

Effectiveness of the specialist homelessness services system

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Defining the homelessness services system

- **National agreements** that set the funding context and circumscribe homelessness service priorities
- An **overarching strategy in each state and territory** that organises homelessness services
- **Specialist homelessness services** that provide a range of services to support people who are homeless or at risk of homelessness

[This definition does not include non-government funded or allied services, or people who don't access the SHS]

Is there a national homelessness services system?



- National agreements/contractual arrangements betw. the Commonwealth, states and territories frame the homelessness system.
- But they do not represent an overarching vision.
- There is no overarching national plan to address homelessness that takes into account structural drivers.
- There is no unified 'Australian homelessness system'. Rather each state and territory has their own independent homelessness system.

How do we know that the homelessness system is effective?



- Reduction in the number of homeless people (The Road Home)
- Functional zero (Canada/USA)
- Absolute zero

How homelessness is defined shapes how responses to homelessness are formulated

In Australia a person is considered 'homeless' if:

- their dwelling is inadequate; or
- they have no tenure, or if their initial tenure is short and not extendable; or
- their place of residence does not allow them to have control of, and access to space for social relations, including a sense of security, stability, privacy, safety, and the ability to control living space.

(ABS 2012)

Canadian definition of homelessness

Homelessness describes the situation of an individual or family without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. **It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household's financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination.** Most people do not choose to be homeless, and the experience is generally negative, unpleasant, stressful and distressing. Homelessness describes a range of housing and shelter circumstances, with people being without any shelter at one end, and being insecurely housed at the other.

(Canadian Homelessness Observatory 2012)

Indicators of system effectiveness

- Reduction in the no/proportion of homeless people
- System capacity/unmet demand
- Reduction in people repeatedly accessing the SHS
- Client outcomes: housing status; education and training; employment status; social inclusion
- Targeting of priority groups
- Prioritisation of early intervention and prevention
- System integration
- Cost effectiveness

The evidence base

- Census data
- Specialist Homelessness Services Collection
- State/territory evaluations of NPAH funded programs
- Independent evaluations of NPAH funded programs
- State and territory Auditor-General reports
- State and territory Annual Reports
- Research papers (Australian & international)

Quality of the evidence base

- Limited evidence on system effectiveness
- Most studies and evaluations focus on individual services, are locally targeted, or involve only a small number of services
- The quality of the evidence-base is variable, with few solid independent evaluations of services
- Available data is often limited, fragmented or not comparable

Quality of the evidence base

Indicator	Quality of the evidence base
Reduction in the number of homeless people	?
System capacity / unmet demand	✓
Reduction in people repeatedly accessing SHS	✓
Clients' housing status	✓
Targeting of priority groups	✓
Prioritisation of early intervention and prevention	?
System integration	✗
Improved social inclusion for clients	?
Improved education, training and employment participation for clients	✓
Cost effectiveness	?

Reduction in the number of homeless people

Year	Number of homeless people	% change	Rate per 10,000 persons	% change in rate of homeless people
2001	95,314		50.8	
2006	89,728	-6%	45.2	-5.6%
2011	105,237	+17%	48.9	+3.7%

Source: Adapted from Wood, Batterham et al. 2015

Homelessness by state

State/ territory	No of homeless	Proportion of homeless	Change since 2006
NSW	28,190	40.8 people per 10,000	+20.4%
VIC	22,789	42.6 people per 10,000	+20.7%
QLD	19,838	48.5 people per 10,000	-5.1%
SA	5,985	37.5 people per 10,000	+1.4%
WA	9,592	42.8 people per 10,000	+1.1%
TAS	1,579	31.9 people per 10,000	+32.9%
NT	15,479	730.7 people per 10,000	-7.8%
ACT	1,785	50 people per 10,000	+70.6%

