

ENDING HOMELESSNESS IN WESTERN AUSTRALIA: A Decade of Advance to Zero Data in Western Australia 2012-2022

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The information in this infographic is drawn from the WAAEH Ending Homelessness in Western Australia 2022 report. The Advance to Zero database provides substantial detail and context about people experiencing homelessness, which comprises:

1. Data collected by homelessness service agencies about people experiencing homelessness using the Vulnerability Index (VI) and the Vulnerability Index – Service Prioritisation Decision Assessment Tool (VI-SPDAT) instruments; and
2. Additional information derived from the By-Name List (BNL).

Between 2012 and June 2022, homelessness agencies conducted 3,183 surveys with people experiencing homelessness in Western Australia. Eighty-two per cent of respondents were interviewed using various iterations of the Individual VI-SPDAT: 6.0% using the VI, 9.0% using the Families VI-SPDAT and 2.8% using the Youth VI-SPDAT.

Table 1 VI-SPDAT surveys, by region, Advance to Zero, Western Australia

Region	Number	Per cent
Armadale	38	1.2
Bentley	173	5.4
Bunbury	65	2.0
Fremantle	257	8.1
Geraldton	134	4.2
Joondalup	11	0.3
Mandurah	146	4.6
Maylands	18	0.6
Midland	165	5.2
Perth	1,876	58.9
Rockingham	123	3.9
Willetton	34	1.1
Missing	143	4.5
Total	3,183	100.0



Key message:

The review of the Advance to Zero data for Western Australia highlights the fact health needs and healthcare cost are considerable for those experiencing homelessness, particularly those who have had long periods of rough sleeping. Furthermore, there is a significant history of homelessness time spent away from stable housing.

Additionally, women sleeping rough report poorer physical and mental health outcomes and greater problematic drug and or alcohol use compared to both men sleeping rough and women experiencing other types of homelessness.

Overall, the experiences and outcomes of Western Australian respondents indicate complex, multidimensional needs. These needs will differ from person to person, thus the supports offered need to be adaptable and person-centred. A wrap-around supportive housing model is essential.

Source: Advance to Zero national data 2012-June 2022

Report citation link: <https://apo.org.au/node/318820>

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Dashboard link: <https://endhomelessnesswa.github.io/home/>

The Ending Homelessness in Western Australia 2022 Report, WAAEH Dashboard, Homelessness in Western Australia in 2022 infographic, and A Decade of Advance to Zero Data in Western Australia 2012-2022 infographic have been funded by the Sisters of St John of God Ministries through the WAAEH.



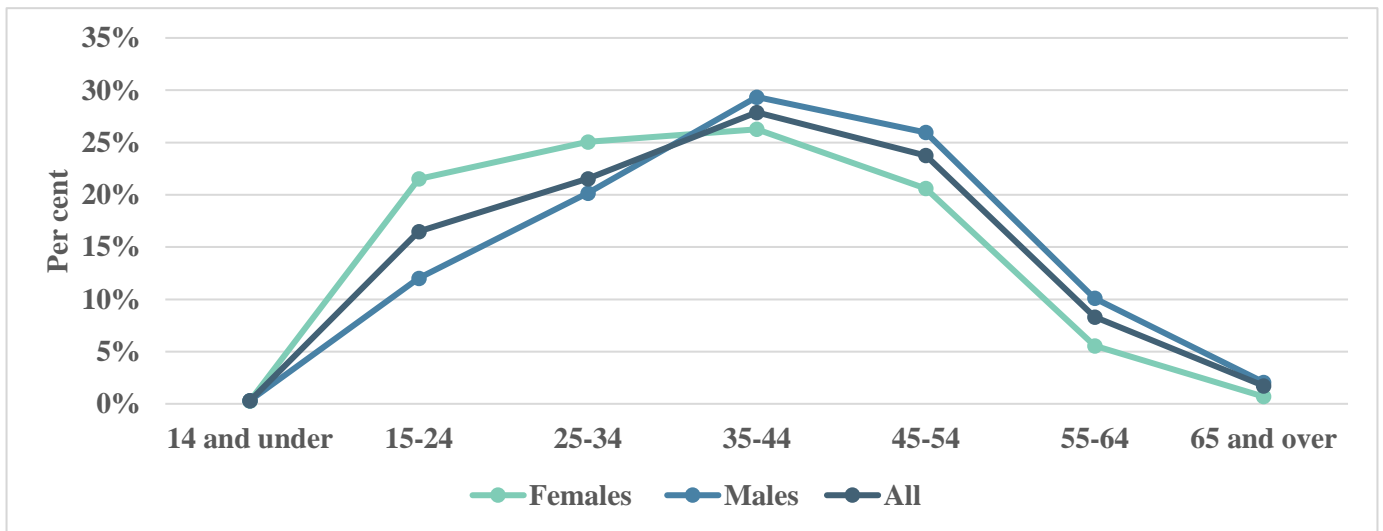
A Decade of Advance to Zero Data in Western Australia 2012-2022



