

The Western Australian Alliance to End Homelessness Outcomes Measurement Framework: Dashboard

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The Western Australian Alliance to End Homelessness (WAAEH)

The WA Alliance to End Homelessness is comprised of a group of individuals and organisations that have come together to end homelessness in Western Australia.



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Disclaimer

The opinions in this report reflect the views of the authors and do not necessarily reflect those of the Western Australian Alliance to End Homelessness or any of its organisations.



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Introduction

This document is a revised and expanded version of the *Western Australian Alliance to End Homelessness (WAAEH) Outcomes Measurement Framework: Dashboard* (the Dashboard) prototype first released in August 2019 (the present version being Version 2.0). The WAAEH Dashboard is an evolving, accessible and visual platform designed to present and report on outcomes relevant to the key targets of the Western Australian Alliance to End Homelessness (WAAEH). The Dashboard aims to answer the question of whether we are 'on track' to ending homelessness in Western Australia and, if not, what do we need to do to get 'on track'.

Background

In July 2018, the WAAEH published the *Strategy to End Homelessness* (the Strategy). The Strategy articulates a 10-year plan to end homelessness in Western Australia, invoking a whole-of-society response. The Strategy comprises nine broad targets across a diverse range of areas: rates of homelessness; so-called 'structural' and 'individual' drivers of homelessness; policy and practice within the service sector; and measurement, accountability and governance mechanisms. These targets form the backbone of this Dashboard.

The WAAEH, via Shelter WA, received funding from Lotterywest to develop *The Western Australian Alliance to End Homelessness Outcomes Measurement and Evaluation Framework* (the Framework) to measure and monitor progress towards ending homelessness. The Centre for Social Impact at The University of Western Australia (CSI UWA), a founding member of the WAAEH, undertook the task of developing the Framework.

The Framework is accompanied by two documents.

The first is the present document, the Dashboard (Version 2.0), which represents, where we currently have data available, key measures related to the nine targets. The Dashboard, while still in early stages of development, has been expanded significantly since the first version of the prototype published in 2019. As compared with Version 1 of the Dashboard, data on key drivers of homelessness (which relate to Target 4) has been included, indicating trends across housing, health, economic, labour market and social measures, with explanatory notes about the implication of this data for homelessness outcomes in Western Australia. We have made explicit links in the Dashboard back to the Framework and the Data Dictionary, and have updated measures in Version 2.0 of these documents to reflect new developments.

The second related document is the *Western Australian Alliance to End Homelessness Outcomes Measurement and Evaluation Framework: Data Dictionary* (the Data Dictionary), which operationalises the Framework by detailing the rationale, methodologies, targets and data for each measure of the Framework. The Data Dictionary is a comprehensive measurement handbook, and will be updated as the homelessness landscape in Western Australia evolves alongside policy, practice and research.

Broader Context

The Framework and Strategy are not operating in a vacuum. There are common threads between this project and other community and government initiatives.

The Western Australian Government's *Our Priorities: Sharing Prosperity* (2019) report highlights key goals of the Western Australian Government across a range of sectors—including the economy, environment, education, community safety, Aboriginal wellbeing and regional prosperity—which overlap with many of the population-level outcomes adopted in the Framework. Version 2.0 of the Dashboard, highlights in explanatory notes applied to each target where the measures may align with the Premier's Priorities.

In addition, the Western Australian Council of Social Service *Outcomes Framework Infographic* (2019) presents a whole-of-sector approach to community outcomes in an interconnected, hierarchical wheel; this is in keeping with the approach of the WAAEH Framework which emphasises the interrelated nature of the drivers of homelessness and homelessness responses. Similarly, the WA Government's *Budget* papers apply an Outcomes Framework to expenditures and policy directions that, in practical terms, will also contribute to achieving the WAAEH targets.



Most importantly, since the publication of the WAAEH *Strategy to End Homelessness* and the publication of Version 1 of the Framework and Dashboard, the Western Australian Government has released *All Paths Lead to a Home: Western Australia's 10-Year Strategy on Homelessness 2020-2030*.

The WA Government *Strategy* is remarkably consistent with the WAAEH's own homelessness strategy and includes a commitment to ending rough sleeping and chronic homelessness. *All Paths Lead to a Home* also includes a commitment to developing an Outcomes Measurement Framework "to make sure the Strategy is achieving its intended goals and to enable progress to be measured against outcomes". It notes that "integration points will also be established with the *Western Australian Alliance to End Homelessness Outcomes Measurement Framework and Evaluation Framework* developed by the Centre for Social Impact at the University of Western Australia" (Western Australian Government, 2019c, p.12). As the WA Government further implements its Strategy and develops its Outcomes Measurement Framework so we will further develop the Dashboard measures.

Purpose

The Dashboard is a powerful tool for visualising and analysing diverse evidence relevant to the WAAEH Strategy. The purpose of the Dashboard is to communicate findings to the WAAEH and its affiliates, to policy makers, to the homelessness sector, and to the broader community with an interest in ending homelessness in a way that is clear, timely and useful. The Dashboard functions as a reference point to see where current efforts are producing results and where there is need for renewed focus for future initiatives. For the broader Western Australian community, the Dashboard will help to generate interest and deepen understanding of the state of homelessness in Western Australia.

Future versions of the Dashboard will be accompanied by ongoing developmental evaluation reports. These developmental evaluation reports will provide a pattern-spotting analysis of the measures reported in the Dashboard, and will link this analysis to recommendations for action. We hope that future Dashboards will incorporate data that is currently unavailable (e.g. requiring data linkage), providing an increasingly accurate picture of the state of homelessness.

Together with the complementary publications the Framework and the Data Dictionary, the Dashboard provides the information needed to inform effective, adaptive action towards ending homelessness in Western Australia.



Visualisation of the WAAEH 10-year Strategy to End Homelessness Targets

Background: The Framework Complexity Science Approach

The Framework applies a complexity science approach to theorising systems of social change. This manifests itself, in part, in (a) the focus on a web of domains beyond simply the core population targets and (b) the multi-level structure of the Framework—causal factors are identified across micro (individuals), meso (organisational, program and service indicators) and macro (population-level) levels of society. The complexity approach provides the rich evidence base required to undertake effective practice and policymaking.

The Framework is organised into seven domains, which are broad, conceptual 'buckets' into which one or more outcomes can fit. The seven domains that form the backbone of the Framework are: (1) The State of Homelessness; (2) 'Structural' Factors; (3) 'Individual' Factors; (4) Representation, Voice and Advocacy; (5) Resources; (6) Collaborative Efficacy; and (7) The Social Services Sector. Each domain is then divided into outcomes (such as Outcome 1.1 'Homelessness is decreased') and further into specific indicators (e.g. Indicator 1.1.1 'Rates of overall homelessness') and then into precise measures (e.g. 1.1.1.1 'The overall rate of persons aged 15 years and over across all homeless categories in Western Australia').

A comprehensive Framework needs to account for and assess the state of homelessness itself (e.g., the overall rate of homelessness, rates of rough sleeping or rates of chronic homelessness), the drivers into and exit out of homelessness and the efficacy of the homelessness service system response.

WAAEH Strategy Targets

The WAAEH Strategy to End Homelessness articulated nine targets to be achieved in the 10-year timeframe. The Dashboard is organised around these nine WAAEH Strategy targets.

The nine WAAEH targets to be achieved by 2028 are:

1. Western Australia will have ended all forms of chronic homelessness including chronic rough sleeping.

2. No individual or family in Western Australia will sleep rough or stay in supported accommodation for longer than five nights before moving into an affordable, safe, decent, permanent home with the support required to sustain it.

3. The Western Australian rate of homelessness (including couch surfing and insecure tenure) will have been halved from its 2016 level.

4. The underlying causes that result in people becoming homeless have been met head-on, resulting in a reduction by more than half in the inflow of people and families into homelessness in any one year.

5. The current very large gap between the rate of Aboriginal homelessness and non-Aboriginal homelessness in Western Australia will be eliminated so that the rate of Aboriginal homelessness is no higher than the rate of non-Aboriginal homelessness.

6. Those experiencing homelessness and those exiting homelessness with physical health, mental health, and alcohol and other drug use dependence needs will have their needs addressed. This will result in a halving of mortality rates among those who have experienced homelessness and a halving in public hospital costs one year on for those exiting homelessness.

7. Those experiencing homelessness and those exiting homelessness will be supported to strengthen their economic, social, family and community connections leading to stronger well-being and quality of life outcomes. Employment among those experiencing homelessness will be significantly increased. Over half of those exiting homelessness will be employed within three years of moving into housing. Well-being and quality of life will equal those of the general population in the same timeframe.

8. A strong, collaborative and adaptive network of services and responses across the community services, health, mental health, justice, and education sectors will exist working collectively to address the underlying causes of homelessness and meeting the needs of those who become homeless.

9. Measurement, accountability and governance mechanisms that are robust, transparent and open to external review will be operating, providing an on-going means for assessing progress in meeting the goals of Ending Homelessness in Western Australia in 10 years.

Source: WAAEH Strategy to End Homelessness (2018)



Where data is available and publicly accessible for a key measure, we have constructed a graph illustrating the current trend in the data and included a brief explanatory note about the implication for homelessness.

For the measures relating to the core Domain 1: *The State of Homelessness*, we have also indicated a projected trend line that is theoretically required to be achieved in order to meet the 2028 target. Future data will be added to the graph, and the distance from these points to the trendline could provide a visual indication of whether or not we are making consistent progress towards the target.

The trendline is indicative only, and fluctuations on and off the trendline are to be expected. Examples of data points have been added at future data release time points (e.g. the 2021 Census) for illustrative purposes only. Although these example data points have been arranged in a trend towards they 10-year target, they are not intended to serve as milestones.

Measures relating to the drivers of homelessness (Domains 2 and 3) do not have an associated target, but we have represented the recent trends in the data.

Alternatively, particularly for Domains 4 to 7, measures that are considered useful and relevant for tracking a target may not yet have baseline data (for example, if the data source is not publicly available or if the measure requires original research to operationalise). In this case, we have included a selection of key measures in a table under the relevant target which can be further developed and visualised in future versions of the Dashboard.

It is important to note that the Dashboard does *not* contain the comprehensive set of measures relating to the nine Strategy targets. Rather, the Dashboard visualises a few key measures that can provide a broad overview of the domains and communicate trends across the complex system of homelessness. For a comprehensive list and operationalisation of measures, refer to the WAAEH Outcomes Measurement and Evaluation Framework (the Framework) and the WAAEH Outcomes Measurement and Evaluation Framework: Data Dictionary (the Data Dictionary).



Targets

Target 1. Western Australia will have ended all forms of chronic homelessness, including chronic rough sleeping

Chronic homelessness is defined for our purposes by a history of rough sleeping or other forms of homelessness for 12 months or more continuously and/or at least three episodes of homelessness in the last three years. There is limited data available that measures chronicity in homelessness. However, potential sources of data have been identified and could be expanded upon in future versions of the Dashboard.

Individuals accessing Specialist Homelessness Services (SHS) complete an initial client form and are asked '*How long has it been since [the client] last had a permanent place to live?*' While this data is not publicly available at present, it could be used as an indicator of chronicity. The Australian Institute of Health and Welfare (AIHW) Specialist Homelessness Services collection also includes data pertaining to episodes of homelessness. In the future, the WAAEH will seek to access and utilise this data to gain an understanding of trends in chronic homelessness in Western Australia (AIHW, 2018a).

The national Registry Week data that utilises the Vulnerability Index Service Prioritisation Decision Assistance Tool (VI-SPDAT) analysed in our report *The State of Homelessness in Australia's Cities: A Health and Social Cost Too High* (Flatau et al., 2018), also contains questions related to the duration of homelessness. These questions ask about life history of homelessness that could serve as a proxy for homelessness chronicity, for example 'What is the total length of time you have lived on the streets or in emergency accommodation?' and 'What is the total length of time you have lived without stable accommodation?' These data sets are not publicly available and require further analysis to establish baseline and future data points. In the current collection (2012-2017), individuals surveyed in WA who reported that the conditions in which they slept most frequently constituted rough sleeping had been homeless for 5.4 years, on average (with a median of 3 years).

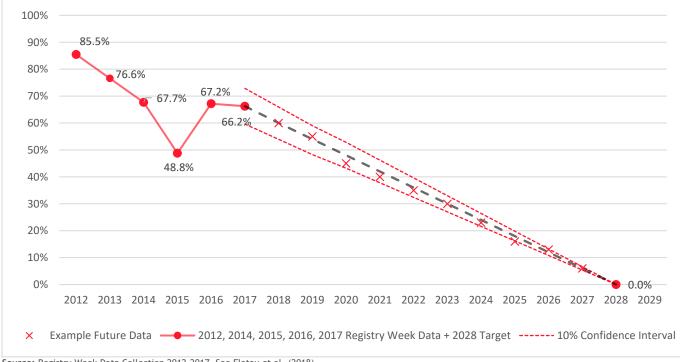


Figure 1.1 The proportion of those who have lived on the streets or in emergency accommodation for more than 12 months in the WA Registry Week Collection

Source: Registry Week Data Collection 2012-2017. See Flatau et al. (2018).

Link to measure: 1.2.1.2: The proportion of homeless people who have continuously slept rough for more than 12 months and/or experienced at least three episodes of homelessness in the last three years



Figure 1.1 shows the proportion of those who have lived on the streets or in emergency accommodation for more than 12 months in the WA Registry Week Collection. This data represents one perspective of the state of chronic homelessness in Western Australia. Chronic homelessness is defined for our purposes as "either rough sleeping for 12 months continuously at some point in the past and/ or at least three episodes of any form of homelessness in the last three years". The question "What is the total length of time you have lived on the streets or in emergency accommodation?" differs from the definition of chronic homelessness we have adopted in that it groups rough sleeping and residing in emergency accommodation together when examining a person's accommodation circumstances over the 12 months prior to survey, and it does not provide an indication of the number of episodes of homelessness experienced in the preceding 3 years.

However, this data can be used as a proxy for chronic homelessness until more accurate methods (such as the linkage of Registry Week and SHS data) are available. Another limitation to the Registry Week Collection is that the VI-SPDAT survey was only completed in Inner Perth, Fremantle and Victoria Park. It would, therefore, be inappropriate to consider this data a reflection of the state of chronic homelessness across the whole of WA, particularly in regional and remote areas.