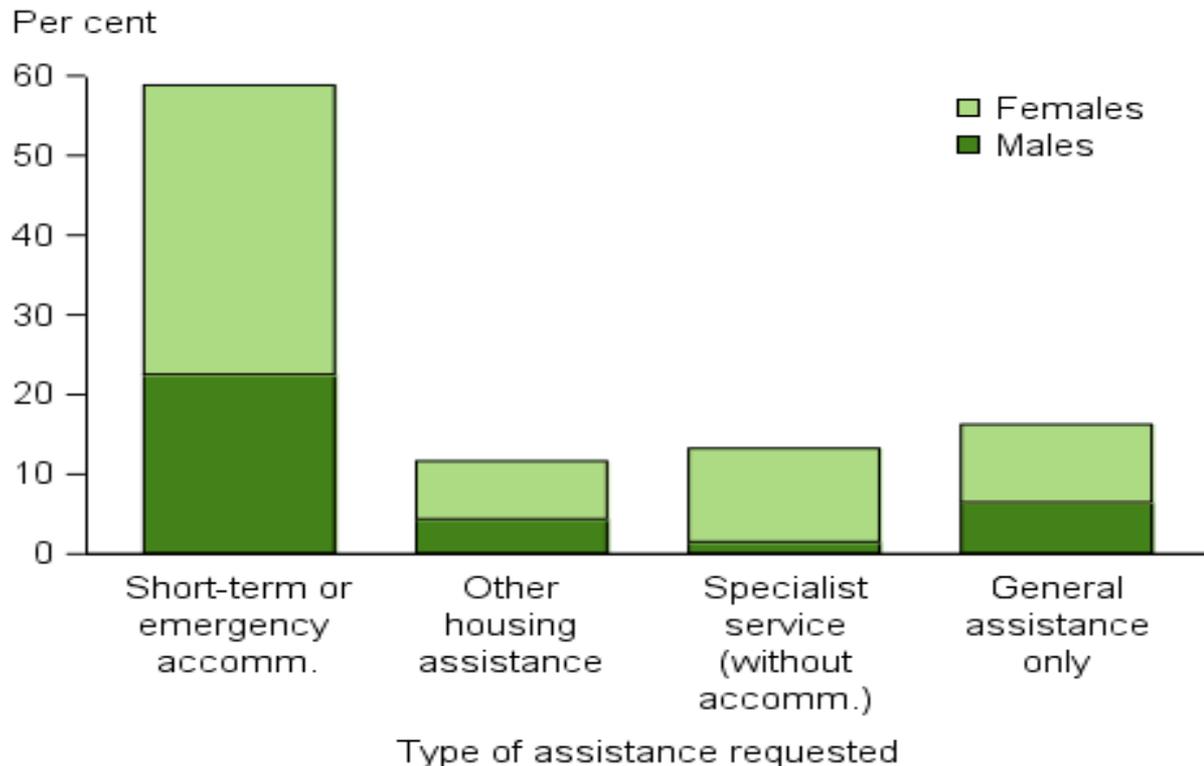
Source: Based on 2011 Census data

System capacity/unmet demand

- No of support periods and clients has been increasing since 2011
- In 2015-16, 279,196 people were assisted by SHS
 - Average annual growth rate of 4.2% since 2011-12
- In 2015-16, 275 requests for assistance were unmet each day
 - 100,302 requests per annum
 - 64% daily unassisted requests were from women
 - 70% daily unassisted requests included need for accommodation
- The number of unassisted requests remained stable 2011-12 to 2013-14, but decreased in 2015-16

Which requests were most often unmet?

