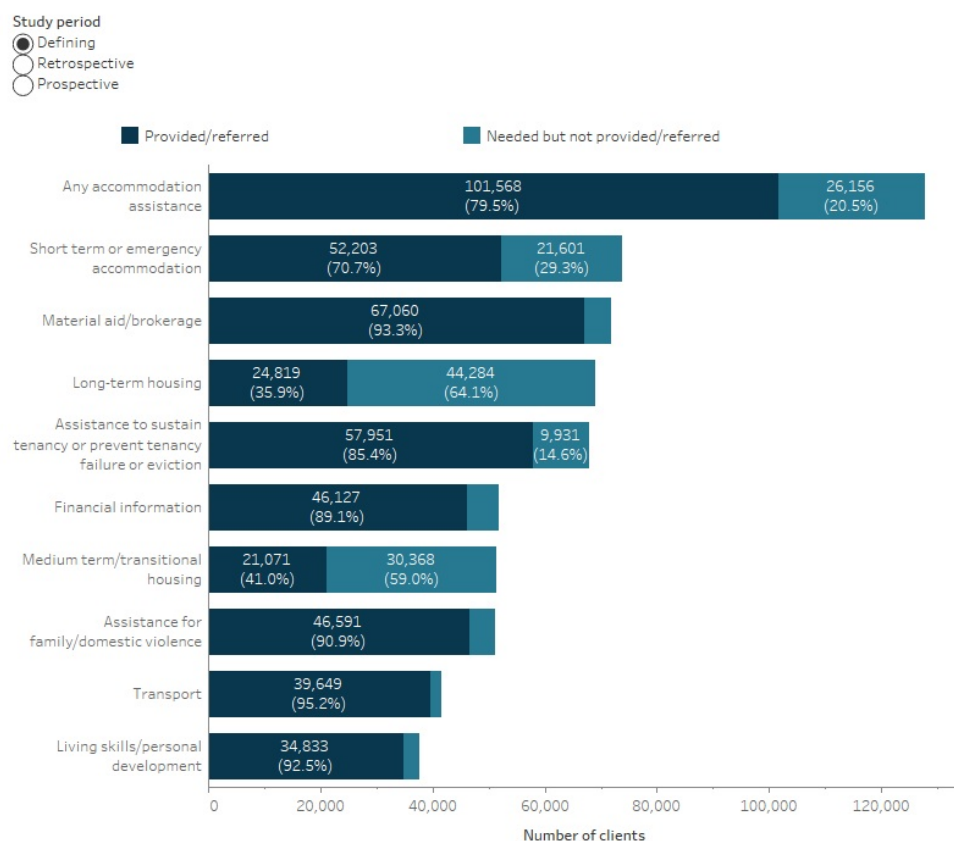
Client service use was aggregated for each of the 3 study periods - the retrospective (48 months before the start of the defining study period), defining (12-month period starting with the first in-scope support period in 2015-16), and prospective (48 months after the end of the defining period) periods. For each client, the aggregation process examined whether each of the service types were needed or provided/referred in each study periods. Aggregating the data over study periods does not distinguish the number of times that each service was needed or provided. A client determined to have needed and been provided a service may, in fact, have needed the service many times but only been provided it once.

Services need and provision/referral of each service type was examined for the subset of general cohort clients that used services in the retrospective, defining and prospective study periods; aggregation is based on services needed or provided/referred in support periods that commenced within each study period only.

There were 182,800 general cohort clients in the defining study period, 79,700 clients in the retrospective study period and almost 80,200 clients in the prospective study period (Table GEN1516.1).

**Figure GENERAL.4: 2015-16 General cohort, select top 10 services and assistance needed and service provision status by study period**

The interactive stacked horizontal bar graph shows the select top 10 services needed and the provision/referral status for the 2015-16 general cohort clients (182,800 clients) that used services in the retrospective, defining and prospective study periods. Across all study periods, short-term or emergency accommodation was one of the most needed services, over 70% of these clients were either provided this service or referred to another agency. Material aid/brokerage was also a key service needed by this cohort; this service was provided/referred to over 90% of clients.



**Notes**

1. Percentages are based on the number of clients who needed the service in each study period as the denominator.
2. Any accommodation assistance refers to need or provision of any of 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.
3. The services Other basic assistance, Advice/information and Advocacy/liaison on behalf of client have not been included in the top 10 shown above.

Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.3.

Most General cohort clients who needed support in the defining period needed general support services such as advice/information (82%), other basic assistance (67%) and advocacy/liaison on behalf of client (57%). Almost all (around 99%) of these clients were provided these services or referred to another agency.

The other services most needed by the 182,800 General cohort clients were (Table GEN1516.3):

- short term or emergency accommodation, 73,800 clients in the defining period; 71% of these clients were either provided with this assistance or referred to another agency for the support
- material aid/brokerage, 71,900 clients in the defining period; 93% of clients provided/referred
- long-term housing, 69,100 clients in the defining period; 36% provided/referred
- assistance to sustain tenancy or prevent tenancy failure or eviction, 67,900 clients in the defining period; 85% provided/referred.