In the five years of Registry Week data previously collected, there is a noticeable downward trend; the percentage of people who had lived on the streets or in emergency accommodation for more than 12 months had dropped from 85% to 66% between 2012 and 2017. It is important to note that this trend may not necessarily reflect an improvement in the prevalence of chronic homelessness in WA. Rather, this decrease may simply reflect changes to data collection procedures, such as sampling in different geographic areas, in supported accommodation rather than solely on the street, and administration of the VI-SPDAT to clients that were not sleeping rough.

Nevertheless, the WAAEH has the goal of continuing this trend in order to end all forms of chronic homelessness by 2028. To achieve this, we must decrease the rates of chronic homelessness in keeping with the trendline shown above. Thus, while there will undoubtedly be fluctuations in chronic homelessness (and this flexibility is provided for with the 10% confidence interval illustrated with red dotted lines in the graph), we can use this graph as a visualisation of whether we are 'on track' to achieve the 2028 goal.

Due to the limitations of the current dataset, there is scope to develop a more directed set of questions addressing this specific target on the VI-SPDAT. Additionally, the survey could be applied to a wider geographic area in order to collect data that is more representative of the state of chronic homelessness across the whole state. Linkage of this data with existing SHS data would be an invaluable addition to the analysis. For more information on the operationalisation of these measures, please see the Data Dictionary.

Table 1, below, contains other potential measures that could be useful to assessing progress towards achieving Target 1.



| Outcome | | Key Measures | Baseline | Target |
|---------|--|--|---------------------|---|
| 1.2 | Chronic homelessness is ended | 1.2.1.1:The proportion of individuals experiencing homelessness, captured through the administration of the Vulnerability Index - Service Prioritisation Decision Assistance Tool (VI-SPDAT) as part of the Australian Alliance to End Homelessness database, who have not been in permanent accommodation for over a year | Not yet established | Decrease the proportion of individuals experiencing homelessness who have not been in permanent accommodation for over a year |
| | | 1.2.3.1: The number of individuals accessing Specialist Homelessness Services that present to an agency while experiencing homelessness during a support period | Not yet established | To be set once baseline is established |
| | | 1.2.3.2: The number of individuals accessing Specialist Homelessness Services that begin a support period while experiencing homelessness more than once in a 12 month period | Not yet established | To be set once baseline is established |
| 1.3 | People who have experienced homelessness have safe, decent and sustainable housing | 1.3.2.3: The housing satisfaction of formerly homeless people in Western Australia | Not yet established | Increase the housing satisfaction of formerly homeless people in Western Australia |

Table 1: Key measures relating to Target 1

Target 2. No individual or family in Western Australia will sleep rough or stay in supported accommodation for longer than five nights before moving into an affordable, safe, decent, permanent home with the support required to sustain it.

This target requires further research before operationalisation. However, both the Australian Institute of Health and Welfare Specialist Homelessness Services Collection (SHSC) data and the Registry Week surveys administered by the AAEH Advance to Zero campaign can be examined to produce estimates as to how well we are approaching this target. The VI-SPDAT questionnaire administered during Registry Week by the AAEH collects information on individual and family housing situations (including sleeping rough or staying in supported accommodation). This could be combined with the responses to the following question, which asks 'How long has it been since you lived in permanent, stable housing (with a secure lease/tenancy)?' to determine the number of individuals or families who are sleeping rough or staying in supported accommodation for longer than five nights.

Additionally, SHSC records include data on the number of nights clients spend in supported accommodation. While this does not include rough sleeping, the percentage of SHS clients spending more than five nights in supported accommodation could be a useful measure for this target. For example, in 2016-17, 28.8% of SHS clients stayed longer than five nights in supported accommodation.

The key measures relating to Target 2 are contained in Table 2 below.

| Outcome | | Key Measures | Baseline | Target |
|---------|-------------------------------------|---|---------------------|--|
| 1.2 | Chronic homelessness is Ended | 1.2.1.1: The proportion of individuals experiencing homelessness, captured through the administration of the Vulnerability Index - Service Prioritisation Decision Assistance Tool (VI-SPDAT) as part of the Australian Alliance to End Homelessness database, who have not been in permanent accommodation for over a year | Not yet established | Decrease the proportion of individuals experiencing homelessness who have not been in permanent accommodation for over a year |
| | | 1.2.1.3: The number of individuals sleeping rough or staying in supported accommodation for longer than five nights before moving into an affordable, safe, decent, permanent home with support required to sustain it | Not yet established | Decrease the number of individuals sleeping rough or staying in supported accommodation for longer than five nights before moving into an affordable, safe, decent, permanent home with support required to sustain it |

Table 2: Key measures relating to Target 2

Target 3. The Western Australian rate of homelessness (including couch surfing and insecure tenure) will have been halved from its 2016 level.

Current estimates of rates of homelessness are collected from the Australian Bureau of Statistics Census Data (ABS, 2016) and Australian Institute of Health and Welfare Specialist Homelessness Services Collection (SHSC) (AIHW, 2018). The data from the two sources differs due to different definitions of homelessness utilised. For specific information and limitation of data sources, refer to the Framework.

In the Census, 'homelessness' refers not only to rough sleeping, which is often the most visible form of homelessness in society, but also to a variety of unstable housing situations, such as couchsurfing (staying temporarily with other households), living in boarding houses, being housed in supported accommodation and living in 'severely crowded' dwellings (ABS, 2016).

In the SHSC, the rate of homelessness is determined by calculating the number of clients of specialist homelessness services who are homeless on entry into specialist homelessness service support at the beginning of their first support period for the year, and then dividing this number by the total WA population. Homelessness, as defined by the SHSC, includes having no shelter or residing in an improvised/inadequate dwelling, staying in short-term temporary accommodation, or being without tenure while housed (AIHW, 2018).

The focus of Domain 1: *The State of Homelessness* of the Framework is to halve the 2016 rate of homelessness in Western Australia by 2028. This target has been broken down into a set of measures within the domain, encompassing the overall rate of homelessness, homelessness in various categories, the rates of indigenous homelessness and the economic barriers that prevent a sustained exit from homelessness. Some key measures and associated graphs are represented below.

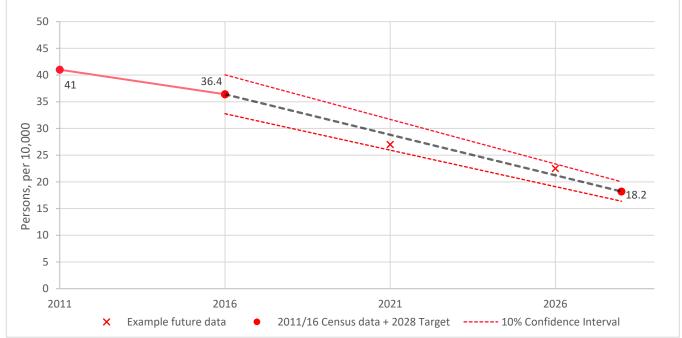


Figure 3.1 The overall rate of persons aged 15 years and over across all homeless categories in Western Australia (Census)

Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0</u> Link to measure: 1.1.1.1: The overall rate of persons aged 15 years and over across all homeless categories in Western Australia



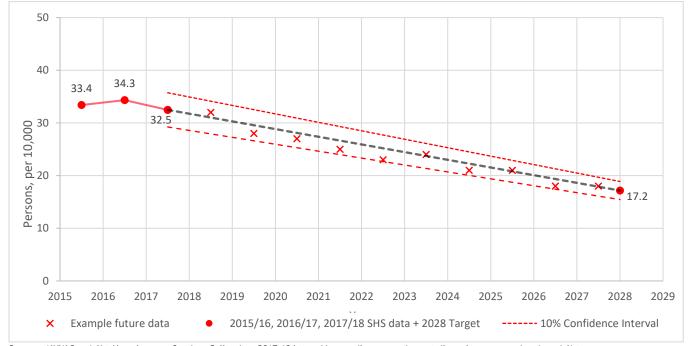


Figure 3.2 The overall rate of homeless SHS clients in Western Australia (SHS)

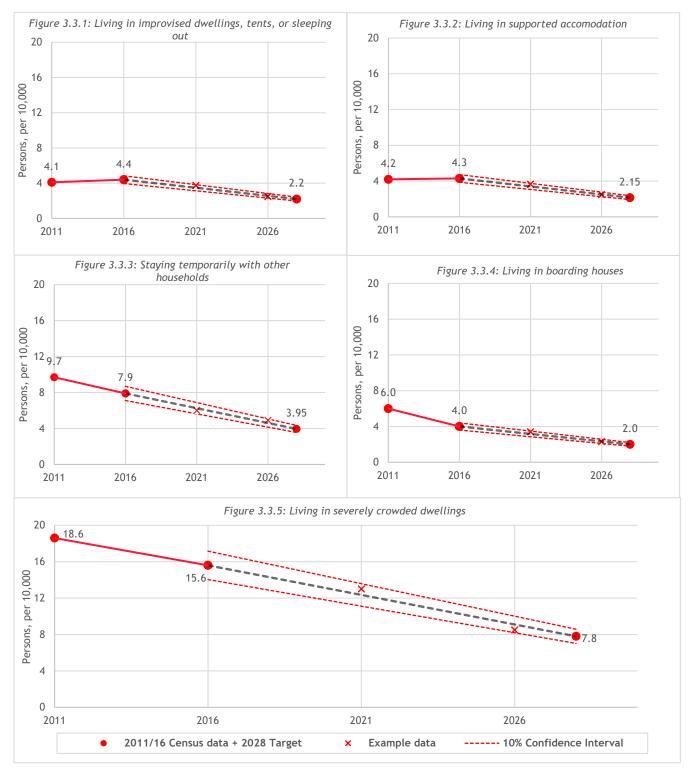
Figures 3.1 and 3.2 demonstrate the overall state of homelessness in Western Australia using two data sources: the ABS Census of Population and Housing and the AIHW Specialist Homelessness Services (SHS) Collection. Figure 3.1 depicts the persons per 10,000 identified as homeless, across all homeless operational groups in the 2016 Census. In 2016, 36.4 per 10,000 Western Australians were homeless according to the Census. To achieve the target of halving the rate of homelessness by 2028, this rate will need to decrease to 18.2 persons per 10,000. Example future data as well as a trendline and confidence intervals are displayed to demonstrate the trajectory needed to achieve this target.

Figure 3.2, similarly, depicts the persons per 10,000 identified as homeless in the SHSC from 2015/16 onwards. In 2016/17, 34.3 Western Australians per 10,000 were homeless. As described in the Framework (p. 24), the SHS Collection only collects information from those individuals that access services - this could explain why this number is slightly lower than the Census figure of 36.4 persons per 10,000. Our target for the SHS Collection data is for the rate of homelessness to decrease to 17.2 persons per 10,000 by 2028.

Source: AIHW Specialist Homelessness Services Collection, 2017-18 https://www.aihw.gov.au/reports/homelessness-services/specialisthomelessness-services-2017-18/contents/contents Link to measures: 1.1.1.1: The overall rate of persons aged 15 years and over across all homeless categories in Western Australia



Figure 3.3 Rate of persons aged 15 years and over living in various forms of homelessness in Western Australia (Census)



Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0 Link to measures: 1.1.2.1: The rate of persons aged 15 years and over living in improvised dwellings, tents, or sleeping out in Western Australia; 1.1.3.1: The rate of persons aged 15 years and over living in supported accommodation for the homeless in Western Australia; 1.1.3.2: The rate of persons aged 15 years and over staying temporarily with other households in Western Australia; 1.1.3.3: The rate of persons aged 15 years and over living in boarding houses in Western Australia; 1.1.4.1: The rate of persons aged 15 years and over living in severely crowded dwellings in Western Australia

Figure 3.3 represents the rate of persons aged 15 years and over living in various forms of homelessness in Western Australia. To achieve the goal of halving the Western Australian rate of



homelessness from its 2016 level, steps must be put in place to combat all forms of homelessness. When analysing homelessness, the Census categorises homelessness into five forms:

- Living in improvised dwellings, tents, or sleeping out (Fig. 3.3.1)
- Living in supported accommodation (Fig. 3.3.2)
- Staying temporarily with other households (Fig. 3.3.3)
- Living in boarding houses (Fig. 3.3.4)
- Living in severely crowded dwellings (Fig. 3.3.5)
- Living in other temporary lodgings (Not significant, not shown)

Figure 3.3.1 depicts the rate of Western Australians aged 15 years and over that live in improvised dwellings, tents, or sleep out in the open. From 2011 to 2016, this rate increased from 4.1 to 4.4 persons per 10,000. Significant effort is therefore needed to curb this trend and achieve the 2028 target of 2.2 persons per 10,000. Figure 3.3.2, presenting the rate of those living in supported accommodation, has similarly slightly increased from 4.2 persons per 10,000 in 2011, to 4.3 per 10,000 in 2016. Steps must be taken if we are to achieve the 2028 target of 2.1 persons per 10,000 in 2028.

Figures 3.3.3, 3.3.4 and 3.3.5 tell a more optimistic story, all demonstrating marked decreases in 2016 compared with their 2011 rate. The number of youth staying temporarily with other households declined from 9.7 to 7.9 persons per 10,000 from 2011 to 2016, and if this rate of decline continues, we are on track to achieving the 2028 target of 3.95 persons per 10,000. Similarly, the rate of individuals living in boarding houses has decreased from 6 to 4 persons per 10,000 from 2011 to 2016. This rate of decline, if maintained, would allow us to reach the 2028 target of 2 persons per 10,000. The rate of persons living in severely crowded dwellings has also decreased from 18.6 to 15.6 persons per 10,000, and as seen in Figure 3.3.5 this rate of depreciation is what is necessary to achieve the 2028 goal of 7.8 persons per 10,000. Given the fluctuating nature of homelessness figures, however, the rate is unlikely to remain in a steady decline. Hence, despite the positive indications from recent data, significant effort is required to continue in order to reach the 2028 target of halving homelessness.