Services requested as proportion of daily unassisted requests by sex, 2015-16



(AIHW 2017)

Reduction in people repeatedly accessing SHS

	No of clients assisted	Increase from prv year	No of support periods	% of clients by no of support periods				Average no of support periods/client
				1	2	3	4 +	
2011-12	229,247		388,766					1.6
2012-13	244,000	6%	412,614	70%	17%	6%	7%	1.7
2013-14	254,000	4%	427,930	70%	18%	6%	7%	1.7
2014-15	256,000	1%	437,004	68%	18%	7%	7%	1.7
2015-16	279,196	9%	477,831	68%	18%	7%	7%	1.7

Source: AIHW data

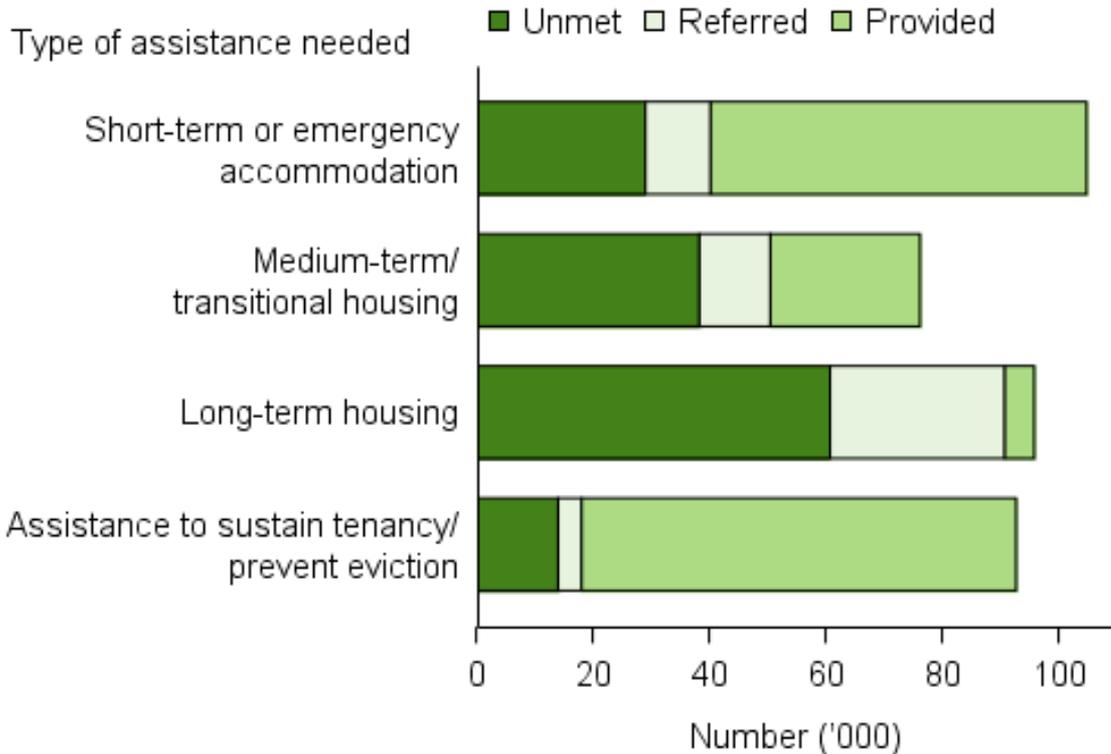
Client outcomes: housing status

Proportion of SHS clients homeless			
	Prior to support	After support closed	% change
2011-12	n/a	n/a	
2012-13	46%	39%	-7%
2013-14	43%	35%	-8%
2014-15	43%	33%	-10%

Source: AIHW data

Housing outcomes

Number of clients with unmet needs for accommodation and housing assistance services 2015-16



(AIHW 2017)

Client outcomes: education, training and employment participation

	Enrolled in education / training		Employed clients with identified employment related need	
	Prior to support	After support closed	Prior to support	After support closed
2011-12	20%	23%	12%	21%
2012-13	18%	20%	12%	20%
2013-14	19%	21%	11%	19%
2014-15	21%	21%	12%	21%
2015-16	21%	21%	11%	20%