Demographics:

- Western Australian rough sleepers surveyed between 2012 and June 2022 were mostly **male** (62.4%), **straight** (78.7%) and had an average age of **40 years** (Figure 1).
- Around one quarter (24.5%) were **Aboriginal and/or Torres Strait Islander** (Figure 2).

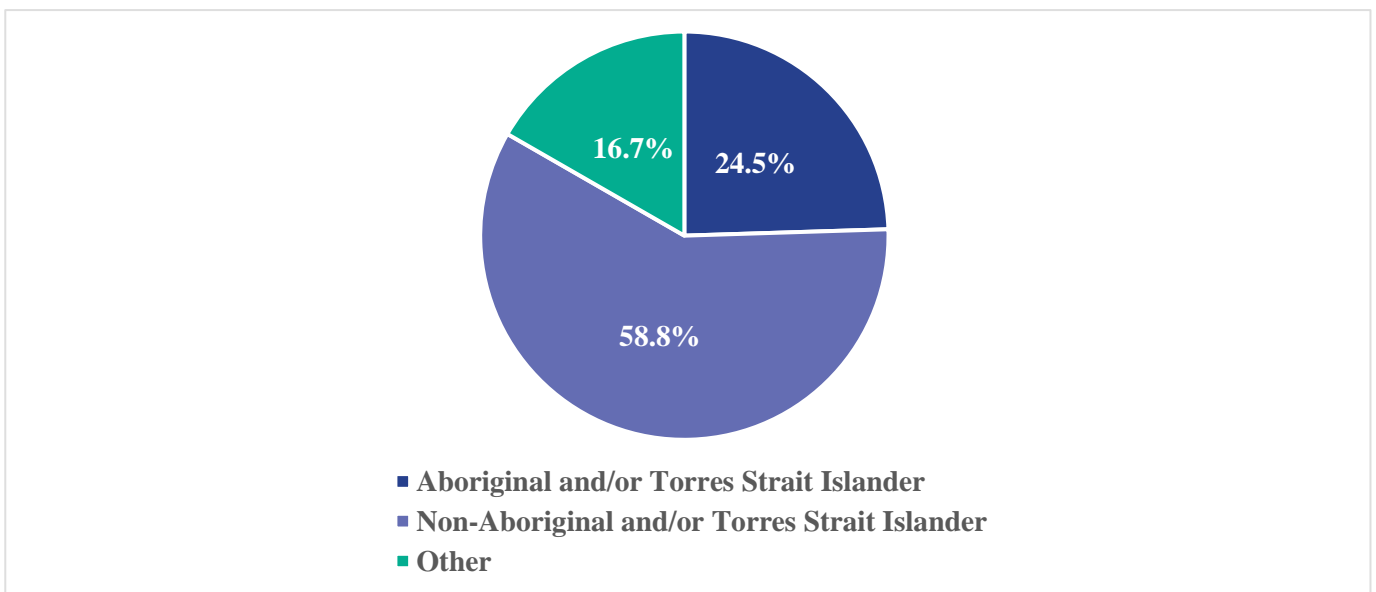
Figure 1 Age distribution, by year by gender, Advance to Zero, Western Australia



Source: Advance to Zero national data 2010-June 2022.

Notes: Estimates based on unique respondents and exclude missing values and respondents of Other gender.

Figure 2 Aboriginal and/or Torres Strait Islander status, Advance to Zero, Western Australia



Source: Advance to Zero national data 2012-June 2022.

Note: Estimates based on all responses and exclude missing values.