Regional Homelessness

Another key aspect of the analysis of the state of homelessness in Western Australia is the rate of homelessness within regional areas. Geographic location can influence the drivers of homelessness, such as employment outcomes, the quality of education and access to support services. Currently, the rate of homelessness in regional Western Australia is more than triple that of the Perth Metropolitan area (ABS, 2016). Therefore, in order to end homelessness in Western Australia, the over-representation of those living in regional areas within the homeless population in Western Australia needs to be addressed. In addition to the over-representation of regional Western Australians in the Census homelessness figures, the proportion of SHS Clients that live in regional areas is currently almost double the proportion of people living in regional Western Australia. By addressing the root causes of regional homelessness, such as quality of support services, we can work towards eliminating this pronounced discrepancy (National Rural Health Alliance Inc., 2013).



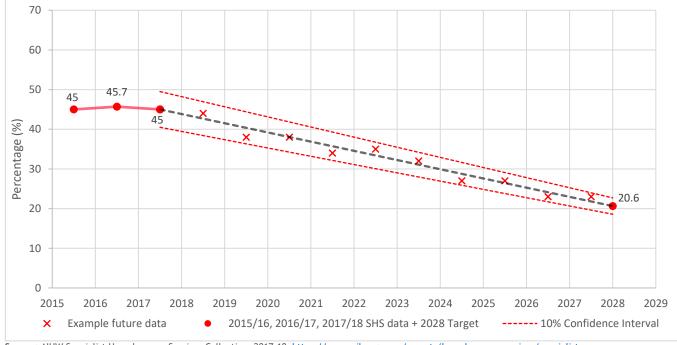
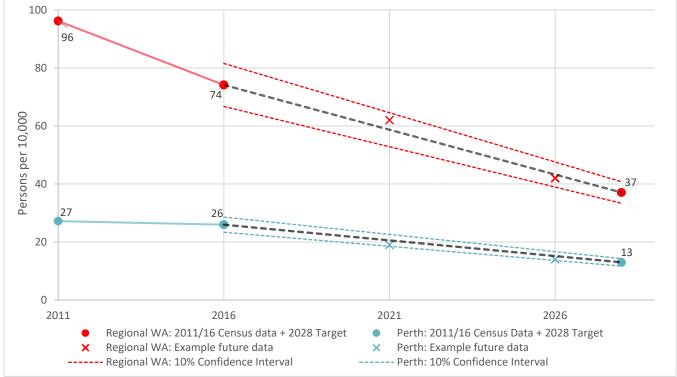


Figure 3.4 The proportion of SHS Clients that live in regional Western Australia (SHS)

Source: AIHW Specialist Homelessness Services Collection, 2017-18 https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services/specialist-homelessness-services-2017-18/contents/contents

Link to measures: 1.1.5.1: The proportion of SHS clients that live in regional Western Australia





Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0</u>

Link to measures: 1.1.5.2: The overall rate of persons aged 15 years and over across all homeless categories in regional Western Australia (Census)

Figures 3.4 and 3.5 represent the state of regional homelessness in Western Australia. Figure 3.4 demonstrates the proportion of SHS clients that live in regional Western Australia. While the rate of SHS clients in regional areas is not an accurate reflection of the state of homelessness per se (since not all SHS clients are homeless), it is reasonable to suggest that an over-representation of regional SHS clients would correspond to an over-representation of regional homelessness. The 2028 target for Figure 3.4 is to eliminate this over-representation, such that the rate of regional homelessness is the same as the rate of people living in regional WA (20.6%).

Are we on track to achieve this target? Discouragingly, from 2015 to 2017 the proportion of SHS clients that live regionally was relatively stable. Without significant effort to address the root causes of regional homelessness, such as a lack of employment opportunities and poor support services, it is unlikely that we will achieve our 2028 goal without additional investments.

Figure 3.5 uses Census data to demonstrate the difference in homelessness rates between those who live in regional WA and those in Perth. For this measure, the 2028 target has been set at half of the 2016 rate - in this case 37 and 13 people per 10,000 for regional WA and Perth respectively. While there needs to be a significant drop in the rate of regional homelessness, the 23% decrease that occurred between 2011 and 2016 (from 96 to 74 people per 10,000) gives hope that this degree of change is possible.

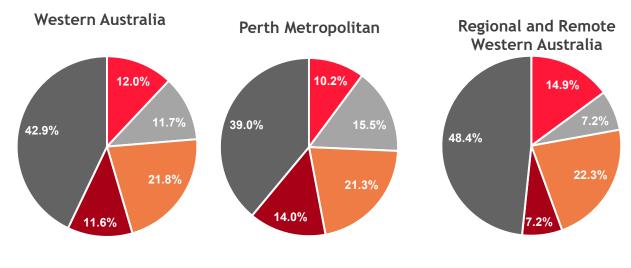


Figure 3.6 Structure of homelessness across WA regions (2016 Census)

- Persons living in improvised dwellings, tents, or sleeping out
- Persons in supported accommodation for the homeless
- Persons staying temporarily with other households
- Persons living in boarding houses or other temporary lodgings
- Persons living in 'severely' crowded dwellings

Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0</u> Link to measures: 1.1.5.3. Severe overcrowding as a proportion of total homelessness in regional WA



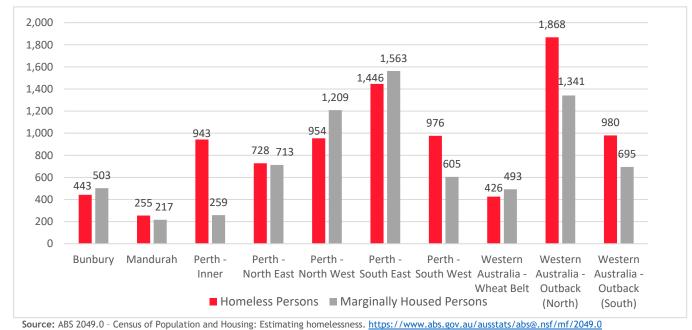


Figure 3.7 Number of homeless persons by statistical area level 4 (SA4), Census of Populations and Housing 2016

Link to measures: 1.1.5.4: The number of homeless persons by statistical area level 4 (SA4)

Figure 3.6 and 3.7 highlight the necessity of considering the impact of regional and place-specific factors on homelessness. The data for both of these figures is derived from the Australian Bureau of Statistics Census of Population and Housing.

Figure 3.6 shows the differing composition of homelessness in metropolitan vs regional and remote Western Australia. The data shows that homelessness in regional and remote WA is driven more by severe overcrowding than in Metropolitan Perth (48.4% in regional/remote WA vs 39.0% in Metropolitan Perth). In WA, the extent of overcrowding is particularly serious among Aboriginal families who make up a greater proportion of the regional and remote figures. Overcrowding is associated with potential negative impacts on children's wellbeing and development, including increased risk of infection-based illness, poor school performance, greater vulnerability to abuse and poor mental health (Commissioner for Children and Young People, 2014). Additionally, a greater percentage of the homeless population in regional and remote WA are rough sleeping ('living in improvised dwellings, tents or sleeping out'). Within the Perth homeless population, there is also variation in composition depending on the specific area. For example, the proportion of rough sleepers is much higher within the Inner Perth area. For more detailed information, please refer to *Homelessness in Western Australia: A review of the research and statistical evidence* (Kaleveld, Seivwright, Box, Callis & Flatau, 2018).

Figure 3.7 helps to visualise the regional spread of homelessness in WA. The region representing the highest number of homeless persons is Western Australia - Outback North (comprising the Pilbara and the Kimberley regions). When we consider that these regions have markedly smaller populations, the situation is even bleaker - with the Outback (North) region having a homelessness rate of 191 persons per 10,000, far greater than the Perth rate of 26 persons per 10,000, or the overall WA regional rate of 74 persons per 10,000. While homelessness and rough sleeping in inner city Perth is often the focus of media and policy attention, this data highlights the need to specifically address regional and remote homelessness in order to achieve WAAEH targets.

Poor employment outcomes in regional areas is one of the most significant drivers of regional homelessness. The State Government has acknowledged the importance of this issue by identifying 'regional prosperity through stronger regional economies' as one of the Premier's Priorities for 2019-20 (WA Government, 2019a). Specifically, the target has been set at increasing the number of employed persons in Regional WA by at least 30,000 by 2023-24, which will go a long way in reducing the inflow of homelessness and providing the economic stability required for homeless



individuals to maintain a sustained exit from homelessness. The 2019-20 WA State Budget also contains the following outcomes of relevance (WA Government, 2019b, p.208):

- Regional Western Australia has the investment to grow and create jobs.
- Regional Western Australia has the technology to grow and create jobs.
- Regional Western Australia has the skills and knowledge to grow and create jobs.
- Regional Western Australia has the social amenity, through recreational fisheries, to grow and create jobs.
- Regional Development Commissions contribute to the economic development of the regions

It is hoped that the attention given to regional WA through these outcomes will lead to the greater economic involvement of homeless and formerly homeless people (Western Australian Government, 2019b).

| Outcome | | Key Measures | Baseline | Target |
|---------|--|--|---------------------|--|
| 1.4 | Child homelessness is ended | Measure 1.4.1.1: The number of families (two or more adults plus child/ren) presenting to emergency accommodation | Not yet established | To be set once baseline is established |
| | | Measure 1.4.1.2: The number of families (two or more adults plus child/ren) accessing Specialist Homelessness Services due to accommodation crisis | Not yet established | To be set once baseline is established |
| 1.6 | Homelessness in older age is ended | Measure 1.4.3.1: The number of children (<18 years) presenting alone to the Specialist Homelessness Service | Not yet established | To be set once baseline is established |
| | | Measure 1.6.1.1: The number and proportion of individuals accessing Specialist Homelessness Services in Western Australia that are aged over 65 | Not yet established | To be set once baseline is established |

Table 3: Key measures relating to Target 3



Target 4. The underlying causes that result in people becoming homeless have been met head-on, resulting in a reduction by more than half in the inflow of people and families into homelessness in any one year

The causes of homelessness are complex, encompassing a broad range of individual and structural determinants, including housing availability and affordability, economic and employment opportunities (or lack thereof), physical and mental health outcomes, domestic and family violence, and social and community connections. This target is operationalised predominantly in Domain 2: *Structural Factors* and Domain 3: *Individual Factors* of the Framework and Data Dictionary. While comprehensive analysis of the underlying causes of homelessness is beyond the scope of this Dashboard, the aim of this section is to visualise a number of key drivers for which data is publicly available. The data has been predominantly sourced from the Australian Institute for Health and Welfare, the Australian Bureau of Statistics and Western Australia Police Force Crime Statistics. Future iterations of the Dashboard will extend the analysis.

Housing

The availability and accessibility of safe, secure and affordable housing plays a vital role in preventing of entry to homelessness and facilitating a sustained exit from homelessness. The first two outcomes of Domain 2: *Structural Factors* of the Framework relate to Housing Supply and Affordability (Outcome 10.1.1) and Housing Quality (10.1.2). Domain 3: *Individual Factors* contains measures surrounding Housing Stress and Housing Quality (10.2.1). In August 2019, the Australian Institute of Health and Welfare (AIHW) published a Housing Data Dashboard (<u>https://www.housingdata.gov.au</u>), covering several themes pertaining to issues of housing and homelessness. The AIHW Housing Data Dashboard overlaps with many of the housing-related structural drivers of homelessness articulated in the Framework and can thus serve as a valuable tool or inspiration for possible future versions of the WAAEH Dashboard.

Links to specific outcomes of the Framework:

- 10.1.1 Housing Supply and Affordability
- 10.1.2 Housing Quality
- 10.2.1 Housing Stress and Housing Quality



Housing Affordability



Figure 4.1 Proportion of households experiencing housing stress (%), by capital cities, 2001-04 to 2013-16: Perth

Source: The Household, Income and Labour Dynamics in Australia (HILDA) Survey: Selected Findings from Waves 1 to 16, 20 https://melbourneinstitute.unimelb.edu.au/hilda/publications/hilda-statistical-reports Link to measure: 3.1.1.1: The proportion of Western Australian households experiencing housing stress

A household is defined as experiencing 'housing stress' if it has an income level in the bottom 40 per cent of Australia's income distribution and is paying more than 30 per cent of this income on housing costs. The proportion of households experiencing housing stress is derived from the Household, Income and Labour Dynamics in Australia (HILDA) Survey. The HILDA Survey is a nationally representative household-based panel study, which collects information about economic and personal well-being, labour market dynamics and family life from its participants annually. The HILDA Survey is funded by the Australian Government Department of Social Services and is designed and managed by the Melbourne Institute.

Housing stress and poor housing quality are risk factors for homelessness. If all other factors are equal, the fewer Western Australians that are experiencing housing stress and the more Western Australians living in safe and decent housing, the lower homelessness rates and rates of entry into homelessness will be. While there is no pronounced trend in housing stress statistics (Fig. 4.1), the proportion of low-income households experiencing housing stress has declined overall since the mid-2000s. However, the rate did experience a slight upward trend between the 2009-12 and 2013-16 surveys, which, if continued, could have a concerning effect on the entry into and exit out of homelessness.



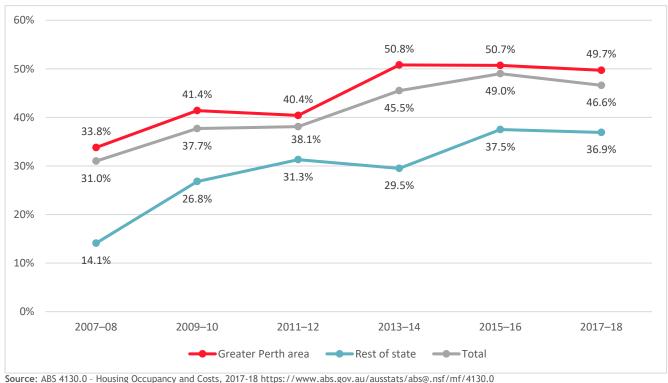


Figure 4.2 Proportion of low income rental households spending more than 30 per cent of their gross income on housing costs (rental stress) (%), by location, 2007-08 to 2017-18 (WA)

Source: ADS 4130.0 - Housing Occupancy and Costs, 2017-10 https://www.abs.gov.au/ausstats/abs@.hsi/ini/4

Link to measure: 3.1.1.2: The proportion of Western Australian households experiencing rental stress.

The proportion of low-income households (bottom 40 per cent of equivalised income) in rental stress (spending more than 30 per cent of their gross income on rent) is collected in the biennial Survey of Income and Housing (SIH), conducted by the Australian Bureau of Statistics (ABS). Households with excessive rental costs may experience financial stress, impacting on their ability to afford other living costs such as food, clothing, transport and utilities. In worst-case scenarios, acute rental or housing stress could lead to households becoming homeless.

