

## Specialist homelessness services

The SHSC describes all clients who receive services from specialist homelessness agencies and the assistance they receive, including clients with psychiatric or other mental health problems. The Specialist Homelessness Services Collection (SHSC) began on 1 July 2011, replacing the Supported Accommodation Assistance Program (SAAP) National Data Collection which included data from specialist homelessness agencies from 1996 to June 2011.

Specialist Homelessness Services (SHS) that are funded under the National Affordable Housing Agreement (NAHA) and the National Partnership Agreement on Homelessness (NPAH) are in scope for this collection. These agencies provide a wide range of services and operate within a range of service delivery frameworks. All SHS agencies report a standard set of data about the clients they support each month to the AIHW.

In addition to supporting clients who are homeless, a key aim of specialist homelessness services is to prevent homelessness from occurring among those who find themselves at-risk of becoming homeless. Services provided by SHS agencies include accommodation and associated support services. For further details regarding the scope and coverage of the Specialist Homelessness Services Collection, see the [data source section](#).

The SHSC includes data on the use of specialist homelessness services by clients with a current mental health issue. This section presents information provided by SHS agencies on clients with a current mental health issue for 2012–13.

### Key points

- In 2012–13, there were just over 46,000 SHS clients with a current mental health issue.
- More than 2 in 5 clients (42.7%) with a current mental health issue reported an episode of homelessness in the 12 months before presenting compared with about 1 in 4 of those clients (25.6%) without a current mental health issue.
- Clients with a current mental health issue aged 18–24 had the highest rate of SHS agency use (414.1 per 100,000 population).
- Specialist homeless agency/outreach workers were the most frequently recorded source of referral (12.0%) for clients with a current mental health issue.
- Half of those clients with a current mental health issue received between 6–45 days (24.2%) or over 180 days (26.9%) of support in 2012–13.

## Mental health-related support

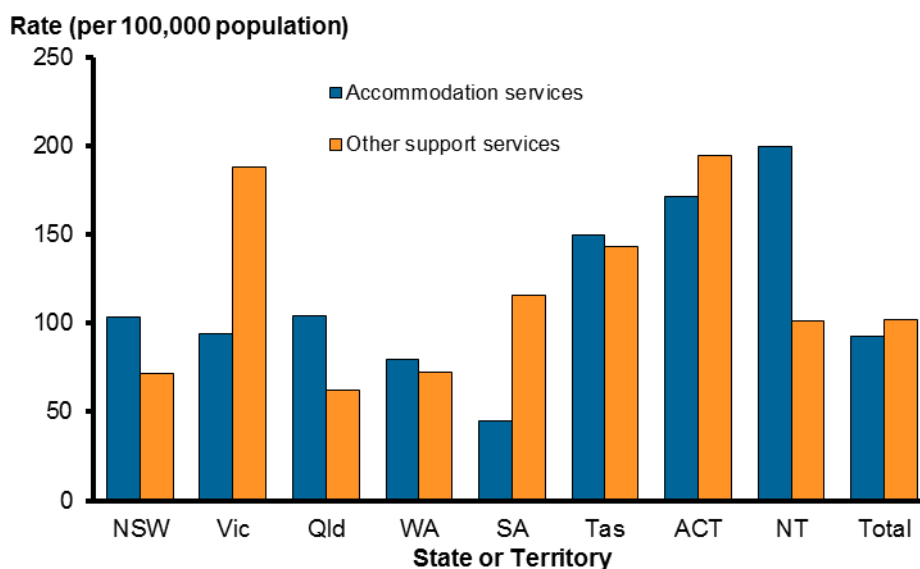
There were about 193,700 [Specialist Homelessness Services \(SHS\) clients](#) aged 10 years and over reported in 2012–13 (AIHW 2014). Of these, about 1 in 4 (46,037 or 23.8%) was a client with a [current mental health issue](#).

Nationally, there were 92.5 clients per 100,000 population with a current mental health issue who accessed accommodation services from SHS agencies in 2012–13 (Figure SHS.1). Across jurisdictions, rates ranged from 199.3 per 100,000 population for the Northern Territory to 44.9 for South Australia.

For other types of support services provided (excluding accommodation services) the national rate was 102.1 per 100,000 population. Rates varied between jurisdictions, from 194.2 per 100,000 population for the Australian Capital Territory to 62.0 for Queensland.