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EXPERIENCE OF HOMELESSNESS

Table 2 Homelessness and housing, by locations slept most frequently, Advance to Zero, Western Australia

	Number	Per cent
Sleeping rough	1,642	51.6
Crisis and emergency accommodation	309	9.7
Temporary accommodation (e.g., couch surfing)	768	24.1
Short-term accommodation (e.g., boarding house, hostel, caravan)	180	5.7
Institutional accommodation (e.g., hospital, drug and alcohol facility, prison)	103	3.2
Permanently housed	47	1.5
Other	34	1.1
Missing	100	3.1
Total	3,183	100.0

Source: Advance to Zero national data 2012-June 2022

- 51.6% **were sleeping rough** at the time of survey, with the vast majority of the rest being in crisis, temporary, and short-term accommodation.
- Individuals had, on average, spent over **5 years** (64.1 months) homeless in their lives. Families had spent over **5.5 years** (68.2 months) homeless on average.
- Over half (56.2%) had been a **victim of attack**; half (49.9%) **had threatened or tried to harm themselves or others**.
- Nearly two thirds (63.6%) had **interacted with police** in the previous six months.
- 55.6% of respondents had been **imprisoned** at some point in their life.



HEALTH

- 30.2% of Western Australian respondents in the Advance to Zero database reported that they had experienced **dehydration**; 26.7% a history of **heatstroke/exhaustion**; 19.9% **skin & foot infections**; and 8.3% **epilepsy**.
- Almost one third (34.1%) had **asthma**, 18.8% had **Hepatitis C**, 19.7% **had heart disease**, arrhythmia or irregular heartbeat, 12.8% had **diabetes**, 8.2% had **emphysema**, and 6.9% had **kidney disease**.
- Over a third (35%) reported **serious brain injury or head trauma**.

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MENTAL HEALTH

- More than two thirds (67.6%) of Western Australian respondents reported that they have **problems concentrating or remembering things**.
- More than half (55.2%) had **spoken with a psychiatrist, psychologist or mental health professional** in the last six months.
- Nearly half (48.8%) had gone to an **emergency department (ED)** due to not feeling emotionally well or because of their nerves.
- Over one third (35%) reported that they had been **taken to hospital against their will** for mental health reasons.
- Approximately two thirds reported diagnosis of **depression** (69.5%) and **anxiety** (63.2%).
- 39.3% of people reported diagnosis of **post-traumatic stress disorder** and 24.3% had been diagnosed with **psychosis**.



ALCOHOL AND OTHER DRUG USE

- 72% of respondents reported that they had experienced or been told that they had **problematic drug or alcohol use** or abused drugs or alcohol.
- 39.1% reported that they had **consumed alcohol or drugs almost every day** or every day during the past month.
- 36.7% reported that they **had used injection drugs** or shots in the last six months.
- One in four respondents (43.5%) of respondents reported that they had been treated for drug or alcohol problems and **returned to drinking or using drugs**.
- Over one quarter (27.6%) reported **blacking out** because of alcohol or drug use in the past month.
- Most (69.7%) were aware of **safe injecting practices**.



HEALTH SERVICE USE

- On average, respondents had been hospitalised **2.97** times in the six months prior to survey. Almost half (48.4%) had not been hospitalised at all, indicating that a small number of people accounted for a large proportion of hospitalisations.
- **Emergency Departments (Accidents and Emergency)** were visited an average of **3.04** times per person in the six months prior to survey.
- On average, Western Australian respondents were taken to hospital by ambulance **1.59** times in the six months prior to survey.
- Average per person cost of **health service use** by Western Australian respondents in the 6 months prior to survey was **\$14,449**, comprised of **\$10,486** in hospitalisation costs, **\$2,327** in Emergency Department costs, and **\$1,636** in ambulance costs.

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FINANCIAL WELLBEING

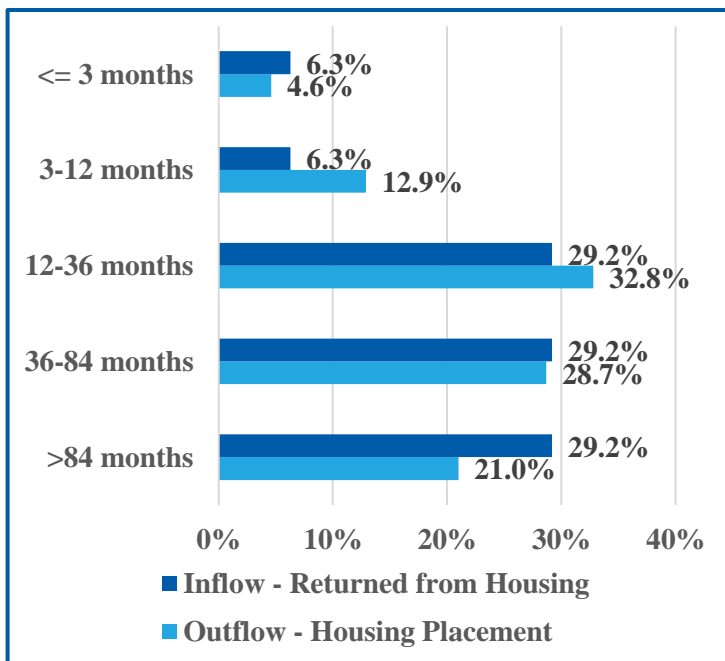
- Most (92.1%) Western Australian respondents had **regular income**, **control of their finances** (92.1%), and a **health care card** (83%).
- Less than half (41%) reported that they **received enough money** to meet all their expenses on a fortnightly basis.
- 80.4% of respondents indicated their **basic needs were met**.
- Over one third (34.5%) said that there was a person or people who believed that they **owed them money**.