**Factors associated with past and future SHS support**

Descriptive regression models were used to examine whether client characteristics or support experiences in the defining period were associated with receipt of SHS support in the prospective study period (ongoing service use) or, separately, in the retrospective period (historical service use). Information on interpreting regression models can be found in the section Understanding factors associated with past and future support.

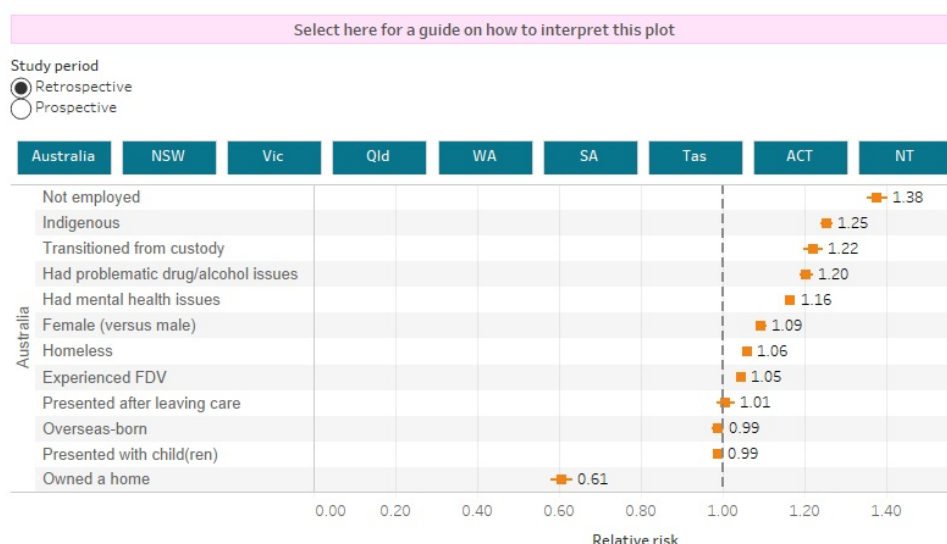
Figure GENERAL.5 shows relative risks for having received SHS support in the past (retrospective) and future (relative to the defining period, that is, the prospective period). Separate models were created for each state-territory as well as a national model. Results for Tasmania, the Northern Territory and the Australian Capital Territory should be used with caution because the number of clients in the cohort was not considered to be statistically valid (Table GENERAL.1). Data from these states or territories are included in the national results, however.

For both outcomes - that is, past SHS support and future SHS support (Figure GENERAL.5) - the associations were similar:

- Being either unemployed or not in the labour force at some time during the defining study period had the strongest association with past or future SHS support.
- Being an Indigenous Australian also had a strong association with past or future SHS support due to the social and economic disadvantages faced by Indigenous Australians and a higher prevalence of health risk factors (POA 2014, AIHW 2020).
- Other factors, such as transitioning from custody, drug or alcohol issues, mental health issues or having been homeless at some time, were also associated with past or future SHS support.
- Owning a home and being born overseas were associated with a reduced use of SHS support outside of the defining study period.

### Figure GENERAL.5: 2015-16 General cohort, relative risk for use of SHS services in the retrospective and prospective study periods

The interactive risk ratio plot shows the characteristics or circumstances that are associated with the general cohorts' use of SHS services in the past (retrospective) or future (prospective period), these associations are presented as relative risks. Relative risks for all states and territories and Australia can be selected and displayed. For both past and future SHS support the associations were similar. Nationally, being either unemployed or not in the labour force at some time during the defining study period had the strongest association with past or future SHS support. Owning a home and being born overseas were associated with a reduced use of SHS support outside of the defining study period.



#### Notes

1. Apart from *overseas-born* and *Indigenous*, all other parameters capture whether a client ever experienced that situation in the defining period (for example, *homeless* captures whether the client was homeless at any time during a support period in the defining study period).
2. *Not employed* means unemployed or not in the labour force.
3. *Presented with child(ren)* means that the client started at least one support period in the defining study period with one or more children.

Source: AIHW analysis of SHS longitudinal data 2011-21, Table GEN1516.4.

[See technical notes](#)

## Summary

The 2015-16 general cohort contained over 182,800 clients aged 16 and over. The majority were female (63%) and over half had only one support period in the 12-month defining study period.

Less than half (44%) had used services previously and 44% continued to use services into the future. One-in-four clients were long-term clients (needed SHS support over the 10-year period).

Services needed commonly included general support services, material aid/brokerage or accommodation services, these were consistently the most needed services across all study periods.

The main factors associated with a history of service use, or continued service use into the future, are whether a client was not employed or Indigenous during the defining study period. Vulnerabilities such as experiencing FDV, transitioning from custody, homelessness, mental health issues or drug and/or alcohol problems are also relevant to a client's service engagement patterns and associated with increased probability of historical and future service use.

## References

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