In considering these findings it should be noted that those clients in the accommodation services group are also likely to have received other types of support services. In contrast, those clients in the other support services group have not received accommodation services.

**Figure SHS.1: SHS clients with current mental health issue, by service type, states and territories, 2012–13**



*Alt text: Vertical bar chart showing the rate of SHS clients with a current mental health issue, by service type and state or territory for 2012–13. The ratio of supported accommodation versus other support services accessed varies across states and territories. Rates for accommodation services accessed ranged from 199.3 per 100,000 population for the Northern Territory to 44.9 for South Australia. Rates for other support services ranged from 194.2 per 100,000 population for the Australian Capital Territory to 62.0 for Queensland. Refer to Table SHS.4.*

Source: Specialist Homelessness Services Collection. Source data Specialised homelessness services Table SHS.4 (225KB XLS)

### Reference

AIHW 2014. Specialist Homelessness Services Collection 2012–13 (unpublished data). Canberra: AIHW.

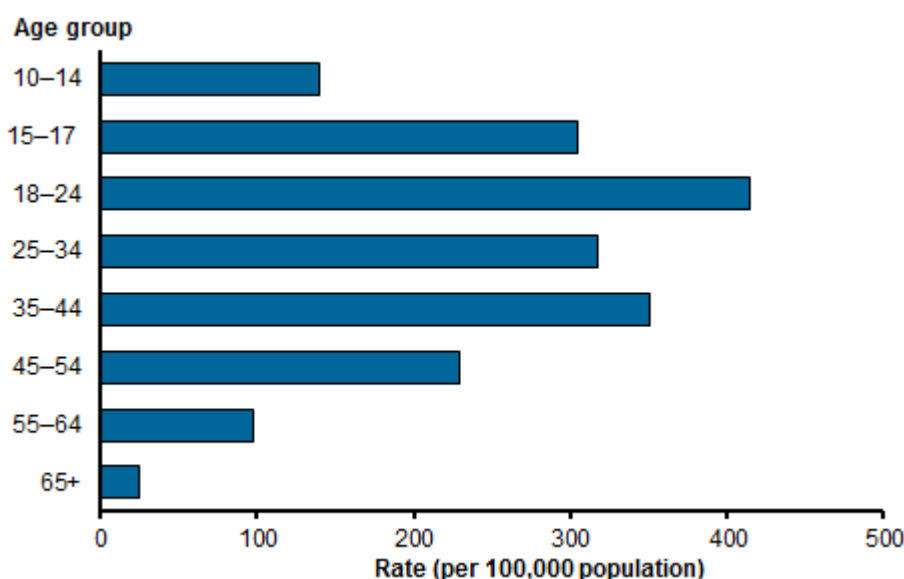
## Specialist Homelessness Services clients

For clients with a current mental health issue, those aged 18–24 had the highest rate of SHS agency use followed by 35–44 year olds (414.1 and 351.1 per 100,000 population respectively) for 2012–13 (Figure SHS.2). Rates of SHS agency use were higher for female clients than males (233.3 and 181.7 per 100,000 population respectively).

The rate of SHS clients with a current mental health issue for Aboriginal and Torres Strait Islander People was around 7 times that of non-Indigenous Australians (1,175.0 and 165.6 per 100,000 population respectively).

There were around 1,900 clients with a current mental health issue aged 10–14.

**Figure SHS.2: SHS clients with current mental health issue, by age group, 2012–13**



*Alt text:*

*Horizontal bar chart showing the rate of SHS clients with a current mental health issue, by age group for 2012–13. Agency use was highest in those aged 18–24 (414.1 per 100,000 population), followed by 35–44 year olds (351.1). Refer to Table SHS.1.*

Source: Specialist Homelessness Services Collection. Source data Specialised homelessness services Table SHS.1 (225KB XLS)

A specialist homelessness agency/outreach worker was the most frequently recorded source of referral to SHS agencies (12.0%) for clients with a current mental health issue during 2012–13. The next most frequently recorded sources were referrals from other agencies (government or non-government) (11.1%) and family and/or friends (6.2%).