Figure 4.2 indicates that there has been a general upward trend in the proportion of low-income rental households experiencing rental stress from 2007-09, peaking in 2013-14 and stabilising at a relatively high level. Location plays an important role in rental stress, with metropolitan households experiencing noticeably higher levels of rental stress than the rest of WA. To meet the target of reduction of inflow into homelessness, housing stress levels across Western Australia need to fall.



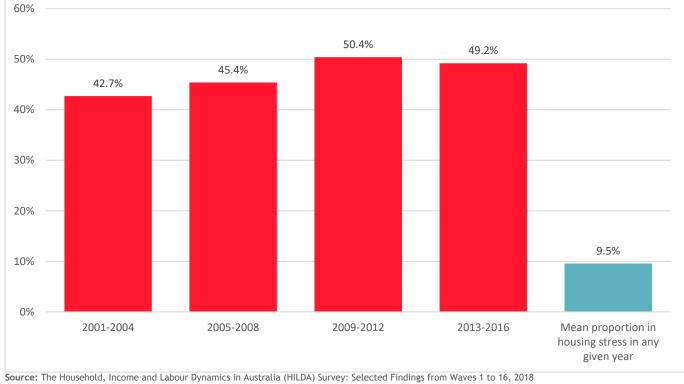


Figure 4.3 Proportion of low income households remaining in housing stress from one year to the next (%), by family type, 2001-04 to 2013-16 (Australia)

https://melbourneinstitute.unimelb.edu.au/hilda/publications/hilda-statistical-reports Note: Data accessed via the AIHW Housing Data Dashboard: <u>https://www.housingdata.gov.au/</u>

Link to measure: 3.1.1.3: The proportion of low-income households remaining in housing stress from one year to the next.

Housing stress is defined as the situation wherein a household has an income level in the bottom 40 per cent of Australia's income distribution and is paying more than 30 per cent of its income on housing costs. The proportion of low-income households remaining in housing stress from one year to the next gives an indication of the persistency of housing stress in the population; that is, the extent to which households become 'trapped' in financially precarious housing situations. Data on persistence of housing stress is expressed as the proportion who remain in housing stress in the following year. This data was derived from The Household, Income and Labour Dynamics in Australia (HILDA) Survey and was accessed via the AIHW Housing Data Dashboard.

Despite a slight fall between 2009-12 and 2013-16 statistics, Figure 4.3 indicates that there has overall been a positive trend in the persistency of housing stress. Considering the role of housing stress as a driver of homelessness, the high proportion of low-income households remaining in housing stress from one year to the next is concerning, as a person who is continually under housing stress is in a financially unstable position and could be increasingly susceptible to homelessness. As such, Figure 4.3 emphasises the need to address housing stress in order to meet the overall targets of ending homelessness.



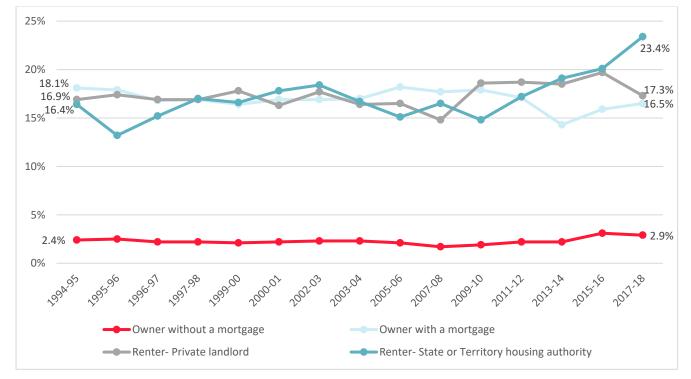


Figure 4.4 Housing affordability: housing costs as a proportion of household income, by tenure and landlord type, 1994-1995 to 2017-18 (WA)

Source: ABS 4130.0 - Housing Occupancy and Costs, 2017-18 <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/4130.0</u>

Note: Proportions have high margins of error and should be used with caution. See the ABS Housing Occupancy and Costs Quality Declaration for further details.

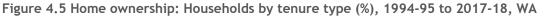
Link to measures: 2.1.3.1: Public housing rent relative to income; 2.1.3.2: Housing costs as a proportion of gross household income for private renters; 2.1.3.4: Housing costs as a proportion of gross household income for owners with a mortgage.

Given that housing costs are a major component of Australian household living expenses, housing costs as a proportion of income can give an indication of housing affordability. The data presented in Figure 4.4 are disaggregated by tenure and landlord type, highlighting the differences between home owners with and without a mortgage, renters in the private market and renters in the WA Housing Authority public housing system. The data were derived from the biennial Survey of Income and Housing (SIH), conducted by the Australian Bureau of Statistics (ABS) which collects information about income, wealth and household characteristics of persons aged 15 years and over in private dwellings throughout Australia.

Owners with a mortgage, however, have seen an increase since 2013 in proportional housing costs, which could suggest an increase in financial stress among this category. One notable and worrying trend has been a relatively steady increase in proportional housing costs for renters with the WA housing authority, who account already for some of the lowest income earners in the State. This may be due to policy changes within the WA Housing Authority.







Link to measures: 2.1.3.6: The proportion of Western Australian households who own their own home; 2.1.3.7: The proportion of Western Australian households who are renting.

The changes in housing tenure over time reflects trends in home ownership and in the rental sector, and can highlight issues of affordability and accessibility of the housing market. There has been a steady increase in the trends of 'owner with a mortgage' with a comparable decline in percentage of 'owners without a mortgage' since 2000, suggesting that it may be more difficult for Western Australians to own a home outright. This is in keeping with external data suggesting Western Australians are experiencing high levels of mortgage stress (North, 2018). The percentage of households who are renting has steadily increased over time, suggesting that it may be more difficult for Western Australians to enter the housing market. Finally, renters from the WA State housing authority have decreased, particularly since 2009-10, which, which is consistent with the stagnating number of public housing dwellings (see Fig. 4.7), and indicates that public housing is not keeping pace with population demand.

The data were derived from the biennial Survey of Income and Housing (SIH), conducted by the Australian Bureau of Statistics (ABS) which collects information about income, wealth and household characteristics of persons aged 15 years and over in private dwellings throughout Australia. A key strategy of the State Government is to encourage independent home-ownership is the 'Keystart Housing Scheme Trust'. Within the Trust, the Asset Investment Program (AIP) "helps to ensure the provision of sustainable housing outcomes" (Western Australian Government, 2019a).

Source: ABS 4130.0 - Housing Occupancy and Costs, 2017-18 https://www.abs.gov.au/ausstats/abs@.nsf/mf/4130.0

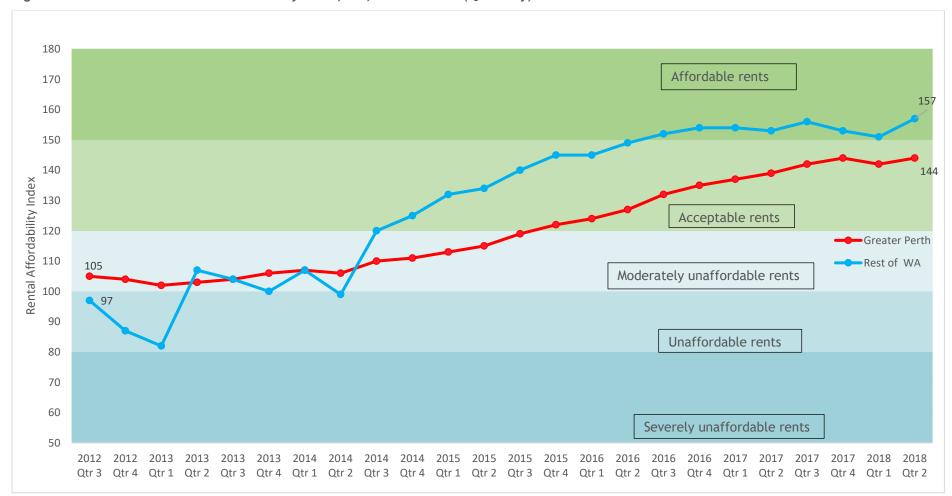


Figure 4.6 Rental Market: Rental Affordability Index, WA, 2012 to 2018 (Quarterly)

Source: Rental Affordability Index, SGS Economics & Planning. <u>https://www.sgsep.com.au/maps/thirdspace/australia-rental-affordability-index/</u>

Note: Data accessed via the AIHW Housing Data Dashboard: https://www.housingdata.gov.au/

Linked to measures: 2.1.3.5: Western Australian Rental Affordability Index



The Rental Affordability Index (RAI) is a price index for rental markets indicating rental affordability relative to household incomes. The RAI is published by National Shelter, Community Sector Banking, Brotherhood St Laurence and SGS Economics & Planning. The RAI is calculated through a comparison of the median rental price of dwellings for which bonds were lodged in a geographic region for a given quarter, with the average weekly household earnings of that region.

Figure 4.6 indicates an overall positive trend towards more affordable rents over time in Western Australia in line with relatively stagnant economic conditions and low net population growth. However, given the consistently high proportion of low-income earners experiencing rental stress (see Fig. 4.2), the increased rental affordability may be disproportionately impacted by moderate or high-income earners.

To address the availability of affordable housing options, the State Government in partnership with the private sector and non-government organisations is delivering the \$394 million METRONET Social and Affordable Housing and Jobs Package. The outcome in the 2019-2020 Budget outcomes framework associated with this development is "Affordable housing options are available to eligible Western Australians' (Western Australian Government, 2019a).

Housing Supply

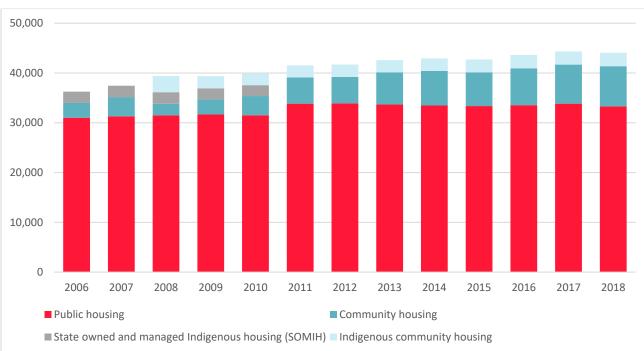


Figure 4.7 Number of social housing dwellings, All areas, at 30 June 2006 to 2018 (Western Australia)

Source: AIHW National Housing Assistance Data Repository, 2019. <u>https://www.aihw.gov.au/reports-data/health-welfare-services/housing-assistance/overview</u>

Note: SOMIH is no longer applicable in WA.

Link to measure: 2.1.1.1: The number of public housing dwellings in Western Australia; 2.1.1.2: The number of community housing dwellings in Western Australia.



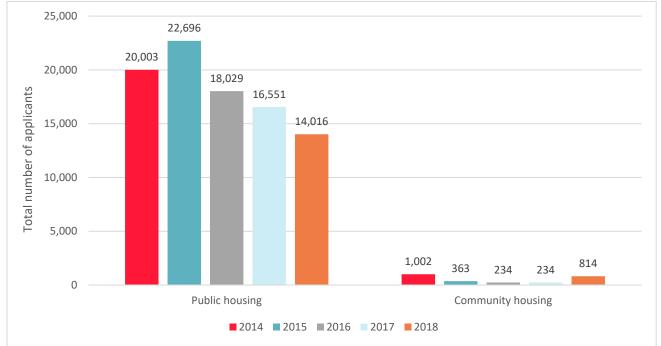
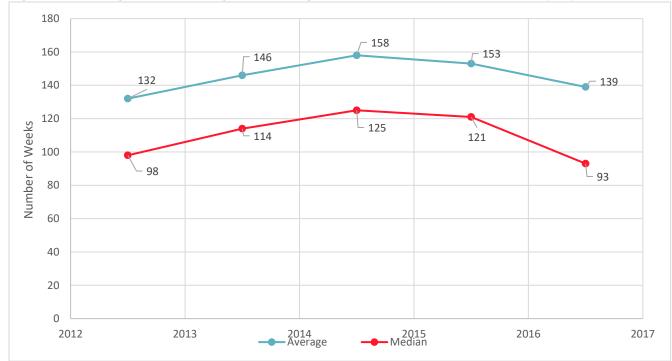


Figure 4.8 Total number of applicants on waiting list (excluding applicants for transfer), by social housing program, at 30 June 2014 to 2018 (WA)

Source: AIHW National Housing Assistance Data Repository, 2018. https://www.aihw.gov.au/reports/housing-assistance/housing-assistance-inaustralia-2018/contents/priority-groups-and-wait-lists Link to measure: 2.1.2.2: The number of people on the WA Housing Authority public housing waitlist.

Figure 4.9 Waiting time to secure public housing accommodation, from 2012 to 2017 (WA)



Source: Government of Western Australia Housing Authority, Annual Report 2016-17 <u>http://www.housing.wa.gov.au/HousingDocuments/Housing_Authority_Annual_Report_2016_2017.pdf</u> Link to measure: 2.1.2.3: The average length of time people spend on the WA Housing Authority public housing waitlist prior to securing public housing.



Social Housing in a Western Australian context refers to housing provided for people on low incomes or with particular needs by government agencies (Public Housing) or by not-for-profit organisations (Community housing and Indigenous community housing) (AIHW, 2019a).

Public housing is low-cost housing provided by the Western Australian Housing Authority for very low-income households who are often unable to obtain secure and affordable accommodation in the private rental sector (Government of Western Australia Housing Authority, 2017). The rent paid for public housing dwellings is calculated at 25 per cent of a household's gross assessable income or the market rent (whichever is less). The number of public housing dwellings (Fig. 4.7), the length of the public housing waiting lists (Fig. 4.8) and the average time on those waiting lists (Fig. 4.9) in Western Australia are some indications of the availability of affordable housing for Western Australians, an important dimension of the structural determinants of homelessness.