Targeting of priority groups

Cohort	Proportion of SHS clients in 2011-12	Proportion of SHS clients in 2015-16
Indigenous people	22%	24%
People leaving domestic and family violence	34%	38%
People with a disability	N/A	4%
People exiting custodial arrangements	2%	3%
People leaving care	2%	2%
Older people	7%	8%
Young people presenting alone	16%	15%
People with a mental health issue	19%	26%

Source: AIHW data

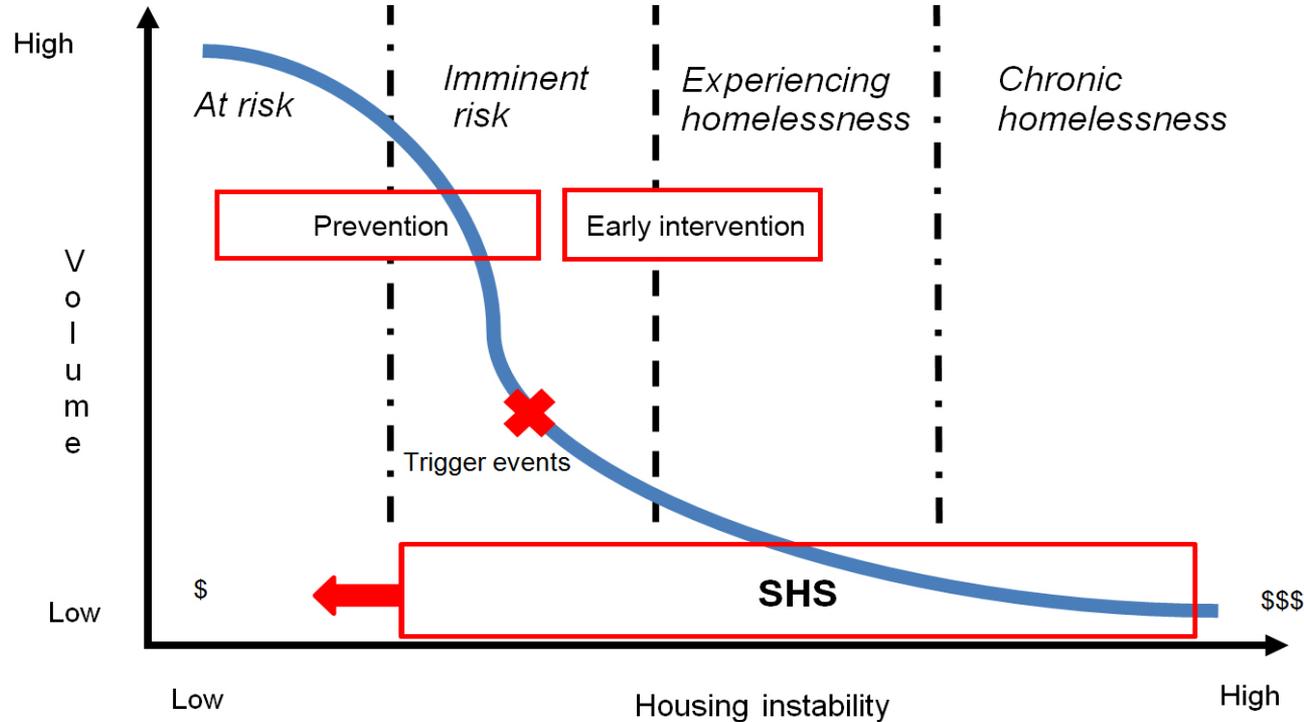
Targeting of priority groups

- **Domestic and family violence responses** are important in preventing homelessness for women and children escaping violence. They are effective across a wide range of situations and geographical contexts.
 - In 2015-16, 91.2 % of clients seeking domestic and family violence related assistance were either directly provided with, or directly provided with and referred to this type of service (ROGS 2015)
- **Foyer models** are transitional housing responses that can help young people compete for existing job and housing opportunities. This needs to be balanced with a high cost of service.