More than 2 in 5 SHS clients (42.7%) with a current mental health issue reported an episode of homelessness in the 12 months before presenting to an agency compared to around 1 in 4 (25.6%) of those clients without a current mental health issue (AIHW 2014).

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### Reference

AIHW 2014. Specialist Homelessness Services Collection 2012–13 (unpublished data). Canberra: AIHW.

## Service use

### Main reason for seeking SHS agency assistance

Around 1 in 7 SHS clients (15.2%) with a mental health issue had housing crises as the main reason for seeking assistance, followed by domestic and family violence (13.8%) and financial difficulties (11.6%). These were also the same top three main reasons for seeking assistance for SHS clients without a current mental health issue. About 1 in 15 SHS clients (6.0%) with a current mental health issue had mental health issues recorded as their main reason for seeking assistance (Figure SHS.3).

**Figure SHS.3: SHS clients with current mental health issue, by the 10 most frequently reported main reasons for seeking assistance, 2012–13**



*Alt text:*

*Horizontal bar chart showing the per cent of SHS clients with a current mental health issue, by the 10 most frequently reported main reason for seeking assistance for 2012–13. Housing crises was the most common main reason for seeking assistance (15.2%), followed by domestic and family violence (13.8%) and financial difficulties (11.6%). Refer to Table SHS.2.*

*Source:* Specialist Homelessness Services Collection. Source data Specialised homelessness services Table SHS.2 (225KB XLS)

When all presenting reasons for seeking assistance are considered, financial difficulties (10.9%) and mental health issues (10.7%) are the most frequently reported reasons.

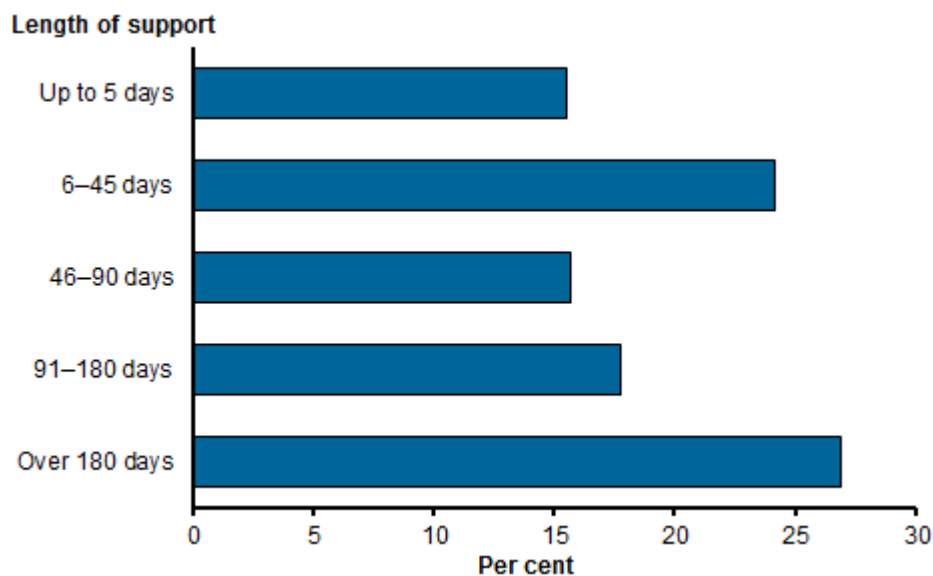
### Services and assistance

About 419,700 services were provided to SHS clients with a current mental health issue in 2012–13. Of these, 10% were related to providing or maintaining accommodation, 12.5% were specialist or professional services and the remainder (77.4%) were related to other general support and assistance.

## Length of support provided

Around half of clients with a current mental health issue received between 6–45 days of support or over 180 days of support (24.2% and 26.9% respectively) in 2012–13. About 1 in 6 clients received 5 days or less (15.5%) (Figure SHS.4). These figures represent the total period of support provided to a client during 2012–13.