Figure 4.7 indicates that, while there has been some increase in the number of community housing dwellings, the number of public housing dwellings has remained unchanged since 2011. AIHW has stated that the relatively modest increase in social housing stock has "not kept pace with the growth in households" (AIHW, 2019). This is evident by the long waiting times for households in need of public housing; Figure 4.9 indicates that, despite a small drop in waiting time since 2015, the average waiting time for a public house is still over two years. More positively, Figure 4.8 indicates that the number of households on the waiting list has significantly decreased from 2015 to 2018. Other important indicators of public housing quality and accessibility, such as overcrowding, may not be publicly available at present but should be included in future versions of the Dashboard.

Accessible public housing is a vital measure in preventing low-income households from entering homelessness. The data presented in this Dashboard demonstrate a need in Western Australia for greater investment and policy development in the realm of public housing.



Economic Drivers

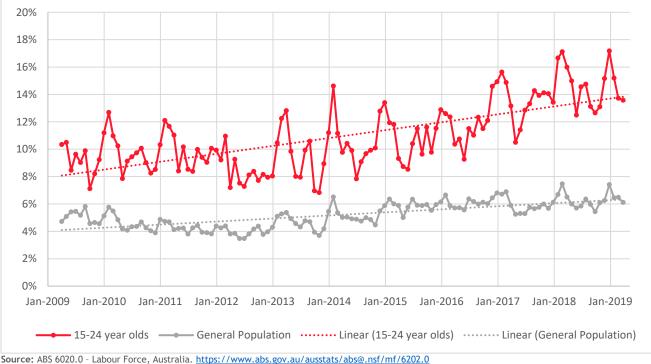


Figure 4.10 Unemployment Rate, youth and general population (WA)

Economic participation rates, of which the unemployment rate is the most important, are significant in that a lack of economic participation by an individual can lead to financial stress, poor physical and mental health and social exclusion, all of which are drivers of homelessness. Homelessness can also make it more difficult for individuals to find and keep a job, thus acting as an obstacle to preventing a sustained exit from homelessness.

Figure 4.10 demonstrates trends in the unemployment rate of both 15-24 year olds (youth) and the general population. Due to the lack of seasonally adjusted data in the youth dataset, the original data has also been used for the general population, and this is seen by the seasonal variation in the data, where the unemployment rate is consistently high in the Australian summer and low in winter. The linear trendline is helpful in this regard, as it allows us to view general trends rather than simply seasonal changes.

One striking feature of Figure 4.10 is the consistent increase in the WA youth unemployment rate in the youth population, a social group who are already disproportionately impacted by economic downturns and homelessness. Youth unemployment is the single factor most frequently associated with homelessness (Australian Human Rights Commission, 1989). Youth unemployment also exacerbates attendant contributing factors to homelessness, such as family conflict and lack of income. Preventing entry into homelessness by supporting economic participation and education among young people in the general population is, therefore, critical.

While not as high as the youth unemployment rate, trends in the general population are also worrying, showing a sustained increase in the WA unemployment rate - it has increased from 3.7% in November 2013 to 7.4% in January 2019.

The WA unemployment figures in Figure 4.10 are derived from regular (quarterly), population level data collection from the Australian Bureau of Statistics (ABS, 2019).

Resolving a complex issue such as unemployment will require a response from all of society, including State Government policy reform. The need for a greater number of jobs is addressed in the Premier's Priorities, which articulates the goal of increasing the total number of employed persons in WA by at least 150,000 by 2023-24. If achieved, this goal will contribute to curbing the

Source: ABS 6020.0 - Labour Force, Australia. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/6202.0</u> Link to measures: 3.5.1.1: The Western Australian youth unemployment rate; 3.6.2.1: The Western Australian unemployment rate



increasing unemployment rate, one of the largest drivers of homelessness (Western Australian Government, 2019a).

Young people in custody and out-of-home care

Young people who have been in the custody of the state, whether in some form of out-of-home care or through the juvenile justice system, are at significantly higher risk of experiencing homelessness. In the *Cost of Youth Homelessness in Australia* report, nearly two-thirds (63%) of homeless youth surveyed had been placed in some form of out-of-home care by the time they had turned 18 (Flatau, Thielking, MacKenzie, & Steen, 2015).

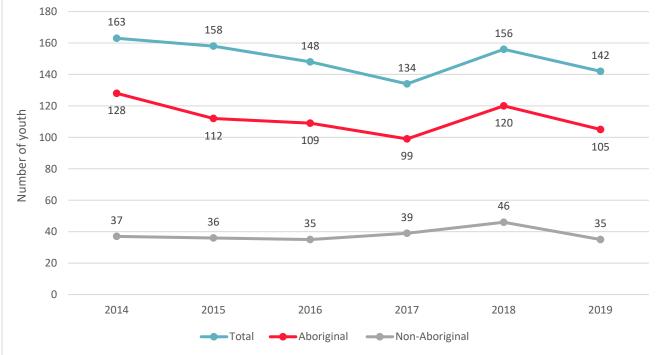


Figure 4.11 Youth Detainees in Custody (WA)

Source: WA Department of Justice, Corrective Services, 2019 <u>https://www.correctiveservices.wa.gov.au/_files/about-us/statistics-publications/statistics/2019/2019-guarter1-youth-custodial.pdf</u>

Link to measures: 3.5.6.1: The number of youth detainees in custody in Western Australia

There is an established link between young people with experience in the justice system and lifetime risk of repeat episodes of homelessness. Figure 4.11 presents the number of youth detainees in custody, using data from the Western Australia Department of Justice, Corrective Services database (WA Department of Justice, 2019). When interpreting trends from Figure 4.11, it should be noted that the absolute number of youths in detention is small, in comparison to the general population. Notwithstanding this, just as Aboriginal and Torres Strait Islanders are significantly over-represented in Australia's homeless population, Figure 4.11 indicates that Aboriginal youth are heavily over-represented in juvenile detention figures. In 2019, Aboriginal youth made up 73% of the total population of youth detainees in custody, despite forming only 3.3% of the general youth population.

On a positive note, the number of young people in custody has decreased in all three categories between 2014 and 2018. This is particularly impressive when it is considered that the general population of youth would have risen in this time, and there has consequently been a notable decrease not just in the *number* but also in the *proportion* of youth that are detained in custody.

The Premier's Priorities document sets a target of less than 50% of young offenders returning to detention within 2 years of release by 2022-23. The achievement of this goal would significantly contribute to reducing the number of youth detainees in custody, since it would involve the successful implementation of strategies for youth leaving detention to re-entry society, implying the economic involvement of the youth as functioning members of society. Long term, this will lead



to less adult prisoners, as those who go to juvenile detention multiple times are far more likely to end up in prison as adults (Western Australian Government, 2019a).

The Western Australian Police Force is working with partner agencies in identifying and diverting youth from offending through early intervention, diversion and prevention strategies. In targeting the high levels of Aboriginal youth detainees in custody, the 'Aboriginal Affairs Division' has been established to provide culturally sensitive solutions. The outcome relevant to these actions in the State Government outcomes framework is "Contribute to community safety and security". Similarly, efforts are being made to increase access to bail support, legal representation and parole for Aboriginal and/or Torres Strait Islander people, which falls under the outcome: "Equitable Access to Legal Services and Information" (Western Australian Government, 2019b).

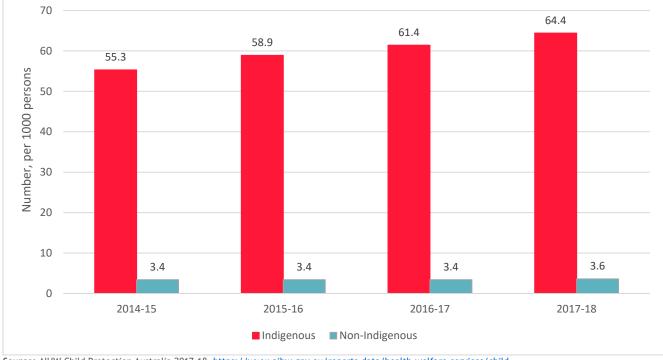


Figure 4.12 Children in out-of-home care by aboriginality (number per 1000) WA

Source: AIHW Child Protection Australia 2017-18, <u>https://www.aihw.gov.au/reports-data/health-welfare-services/child-protection/data#page1</u>

Link to measures: 3.5.6.2: The number of children in out-of-home care in Western Australia; 3.5.6.3: The number of children in out-of-home care in Western Australia of Aboriginal and/or Torres Strait Islander descent

The data displayed in Figure 4.12 are derived from the *Child protection Australia 2017-18* reports, published by the Australian Institute of Health and Welfare (AIHW, 2019b). These data are of particular relevance as there is a strong association between individuals who have experienced out-of-home care and lifetime risk of homelessness, and an understanding of the increased rate of out-of-home care for Aboriginal and/or Torres Strait Islander people will help to understand the increased rates of homelessness for these groups. The risk of homelessness is particularly great among young people who 'age-out' of state-care system at age 18 with very little support networks. The steady, upward trend in the rate of children in out-of-home care among the Aboriginal and/or Torres Strait Islander population illustrated in Figure 4.12 is concerning.

If we are to achieve a long-term reduction in the rates of Aboriginal and/or Torres Strait Islander homelessness, the rate of Indigenous children in out-of-home care will have to diminish. Stronger support networks for this vulnerable group need to be developed, such as some Australian state governments' shift to trial extension of care on a voluntary basis for young people until the age of 21 years of age (Home Stretch, 2019). Aboriginal and Torres Strait Islander specific solutions are fundamental.

In the 2019-20 WA Budget, the State Government is implementing the 'Building a Better Future: Out-of-Home Care Reform' strategy, which will deliver an out-of-home care system that is focused on the needs of the child, is simultaneously safe and flexible, and has a legislative framework supporting best child outcomes. This is for children already in out-of-home care, but the government is also focused on preventing entry into the out-of-home care system through the 'Building Safe and Strong Families: Earlier Intervention and Family Support Strategy'. The outcome associated with these measures is: *"Family and individuals experiencing family and domestic violence, homelessness or other crises are assisted to build their capabilities and be safe"* (Western Australian Government, 2019b).

Health

Poor health has a dual effect on an individual's risk of homelessness. While the management itself of ill health is costly, poor health can also inhibit an individual's economic and social participation. This economic burden can make it more difficult to manage day-to-day expenses, rendering an individual more susceptible to homelessness. The homeless population is disproportionately affected by poor physical and mental health, and substance misuse. Substance misuse can be both a contributing factor (i.e. *leading* to homelessness through impaired economic participation or loss of social support networks) and also a consequence of homelessness. It is, therefore, vital to monitor the health status among Western Australians in order to examine the role of physical and mental health as drivers of homelessness.

General Health

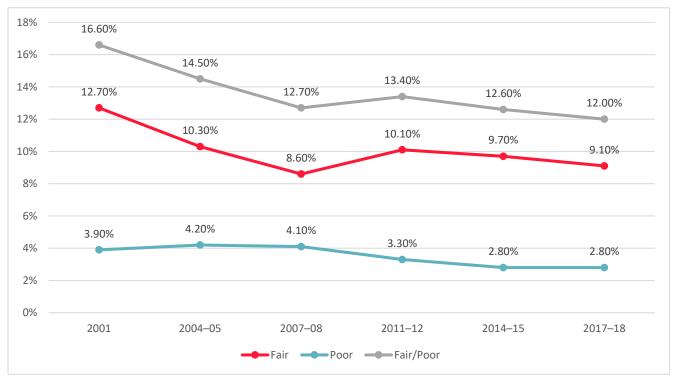


Figure 4.13 People that report their health status as fair/poor (WA)

Source: ABS 4364.0.55.001 - National Health Survey: First Results, 2017-18

https://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4364.0.55.0012017-18?OpenDocument

Link to measure: 3.3.1.1: The proportion of Western Australian who rate their health status as 'Fair/Poor'.

The proportion of Western Australians that report their health status as fair/poor can provide an overview of the state of Western Australians' health as a whole. The data is derived from the ABS National Health Survey, a biennial survey that collects valuable information on a comprehensive range of health issues affecting Australians (ABS, 2018).

Figure 4.13 shows us that the trend over the last two decades is one of a decrease the proportion of Western Australians with combined fair/poor self-assessed health status. The percentage of Western Australians with poor health, specifically, has shown a slight decline but overall has



remained relatively stable. This suggests that the decrease among those with 'fair' status is due to an *improvement* in health, rather than worsening.

This is a good sign in terms of drivers of homelessness; all things equal, the stronger the physical and mental health of Western Australians, the lower the rate of homelessness.

Mental Health

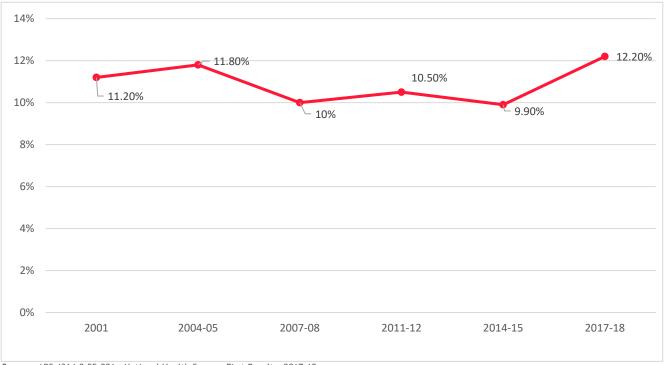


Figure 4.14 Proportion of persons with High/Very High psychological distress (WA)

Source: ABS 4364.0.55.001 - National Health Survey: First Results, 2017-18 https://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4364.0.55.0012017-18?OpenDocument

Link to measure: 3.3.2.1: The proportion of Western Australians who rate their psychological distress as 'High/Very High'

The proportion of persons with High/Very High psychological distress in Figure 4.14 can provide a general overview of the mental health of the population. The data is derived from the ABS National Health Survey (NHS), a biennial survey that collects valuable information on a comprehensive range of health issues affecting Australians (ABS, 2018).

Figure 4.14 shows the percentage has fluctuated over time with no clear positive or negative general trend. However, it is important to note that the 2017-18 results show the highest percentage of the population with self-assessed high/very high psychological distress since the introduction of the NHS in 2001. This is a worrying sign in terms of homelessness drivers. Poor mental health - represented here by a proxy of high psychological distress - can cause significant economic stress due to both the cost of management and the loss of economic participation. This economic drain can in turn lead to poverty, personal vulnerability and disaffiliation, all key drivers of homelessness. Assessing and addressing the level of mental illness among the Western Australian population is an essential part of evaluating the role of poor mental health in homelessness.