Early intervention and prevention definition

- **Prevention strategies target activities at the structural level.**
 - Address the underlying political, economic and social causes which place people at risk of homelessness
 - Identify people who are most at risk of homelessness and building up their protective factors and decreasing their risk factors
- **Early intervention focuses on individuals**
 - Focus on people who are at risk but not actually homeless (e.g. sustain tenancies)
 - Ensure that short periods of homelessness do not become chronic

Early intervention and prevention



Prioritisation of early intervention and prevention

- It is not clear from the data to which degree early intervention and prevention are prioritised over crisis response on a system level
- We do know that early intervention and prevention work and are cost effective
- We know there have been some innovative programs

Prioritisation of early intervention and prevention

- **Tenancy support programs** are effective early intervention and prevention models that can assist people to maintain their tenancies and avoid homelessness. They are also cost effective.
- **Rapid rehousing** is a key component in permanent supportive housing programs for people with complex or chronic issues and is also a key component of the Housing First model.

Client outcomes: social inclusion

- At a system level data is unclear on the level of social inclusion achieved by clients as a result of accessing SHS services
- Data from evaluations of individual services shows that social inclusion is an area in which homelessness programs can achieve positive outcomes
- On the whole SHS services are less effective in generating social inclusion outcomes than in keeping people housed

System integration

- **Data on system integration effectiveness is very sketchy**
- **Mainstream & other non-housing responses** (e.g. cross sector initiatives for people exiting care or other facilities) are effective in producing positive client outcomes
- There is a need for greater involvement of mainstream agencies (e.g. housing, health, justice, education, employment) in early intervention and prevention of homelessness for at risk groups.

Cost effectiveness

- Homeless people are heavy users of a vast array of government services, particularly health and justice
- Early intervention and prevention programs can provide cost savings to government
- Savings are primarily in the health and justice sectors
- Successful interventions into homelessness have the potential to decrease welfare payments, increase taxation receipts, decrease expenditure associated with placing children in care and expenses related to evictions

Cost effectiveness

- In Australia it has been shown that SHS provide savings to government and provide shelter and non-shelter outcomes to clients.

Cost effectiveness

- A national study showed (Zaretzky & Flatau 2013) :
 - SHS programs yielded average **cost savings to government of \$3,685 client/year** by reducing health, justice and welfare usage
 - In programs for single women the costs of providing the programs was offset by reductions in health, justice and welfare costs.
 - SHS programs led to more stable accommodation, improved access to health services, improved social relationships and general perceptions of overall satisfaction with life.
 - Improved access to a stable income source and a very small improvement in employment outcomes (welfare payments remained the main source of income for most respondents)
 - Minimal change in employment and financial circumstances

Cost of youth homelessness

- Total cost of additional health & justice services used by young homeless people (<25 years) estimated at \$747 million annually in 2014–15.
 - Exceeds the total cost (approx. \$619 million) of providing SHS to the 256,000 (young and old) assisted by the system over the same period.
- **Average total health & the justice systems cost for young homeless people: \$17,868 per person per year.**
 - \$14,986 more per person per year than for unemployed youth.
[Costs to not include the additional lifetime impact of early school leaving & low engagement with employment.]

Cost of homelessness

- Cost of first time homelessness in Melbourne \$25,165
 - Health: \$8,429
 - Reduced crime: \$6,182
 - Individual costs: \$6,500
 - Improved human capital: 4,236
 - Other: \$268 (SGS Economics)

Summary of the evidence

Indicator	Indicator performance
Reduction in the number of homeless people	Unclear
System capacity / unmet demand	No change
Reduction in people repeatedly accessing SHS	No change
Clients' housing status	Small improvement
Targeting of priority groups	No change
Prioritisation of early intervention and prevention	Unclear
System integration	Not enough data
Improved social inclusion for clients	Unclear
Improved education, training and employment participation for clients	Small improvement
Cost effectiveness	Yes

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