**Figure SHS.4: SHS clients with current mental health issue, by total length of support provided, 2012–13**



*Alt text:*

*Horizontal bar chart showing the per cent of SHS clients with a current mental health issue, by the length of support provided in 2012–13. The most common length of support was over 180 days (26.9%) followed by 6–45 days (24.2%). Refer to Table SHS.7.*

*Source:* Specialist Homelessness Services Collection. Source data Specialised homelessness services Table SHS.7 (225KB XLS)

## Data source

### Specialist Homelessness Services Collection

All agencies that receive funding under the National Affordable Housing Agreement (NAHA) or the National Partnership Agreement on Homelessness (NPAH) to provide specialist homelessness services are in scope for the Specialist Homelessness Services Collection (SHSC) in general, but only those who received funding for at least four months during the 2012–13 financial year are in scope for the 2012–13 reporting period. Covered agencies are those in-scope agencies for which details have been provided to the AIHW by the relevant state/territory department.

Specialist homelessness agencies provided assistance to 244,176 clients in 412,614 [support periods](#) (AIHW 2013). It should be noted that these figures have been adjusted for non-responses.

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

It should be noted that unlike the previous SAAP National Data Collection, the SHSC does not use the concept of accompanying children but instead only counts children if they have been provided with a service. Information about clients who access services together allows for family groups to be counted as well.

For further information on the SHS collection, refer to *Specialist Homelessness Services 2012–13* (AIHW 2013).

### Caveats

There are a number of considerations related to the 2012–13 SHSC data:

- Data presented in this section excludes data for clients who were aged less than 10 at the beginning of their first support period in 2012–13.
- Data presented in this section are unweighted, meaning that there has been no adjustment for the undercounting of support periods that result from non-response. The data, therefore, are not comparable with other data published from the SHS Collection.
- Only those agencies that received NAHA or NPAH funding for at least four months during the 2012–13 financial year are in scope for the 2012–13 reporting period. Covered agencies are those in-scope agencies for which details have been provided to the AIHW by the relevant state/territory department.
- 95% of covered agencies returned support period data in 2012–13, with 90% returning data for all 12 months.
- The rate of invalid/'don't know'/missing responses was high for a number of 2012–13 SHSC data items.
- Matching of data from individual clients who presented at different agencies and/or at different times requires a valid statistical linkage key (SLK); with 94% of support periods having a valid SLK in 2012–13.

The SHS replaces the Supported Accommodation Assistance Program National Data Collection (SAAP NDC). There are significant differences between the two, creating comparability issues when comparing data over time.

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### Reference

AIHW 2013. *Specialist Homelessness Services 2012–13*. Cat. no. HOU 27. Canberra: AIHW.

## Key concepts

### Mental health-related Specialist Homelessness Services

Key Concept	Description
<b>Support period</b>	<p>A <b>support period</b> is the period of time a client receives assistance from an agency. A support period starts on the day the client first receives a service from an agency and ends when:</p> <ul style="list-style-type: none"> <li>the relationship between the client and the agency ends,</li> <li>the client has reached their maximum amount of support the agency can offer, or</li> <li>a client has not received any services from the agency for a whole calendar month and there is no ongoing relationship.</li> </ul>
<b>SHS clients with current mental health issue</b>	<p><b>SHS clients with current mental health issue</b> are identified as such if they have provided any of the following information:</p> <ul style="list-style-type: none"> <li>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</li> <li>their formal referral source to the specialist homelessness agency was a mental health service</li> <li>they reported 'mental health issues' as a reason for seeking assistance</li> <li>their dwelling type either a week before presenting to an agency, or when presenting to an agency, was a psychiatric hospital or unit</li> <li>they had been in a psychiatric hospital or unit in the last 12 months</li> <li>at some stage during their support period, a need was identified for psychological services, psychiatric services or mental health services.</li> </ul>
<b>Accommodation services</b>	<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>
<b>Other support services</b>	<p><b>Other support services</b> refer to the assistance, other than accommodation services, provided to a client. Includes mental health services, family/relationship assistance, disability services, drug/alcohol counselling, legal/financial services, immigration/cultural services, domestic/family violence services, other specialist services and general assistance and support services.</p>
<b>Specialist homelessness agency client</b>	<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:</p> <ul style="list-style-type: none"> <li>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;</li> <li>children of a client or other household members who present but do not directly receive a service are not considered to be clients.</li> </ul>
<b>Specialist</b>	<p><b>Specialist homelessness service(s)</b> is assistance provided by a specialist</p>

**homelessness  
service(s)**

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, mental health services, family/relationship assistance, disability services, drug/alcohol counselling, legal/financial services, immigration/cultural services, domestic/family violence services, other specialist services and general assistance and support.