The State Government in its 2019-2020 Budget has also delineated the outcome: "Accessible, high quality and appropriate mental health and AOD treatments", and has allocated \$8.1 million for the continuation of the program 'Suicide Prevention 2020: Together We Can Save Lives'. These programs will hopefully lead to a reduction in the proportion of persons with High/Very High psychological distress.



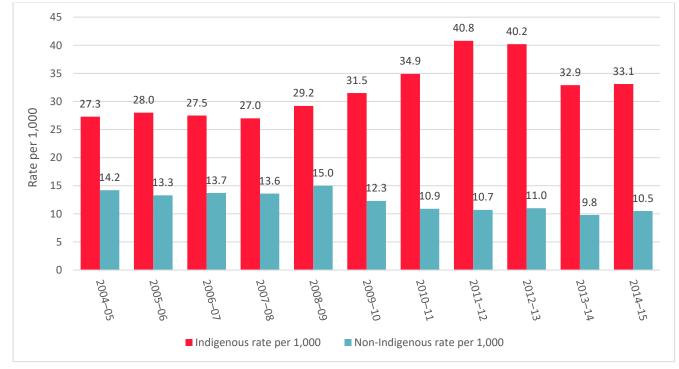


Figure 4.15 Age-standardised hospitalisation rates for a principal diagnosis of mental health related condition, 2004-05 to 2014-15 (WA)

Source: AIHW 2017 (WEB 170). Aboriginal and Torres Strait Islander Health Performance Framework 2017: supplementary online tables. https://www.aihw.gov.au/reports/indigenous-health-welfare/health-performance-framework/contents/tier-3-effective-appropriateefficient/3-10-access-to-mental-health-services

Link to measure: 3.3.2.3: The age-standardised hospitalisation rates for a principal diagnosis of mental health related condition in Western Australia.

Figure 4.15 provides another measure of mental health in Western Australia. The rates of hospitalisations for mental health issues are derived from the Australian Institute of Health and Welfare (AIHW) Aboriginal and Torres Strait Islander Health Performance Framework.

The most striking trend in Figure 4.15 is the gap between Indigenous and non-Indigenous mental health hospitalisation rates. In 2014-15, Indigenous Australians were three times more likely to be hospitalised for mental health issues. This is in keeping with other data on mental and physical health outcomes which demonstrate Indigenous Australians are disproportionately impacted by higher rates of mental health issues than non-Indigenous Australians. Among Aboriginal and Torres Strait Islander populations, deaths from suicide are twice as high, hospitalisation rates for intentional self-harm are 2.7 times as high, and the rates of high/very high psychological distress is 2.6 times as high compared to the general population (Australian Health Ministers' Advisory Council, 2017).

Additionally, while the non-Indigenous mental health hospitalisation rate has demonstrated a gradual (albeit, fluctuating) decline since 2004, the Indigenous rate has increased and, while no longer at the peak level of 40.8 per 1,000 seen in 2011-12, remains higher than the statistics collected in the 2000s. Future research will be necessary to establish why the Indigenous mental health hospitalisation rate peaked in 2011-12, and whether this was statistically significant, considering that the non-Indigenous rate did not experience the same spike.

The rate of homelessness among Aboriginal people is far higher than for non-Aboriginal people. In Western Australia, over 30% of those counted are homeless identify as Aboriginal (despite Aboriginal population making up around 3% of the State's total population). Given the significant role of poor mental health as a driver of homelessness, the high rates of mental illness among the Indigenous population must be addressed.

In its 2019-20 budget, the State Government aligned itself with the WA Aboriginal Health and Wellbeing Framework 2015-2030, which aims at:

- promoting good health across the life course;
- prevention and early intervention;
- a culturally respectful and non-discriminatory health system;
- individual, family and community wellbeing;
- a strong, skilled and growing Aboriginal health workforce; and
- equitable and timely access to the best quality and safe care.

It is hoped that the continued Government support of health programs aligned with the Framework will reduce the discrepancy between Aboriginal and non-Aboriginal mental health hospitalisation rates. In addition, the State Government has pledged \$1.6 million for a culturally appropriate housing facility for Aboriginal people and their families who are travelling from regional areas to receive care at Perth metropolitan hospitals, with the aim of encouraging more and more Aboriginal people to feel comfortable accessing medical treatment in Perth (Western Australian Government, 2019a).

Alcohol and Drugs

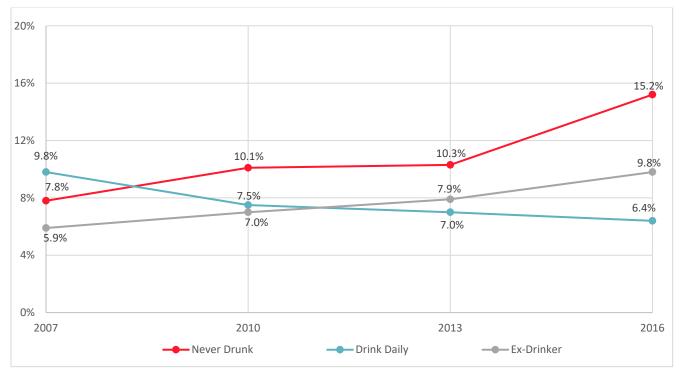


Figure 4.16 Alcohol Consumption in WA

Source: AIHW 2019 (PHE 221). Alcohol, tobacco & other drugs in Australia <u>https://www.aihw.gov.au/reports/alcohol/alcohol-tobacco-other-drugs-australia/contents/interactive-data/alcohol</u>

Link to measures: 3.4.3.4: The percentage of people in WA that have never drunk alcohol; 3.4.3.5: The percentage of people in WA that drink alcohol daily; 3.4.3.6: The percentage of people in WA that are 'ex-drinkers.'



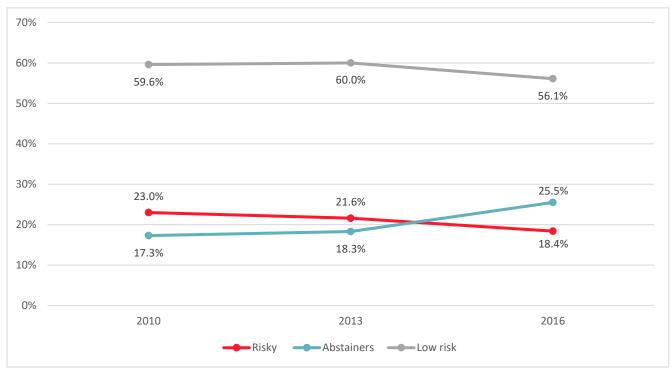


Figure 4.17 Alcohol lifetime risk status, people aged 14 years or older, 2010 to 2016 (WA)

Source: AIHW 2019 (PHE 221). Alcohol, tobacco & other drugs in Australia <u>https://www.aihw.gov.au/reports/alcohol/alcohol-tobacco-other-drugs-australia/contents/interactive-data/alcohol</u> Link to measure: 3.4.3.2: The proportion of the Western Australian population that consumes more than 2 standard drinks per night.

There is a link between problematic alcohol and drug use and risk of homelessness. In addition to the detrimental health impact, substance abuse interacts with a range of other variables including financial stability and access to employment and training. Alcoholism is more prevalent among the homeless population than the general population, acting as both a driver into homelessness and a consequence of homelessness. From a psychosocial perspective, homeless individuals are susceptible to feelings of worthlessness, isolation and mental illness, including depression, which can exacerbate their susceptibility to alcohol abuse. Education campaigns play an important role in primary prevention of alcohol addiction as well as promoting available support services, which facilitates the mitigation of the homelessness risk created by alcohol misuse.

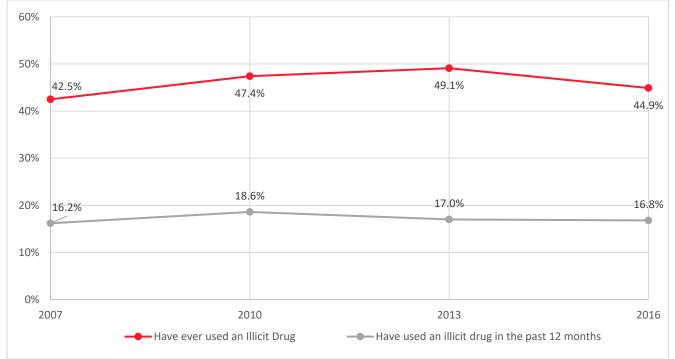
Figure 4.16 and Figure 4.17 represent trends in alcohol consumption and alcohol risk status among the general population (drinking levels of alcohol that is considered to pose a lifetime risk to one's health). These data are giving us a broad overview of alcohol risk at a population level.

In Figure 4.16, there has been a particularly sharp increase from 2013 to 2016 in the percentage of Western Australians who have either 'never drunk' or are 'ex-drinkers.' Inversely, the percent of those who 'drink daily' has shown a gradual decline. In Figure 4.17, the trends are not quite as sharp, but in the period between 2013 and 2016, there has been a positive growth in 'abstainers' and a slight fall in both 'risky' and 'low risk' (suggesting that some from the 'low risk' category have moved to 'abstainers' rather than shifted to 'risky' category). The AIHW has defined 'risky' drinking as consuming more than 2 standard drinks on average every day (AIHW, 2019c).

Both of these figures suggest that a positive shift in Western Australian drinking culture is taking place.



Figure 4.18 Illicit Drug use (WA)



Source: AIHW 2019 (PHE 221). Alcohol, tobacco & other drugs in Australia <u>https://www.aihw.gov.au/reports/alcohol/alcohol-tobacco-other-drugs-australia/contents/interactive-data/alcohol</u>

Link to measure: 3.4.3.1: The proportion of the Western Australian population that has used an illicit substance over the past 12 months.

There is a strong link between problematic drug use and risk of homelessness. In addition to the detrimental health impact, substance abuse interacts with a range of other variables including social connection, financial stability and access to employment and training. Illicit drug use is disproportionately prevalent in the homeless population and can be both a contributing factor (i.e. leading to homeless) and also a consequence of homelessness. Substance misuse can also act as a barrier to a successful exit from homelessness (Johnson & Chamberlain, 2008). Health promotion campaigns play an important role in primary prevention of addiction as well as promoting available support services, which facilitates mitigation of the homelessness risk created by substance misuse.

Figure 4.18 suggests that the rate of those that have used or continue to use an illicit drug in WA has remained relatively constant. This is concerning as it suggests that the measures currently being implemented are not functioning to an adequate capacity. One optimistic fact to note is that the number of people that have used an illicit drug has declined from 49.1% to 44.9% while the number that have used an illicit drug has remained relatively constant, which suggests that those who have never used an illicit drug are less likely to do so. Future research will be necessary to investigate the causal factors of this increase between 2007 and 2013 and the subsequent decline in 2016.

The Premier's Priorities identify illicit drug use as a severe problem within Western Australian society, and set the target of reducing the proportion of the WA population who have taken an illicit drug in the last 12 months by 15% between 2016 and 2022. If achieved, the grey line ('have used an illicit drug in the last 12 months') in Figure 4.18 will decrease to 14.3% by 2022, an important step given that illicit drug use is a major driver for homelessness. Some of the key strategies the State Government is implementing to achieve this goal is the continuation of the 'Meth Border Force' through the Australian Police Force, and through targeting criminal networks throughout the state. The 'Methamphetamine Action Plan Taskforce' has also been provided \$40.5 million, and \$31.6 million has been pledged from 2019-2020 to 2022-2023 for the 'North West Drug & Alcohol Support Program' (Western Australian Government, 2019a).

Within the 2019-2020 State Government budget, the outcomes: "Reduced incidence of use and harm associated with alcohol & other drug use" and "Accessible, high quality and appropriate mental health and AOD treatments" have been outlined. These align strongly with Outcome 3.4 of the Data Dictionary: "Western Australians are not engaging in problematic substance misuse"



(Western Australian Government, 2019b).

Domestic violence

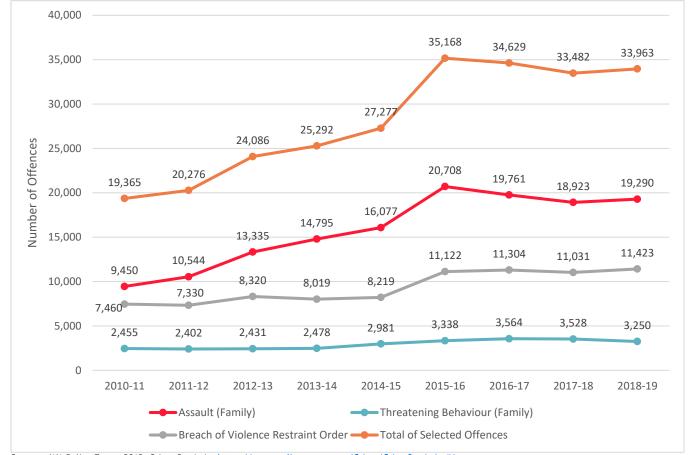


Figure 4.19 Family violence offences in WA (2010-11 to 2018-19)

Source: WA Police Force, 2019. Crime Statistics <u>https://www.police.wa.gov.au/Crime/CrimeStatistics#/</u>

Note: These are absolute number of offences, not rates, and do not take into account changes in population size.

Link to measures: 3.2.1.1: The number of family violence offences in WA; 3.2.1.2: The number of callouts by Western Australia Police for domestic violence reasons; 3.2.1.3: The number of arrests for domestic violence offences in Western Australia.

Domestic and family violence is the leading cause of homelessness for women and their children. Given the role of domestic violence as a major structural driver of entry into homelessness, it is important to monitor the prevalence of domestic violence and trends in Western Australia. However, domestic violence rates are notoriously difficult to calculate accurately, owing to the fact that most incidences of domestic violence and sexual assault go unreported. With the caveat that Figure 4.19 does not reflect the true extent of the problem, WA crime statistics for Assault (Family), Threatening Behaviour (Family) and Breach of Violence Restraint Orders can be used as a proxy for domestic violence offences. This data is publicly available via Western Australia Police Force Crime Statistics (WA Police Force, 2019).

The trend depicted in Figure 4.19 is clear. Reported family violence offences have increased by more than 100 per cent in the past decade. This includes a spike of 28.9 per cent between 2014-15 and 2015-16, with the total number of offences jumping from 27,277 to 35,168. While slightly decreasing overall from this peak in 2015-16, the numbers in all categories except threatening behaviour (Family) have increased over the 2017-18 to 2018-19 period. From the perspective of homelessness, these statistics are concerning.



Future iterations of the Dashboard may include other measures relating to the drivers of homelessness, described in Table 4 below.

Table 4: Key measures relating to Target 4

| Outcome | | Key Measures | Baseline | Target |
|---------|--|--|------------------------|--|
| 1.5 | Adults do not leave institutional care into homelessness | Measure 1.5.1.1: The number and proportion of adults leaving prison in Western Australia that are homeless 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.1.3: The number and proportion of adults leaving prison in Western Australia that are spending more than 30% of income on housing costs 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.2.1: The number and proportion of adults leaving rehabilitation facilities in Western Australia that are homeless 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.2.3: The number and proportion of adults leaving rehabilitation facilities in Western Australia that are spending more than 30% of their income on housing costs 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.3.1: The number and proportion of adults leaving hospital in Western Australia that are homeless 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.3.3: The number and proportion of adults leaving hospital in Western Australia that are spending more than 30% of their income on housing costs 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.4.1: The number and proportion of adults leaving psychiatric facilities in Western Australia that are homeless 12 months after exit. | Not yet established | To be set once baseline is established |
| | | Measure 1.5.4.3: The number and proportion of adults leaving psychiatric facilities in Western Australia that are spending more than 30% of their income on housing costs 12 months after exit. | Not yet established | To be set once baseline is established |



| Outcome | | Key Measures | Baseline | Target |
|--|--|---|------------------------|--|
| facilitate the development o protective factors against | Government policy and funding is used to facilitate the development of protective factors against homelessness in | Measure 2.3.1.1: Provisions in the Residential Tenancy Act and other relevant housing policies (including Housing Authority policies for those in public housing) that allow a person to break lease without penalty if they are experiencing domestic violence. | Not yet established | Include family and domestic violence provisions in the Residential Tenancy Act |
| | western Australia | Measure 2.3.3.1: State Government legislation ensures that young people transition to safe, secure accommodation when exiting the custody of the State. | Not yet established | To be set once baseline is established |
| | | Measure 2.3.3.2: The State Government budget funding of transition services for young people leaving the custody of the State. | | |

Target 5. The current very large gap between the rate of Aboriginal homelessness and non-Aboriginal homelessness in Western Australia will be eliminated so that the rate of Aboriginal homelessness is no higher than the rate of non-Aboriginal homelessness.

There is a significant over-representation of Aboriginal and Torres Strait Islander people in the Western Australian homeless population. While making up only 3.1% of the general population, Aboriginal and Torres Strait Islanders form 29.1% of the homeless population (ABS, 2016). This substantial gap between Aboriginal and non-Aboriginal homelessness is addressed in Domain 1: *The State of Homelessness* of the Framework and Outcome 1.9 of the Data Dictionary: *Aboriginal homelessness rates are no greater than non-Aboriginal homelessness rates*. The target for Aboriginal homelessness across all categories is to eliminate the over-representation, such that the rate of homelessness within the Aboriginal and Torres Strait Islander population is in line with that of the general population.



Figure 5.1 The overall rate of Aboriginal and Torres Strait Islander persons aged 15 years and over across all homeless categories in Western Australia (Census)

Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0</u> Link to measure: 1.9.1.2: The number and proportion of the overall homeless population in Western Australia that identify as Aboriginal and/or Torres Strait Islander.

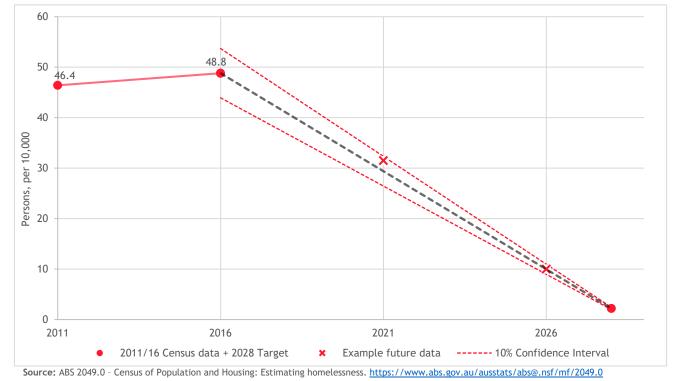


Figure 5.2 Rate of Aboriginal and Torres Strait Islander persons aged 15 years and over living in improvised dwellings, tents, or sleeping out in Western Australia (Census)

Link to measures: 1.9.1.9: The overall rate of homelessness within the Aboriginal and Torres Strait Islander population aged 15 years and over across all homeless categories in Western Australia (Census).

Figures 5.1 and 5.2 demonstrate the rate of Aboriginal and Torres Strait Islander homelessness in Western Australia, both in terms of the overall rate across all homeless operational groups and the rate of people living in improvised dwellings, tents or sleeping out respectively. Between 2011 and 2016, there was a substantial decrease in the overall rate of Aboriginal and/or Torres Strait Islander homelessness, from 485 persons per 10,000 to 344.6 per 10,000. This rate of decline will need to be sustained for the next 10 years to achieve the goal of eliminating the over-representation of Aboriginal and/or Torres Strait Islander homelessness in WA.

Figure 5.2 highlights a point of concern - that in this particular category ('living in improvised dwellings, tents or sleeping out'), the rate of Aboriginal and/or Torres Strait Islander homelessness increased from 2011 to 2016, from 46.4 per 10,000 to 48.8 per 10,000. Since this is reflective of the most extreme form of homelessness, strong focus will need to be put into improving the ability of Aboriginal and/or Torres Strait Islander people within this category to exit it. There is a current focus on improving the geographical coverage of service systems into remote areas of the State and further developing the reach of culturally appropriate, Aboriginal homeless people in Western Australia. These efforts will go a long way to improving the rates of Aboriginal and Torres Strait Islander homelessness, and specifically facilitate the exit from rough sleeping (Kaleveld et al., 2018).



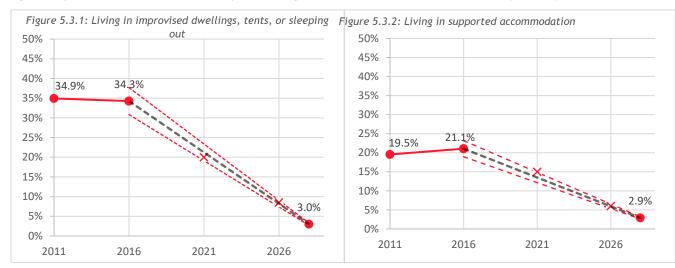
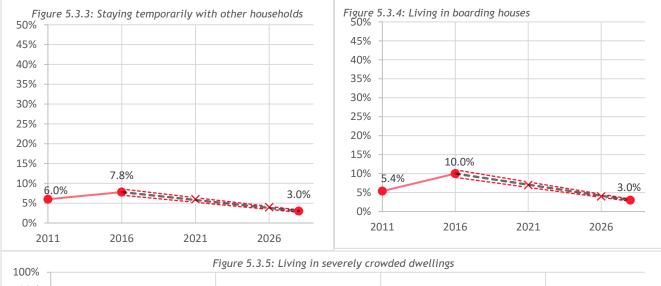
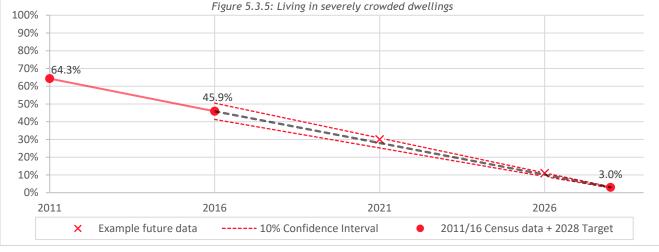


Figure 5.3 The proportion of those living in various forms of homelessness in Western Australia aged 15 years and over that identify as Aboriginal and/or Torres Strait Islander (Census)





Source: ABS 2049.0 - Census of Population and Housing: Estimating homelessness. <u>https://www.abs.gov.au/ausstats/abs@.nsf/mf/2049.0</u> Link to measures: 1.9.1.3: The number and proportion of rough sleepers in Western Australia that identify as Aboriginal or Torres Strait Islander; 1.9.1.4: The number and proportion of couch surfers in Western Australia that identify as Aboriginal or Torres Strait Islander; 1.9.1.5: The number and proportion of those in supported accommodation for the homeless in Western Australia that identify as Aboriginal or Torres Strait Islander; 1.9.1.5: The number and proportion of those in supported accommodation for the homeless in Western Australia that identify as Aboriginal or Torres Strait Islander; 1.9.1.8: The number and proportion of those living in severely overcrowded dwellings that identify as Aboriginal or Torres Strait Islander When analysing homelessness, the Census categorizes Aboriginal and Torres Strait Islander homelessness into six categories:

- Living in improvised dwellings, tents, or sleeping out (Fig. 5.3.1)
- Living in supported accommodation (Fig. 5.3.2)
- Staying temporarily with other households (Fig. 5.3.3)
- Living in boarding houses (Fig. 5.3.4)
- Living in severely crowded dwellings (Fig. 5.3.5)
- Living in other temporary lodgings (insignificant, so not shown)

Figure 5.3 depicts the proportion of those living in various forms of homelessness in Western Australia aged 15 years and over that identify as Aboriginal and/or Torres Strait Islander, with data retrieved from the Census. This is subtly different from the data shown in Figures 5.1 and 5.2 - while 5.1 and 5.2 establish the proportion of Aboriginal and Torres Strait Islander people that are homeless, Figure 5.3 depicts the percentage of the homeless population in various groups that identify as Aboriginal and/or Torres Strait Islander.

As seen in Figure 5.3.1, the percentage of those living in improvised dwellings, tents, or sleeping out that identified as Aboriginal and/or Torres Strait Islander decreased from 34.9% in 2011 to 34.2% in 2016. This will need to decrease substantially in order to reach the 2028 target of 2.9% - but doing so would imply that we have eliminated the over-representation of homeless individuals within the Aboriginal and/or Torres Strait Islander population. Similarly, Figures 5.3.2, 5.3.3 and 5.3.4 all demonstrate the need for action, with an increase in homelessness rates (19.6% to 21.0%, 6.0% to 8.0% and 5.39 to 10.0% respectively) between 2011 and 2016. The fact that these have increased despite the rate of the general population living in these forms of homelessness either decreasing or staying relatively constant (Figures 3.3.2, 3.3.3 & 3.3.4) implies that the solutions currently employed are not working as well for Aboriginal and/or Torres Strait Islander people as they are for the general population.

Figure 5.3.5, however, paints a more positive picture - the proportion of those living in severely crowded dwellings that identify as Aboriginal and/or Torres Strait Islander decreased from 64.3% to 45.8% from 2011 to 2016. Consequently, if this rate of decline continues until 2028 the target of 2.9% will be achieved, implying that the strategies currently being employed to target the issue of 'severely crowded' dwellings are relatively effective.

In the WA Government's 2019-2020 Budget, a series of Aboriginal and/or Torres Strait Islander specific strategies are being implemented, to both deal with the short-term ramifications of homelessness and address long-term drivers of homelessness. To address the former, the 'North West Aboriginal Housing Fund (NWAHF)' has been established, which includes 50 homes in Kununurra, Hall Creek and Wyndham. This falls under the outcome: "Family and individuals experiencing family and domestic violence, homelessness or other crises are assisted to build their capabilities and be safe" (Western Australian Government, 2019a).

Similarly, Seivwright, Callis, Flatau & Isaachsen (2017) who operationalised the Overcoming Indigenous Disadvantage framework in the Pilbara and Kimberly, developed a series of outcomes and indicators that could be incorporated into this Dashboard in the future, such as the 'Rates of disease associated with poor environmental health', 'Access to clean water and functional sewerage' and 'Overcrowding in Housing'.

For future iterations of the Dashboard, some other factors influencing Aboriginal and/or Torres Strait Islander homelessness that could be analysed are contained in Table 5.



Table 5: Key measures relating to Target 5

| Outcome | | Key Measures | Baseline | Target |
|---------|--|---|------------------------|--|
| 1.9 | Aboriginal homelessness rates are no greater than non-Aboriginal homelessness rates | 1.9.2.1: The number of Aboriginal-specific homelessness services. | Not yet established | To be set once baseline is established |
| | | 1.9.2.2: The number and proportion of Aboriginal and Torres Strait Islander case workers in mainstream homelessness services | Not yet established | To be set once baseline is established |
| | | 1.9.2.3: Mainstream homelessness services have policies for referral to Aboriginal-specific homelessness services if the client prefers. | Not yet established | To be set once baseline is established |
| | | 1.9.2.4: The number and proportion of homelessness services that involve Aboriginal people in their program and service design. | Not yet established | To be set once baseline is established |

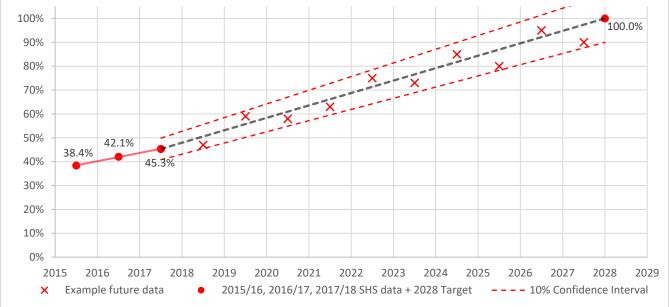
Target 6. Those experiencing homelessness and those exiting homelessness with physical health, mental health, and alcohol and other drug use dependence needs will have their needs addressed. This will result in a halving of mortality rates among those who have experienced homelessness and a halving in public hospital costs one year on for those exiting homelessness.

Homeless and formerly homeless individuals experience significant issues in relation to physical health, mental health, and drug and alcohol use. Poor health outcomes and addiction can be both a cause and a consequence of homelessness. For example, those with chronic schizophrenia often end up homeless as their ability to participate in the economic and social life of society declines. Those with other chronic illnesses such as AIDS are vulnerable to homelessness, as the disease progresses and the individual becomes unable to work. On the other hand, homelessness increases the risk of health problems such as skin disorders and parasitic infestations.

Part 1 of the Framework and Outcome 1.7: *Homeless and formerly homeless individuals have their health, mental health, and drug and alcohol issues addressed* of the Dashboard explicitly operationalise this target. This will include data from Specialist Homelessness Services on the provision and access of health, and drug and alcohol use services among their clients, as well as WA Department of Health data on mortality rates and public hospital costs. This target considers not only the cost to the individual but also the economic burden on the public system of chronic homelessness when the complex health needs of the homeless population are not appropriately addressed.

While not directly measuring health needs, one broad indication of this target can be found in SHS public data and is illustrated below: The proportion of Western Australian individuals accessing Specialist Homelessness Services that end their support period with their immediate case management needs met/case management goals achieved (Measure 1.2.2.1).

Figure 6.1 The proportion of Western Australian individuals accessing Specialist Homelessness Services that end their support periods with their immediate case management needs met/case management goals achieved (SHS)



Source: AIHW Specialist Homelessness Services Collection, 2017-18 https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-2017-18/contents/contents

Link to measures: 1.2.2.1: The proportion of individuals accessing Specialist Homelessness Services that end their support periods with their immediate care management needs met/case management goals achieved

Figure 6.1 demonstrates that there has been an improvement in the 2015-2017 period - almost 50% of individuals accessing Specialist Homelessness Services end their support periods with their immediate needs and goals met. For this to increase to 100% by 2028, however, there will need to



be sustained focus on understanding and addressing the complex needs of Specialist Homelessness Services clients.

People access SHS services for a variety of reasons, including but not limited to their financial, accommodation, interpersonal relationship and health conditions. In 2017-18, 18.8% of those who accessed SHS services did so for health reasons (mental health, medical or drug and alcohol issues). An improvement of the proportion of Western Australian individuals accessing SHS services that leave with their immediate case management needs met would therefore most likely imply that those experiencing health issues will have had their needs met. This is not necessarily the case, however, and so a more in-depth analysis of the Unit Record Files of individuals who seek SHS assistance is necessary, to ascertain the proportion of those who have initially accessed Specialist Homelessness Services for health reasons and end their support periods feeling as if these health needs have been met.

Some relevant measures relating to Target 6 are shown in Table 6. Future versions of the Data Dictionary and Dashboard will operationalise this further.

| Outcome | | Key Measures | Baseline | Target |
|---------|---|--|------------------------|---|
| 1.7 | Homeless and formerly homeless individuals have their health, mental health, and drug and alcohol issues addressed | 1.7.3.1: The number and proportion of clients of homelessness services in Western Australia identified as having physical health needs that are referred to service(s) for those needs. | Not yet established | To be set once baseline is established |
| | | 1.7.3.2: The number and proportion of clients of homelessness services in Western Australia identified as having physical health needs that access service(s) for those needs. | Not yet established | To be set once baseline is established |
| | | 1.7.3.5: The number of emergency department presentations of formerly homeless people in Western Australia in the 12 months after their exit. | Not yet established | To be set once baseline is established |
| | | 1.7.3.6: The number of inpatient hospitalisations of formerly homeless people in Western Australia in the 12 months after their exit. | Not yet established | To be set once baseline is established |

Table 6: Key measures relating to Target 6



| Outcome | Key Measures | Baseline | Target |
|---------|--|------------------------|---|
| | 1.7.3.7: The mortality rate of homeless and formerly homeless people in Western Australia. | Not yet established | To be set once baseline is established |
| | 1.7.3.9: The proportion of homeless and formerly homeless people in Western Australia that have a serious long-term condition but are not getting treatment | Not yet established | To be set once baseline is established |
| | 1.7.4.1: The number and proportion of clients of homelessness services in Western Australia identified as having mental health needs that are referred to service(s) for those needs. | Not yet established | To be set once baseline is established |
| | 1.7.4.2: The number and proportion of clients of homelessness services in Western Australia identified as having mental health needs that access service(s) for those needs. | Not yet established | To be set once baseline is established |



Target 7. Those experiencing homelessness and those exiting homelessness will be supported to strengthen their economic, social, family and community connections leading to stronger wellbeing and quality of life outcomes. Employment among those experiencing homelessness will be significantly increased. Over half of those exiting homelessness will be employed within three years of moving into housing. Well-being and quality of life will equal those of the general population in the same timeframe.

There are currently no baseline indicators available for this target. However, the Framework and Data Dictionary provide a comprehensive operationalisation of the relevant social and economic connection measures that impact on homeless and formerly homeless peoples' wellbeing (see Outcome 1.8: Homeless and formerly homeless individuals have social and economic connections that facilitate improved wellbeing.)

It has been well established that educational disadvantage, poverty and poor social relationships underpin homelessness in society. The paucity of data on social and economic outcomes for people with current or previous experiences of homelessness demonstrates the need for future research. For example, in order to evaluate appropriately this target, SHS client follow up is required three years after they are in stable housing in order to assess clients' employment status, general wellbeing and quality of life. Potential measures for wellbeing and quality of life include the World Health Organisation-Five (WHO-5) Wellbeing Index and the World Health Organisation Quality of Life (WHOQOL) assessment, respectively.

With regard to economic connections, the rates of employment and scores on these measures among the currently homeless population can be compared with population norms through a combination of SHS and Census data (see Data Dictionary: Outcome 1.8). As explored in the Data Dictionary, information about the formerly homeless population is currently difficult to access. However, Centrelink data and SHS unit record files can be linked with other databases where housing status is recorded to discern the formerly homeless population, and then the employment conditions of these individuals can be analysed using linked administrative data. This target is met when over half of those exiting homelessness are employed and there is no significant difference in wellbeing and quality of life scores between those who have exited homelessness into stable housing for three years, and the general population.

The WA Government in its 2019-20 Budget indicates one of its Desired Outcomes as "School students across Western Australia have access to high quality education." The achievement of this outcome would go some way to improving the employment rate among the currently homeless population in WA, since educational disadvantage is a driver of homelessness in society (Western Australian Government, 2019a).



Table 7: Key measures relating to Target 7

| Outcome | | Key Measures | Baseline | Target |
|---------|---|---|------------------------|---|
| 1.8 | Homeless and formerly homeless individuals have social and economic connections that facilitate improved wellbeing | 1.8.1.4: Employment rate among the formerly homeless population in Western Australia, one year after their exit from homelessness. | Not yet established | Increase employment rate and labour force participation rate to equal that of the general population, that is, an employment rate of 93.1% |
| | | 1.8.2.2: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for emotional support. | Not yet established | Increase the proportion of homeless and formerly homeless people in WA that feel they have at least one person to turn to for emotional support. |
| | | 1.8.3.5: The mean total scores of homeless and formerly homeless people in Western Australia on the WHOQOL-BREF. | Not yet established | Increase the mean total scores of homeless and formerly homeless people in WA on the WHOQOL- BREF. |
| | | 1.8.2.1: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for advice. | Not yet established | To be set once baseline is established |
| | | 1.8.2.2: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for emotional support. | Not yet established | To be set once baseline is established |
| | | 1.8.2.3: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person that could support them if they had a serious illness or injury. | Not yet established | To be set once baseline is established |
| | | 1.8.2.4: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for help | Not yet established | To be set once baseline is established |



| Outcome | | Key Measures | Baseline | Target |
|---------|--|--|------------------------|---|
| | | in maintaining family or work responsibilities. | | |
| | | 1.8.2.5: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for emergency money. | Not yet established | To be set once baseline is established |
| | | 1.8.2.6: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for emergency food. | Not yet established | To be set once baseline is established |
| | | 1.8.2.7: The proportion of homeless and formerly homeless people in Western Australia that feel they have at least one person to turn to for emergency accommodation. | Not yet established | To be set once baseline is established |
| 1.7 | Homeless and formerly homeless individuals have their health, mental health, and drug and alcohol issues addressed | 1.7.3.1: The number and proportion of clients of homelessness services in Western Australia identified as having physical health needs that are referred to service(s) for those needs. | Not yet established | To be set once baseline is established |

Target 8. A strong, collaborative and adaptive network of services and responses across the community services, health, mental health, justice and education sectors will exist working collectively to address the underlying causes of homelessness and meeting the needs of those who become homeless.

Collaborative efficacy is the extent to which actors within the network of organisations aiming to end homelessness are able to coordinate their actions and services to address causal factors effectively within the system of homelessness. The complexity of homelessness necessitates a varied system of specialised support services across fields, such as community services, physical and mental health, justice, education and employment. An approach that takes into account this complexity must include a high level of collaboration across all of these services, such that the client receives consistent information and effective assistance.

The different aspects of Collaborative Efficacy are articulated in Domain 6: *Collaborative Efficacy* of the Framework and Data Dictionary, specifically Outcome 6.1: "Actors within the network of organisations aiming to end homelessness coordinate their actions to provide an effective effort toward addressing factors within the system of homelessness." This is important in that collaborative efficacy involves the aggregation of client outcome data and other forms of information exchange, and thus will allow all parties involved to measure homelessness to the greatest possible accuracy and act accordingly in a united manner.

At present, there are no sources of data on the extent of service and sector collaboration. Significant original research is required to evaluate the collaborative efficacy across the community services in WA. Examples of key indicators for this target include the number of homelessness services sharing data for aggregation, and number of partnerships between homelessness services and police and/or hospitals.

In Table 8 below, we have highlighted a number of key measures (operationalised in the Framework and Data Dictionary) corresponding to this target. This is by no means comprehensive, and future versions of the Dashboard should seek to analyse and visualise measures from across Domain 6: *Collaborative Efficacy*.

| Outcome | | Key measures | Baseline | Target | | | |
|--------------------|--|--|------------------------|--|--|--|--|
| Doma | Domain 6: Collaborative Efficacy | | | | | | |
| the net organis | Actors within the network of organisations | 6.1.1.1: Number of homelessness services sharing data for aggregation. | Not yet established | Double the number of homelessness services sharing data for aggregation each year. | | | |
| | aiming to end homelessness coordinate their actions | 6.1.2.1: Number of clients who feel there were no barriers to accessing services once they reached out and contacted a service. | Not yet established | 100% of clients experience no barriers to accessing services | | | |
| | to provide an effective effort toward addressing | 6.1.2.2 Number of homelessness services who assist clients with referral processes to another more suitable service | Not yet established | 100% of clients feel they were assisted with the referral process to a suitable service | | | |
| | factors within the system of homelessness. | 6.1.3.1 Nature of partnerships between homelessness services and police and/or hospitals | Not yet established | Double the number of police and hospital partnerships with homelessness services each year | | | |
| | | 6.1.4.1 Development of coherent and well-articulated accounts of problems and who or what is to blame (diagnostic framing) | Not yet established | To be established | | | |

Table 8: Key measures relating to Target 8



| Outcome | Key measures | Baseline | Target |
|---------|--|------------------------|--|
| | 6.1.4.1 Development of coherent and well-articulated accounts of what needs to be done in order to remedy problems (prognostic framing) | Not yet established | To be established |
| | 6.1.6.1: Number of organisations using and reporting back use of the Outcomes Framework evaluations. | Not yet established | Double the number of organisational using and reporting back use of the Outcomes Framework evaluations each year. |
| | 6.1.7.1: Establishment of a standardised client assessment tool. | Not yet established | Establish a standardised client assessment tool for use by all WAAEH affiliated services before December 2020. |
| | 6.1.7.2: Number of homelessness services using the standardised client assessment tool. | Not yet established | Double the number of homelessness services using the standardised client assessment tool each year. |

Target 9. Measurement, accountability and governance mechanisms that are robust, transparent and open to external review will be operating, providing an on-going means for assessing progress in meeting the goals of Ending Homelessness in Western Australia in 10 years.

The Framework is a systematic approach to the identification, tracking and reporting of data relevant to the complex system of homelessness. The Framework, Data Dictionary and this Dashboard are all dynamic documents and will be updated with developments in homelessness research.

Our goal is to create a comprehensive evaluation and accountability mechanism that will assess progress in meeting the WAAEH 10-year targets to end homelessness. This is necessary as rigidity and inflexibility in the methods being used in achieving homelessness will only result in delayed progress towards the goals. We need to be willing to transparently reflect on past experience and how we are tracking in achieving the Framework measures, including: the individual life outcomes of those experiencing or at risk of homelessness (micro level), the outcomes within and surrounding the organisations engaged in ending homelessness (meso level), and the broader sectors to which those organisations belong (macro level).

A multi-level approach also requires engagement with stakeholders from all levels, not only in the process of collecting data about the indicators across these levels, but also in the process of design and updating of the Framework itself. We picture this approach to the 'nested systems' of homelessness at Figure 9.1 below:

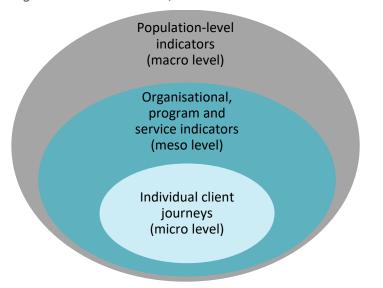


Figure 9.1 The multi-level, nested indicators of the WAAEH Outcomes Framework

There is a lack of research and baseline data operationalising this Target. In Table 9 below, we have outlined a few key measures relating to this Target which can be expanded upon in future versions of the Dashboard.



| Table 9: I | Key measures | relating | to Target 9 |
|------------|--------------|----------|-------------|
|------------|--------------|----------|-------------|

| Outc | ome | Key measures | Baseline | Target | | | |
|------|--|---|------------------------|---|--|--|--|
| Doma | Domain 6: Collaborative Efficacy | | | | | | |
| 6.1 | Actors within the network of organisations aiming to end | 6.1.5.3: Number of times service delivery outcomes and other learnings are reported publicly | Not yet established | Increase the number of times service delivery outcomes and other learnings are reported publicly | | | |
| | homelessness coordinate their actions to provide an effective effort toward addressing factors within the system of homelessness. | 6.1.5.4: Number of conferences and other formal presentations of learnings | Not yet established | Increase the number of conferences and other formal presentations of learnings | | | |
| | | 6.1.5.5: Extent to which shared learnings are grounded in local context and local knowledge | Not yet established | Increase the extent to which shared learnings are grounded in local context and local knowledge | | | |
| | | 6.1.6.1: Number of organizations using and reporting back use of the Outcomes Framework evaluations | Not yet established | Double the number of inter-agency meetings for the purpose of sharing learnings each year | | | |
| | | | | | | | |



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