SOCIAL WELLBEING

- More than half (53.7%) reported that they have friends of family that take their money, borrow cigarettes, use their drugs, drink their alcohol or get them to **do things they don't want to do**.
- Over half (50.5%) report that they have people in their life whose **company they do not enjoy** but are around out of convenience or necessity.
- Over one third (39.7%) planned **activities for happiness**.
- About one in eight (12.3%) reported that they **have a pet**.

Figure 3 Inflow and outflow by duration of homelessness, per cent, Advance to Zero, Western Australia



Source: Advance to Zero national data 2020-June 2022 By-Name List and survey data. Notes: Estimates based on multiple respondent records with initial homelessness duration (months lived on streets or in emergency accommodation).



ACCOMMODATION OUTCOMES

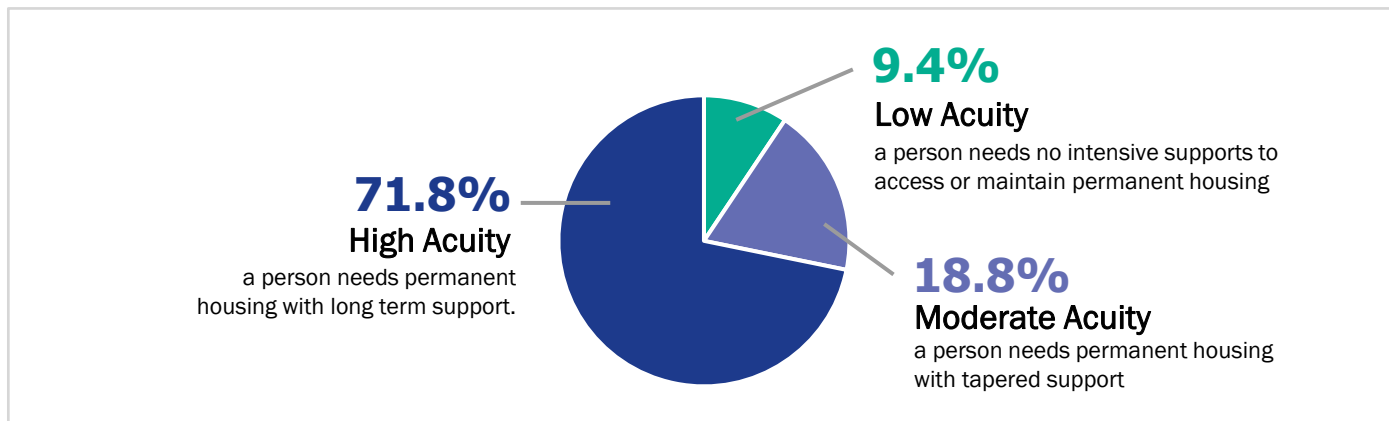
- A total of **3,108 people** were **accommodated** from 2020 to 2022.
- **22% (n=692)** were **permanently housed**
 - 40.6% in public housing
 - 16.0% in community housing
 - 13.0% in private rentals
 - 9.5% in supportive housing
 - 20.5% in group home, aged care, and other
- **78% (n=2,416)** were **temporarily accommodated**
 - 52.1% in crisis accommodation
 - 17.3% in transitional accommodation
 - 9.1% in informal accommodation
 - 9.0% in boarding or lodging
 - 7.0% in a caravan park, backpackers, motel, refuge or other accommodation.

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VI-SPDAT ACUITY

The majority of participants had **high acuity scores** (71.8%) (Figure 4).

Figure 4 Acuity levels, per cent, Advance to Zero, Western Australia



Source: Advance to Zero national data 2012-June 2022.

Breaking the data down by demographics, a greater proportion of **females** (80.5%), **those sleeping rough** (77.6%) and **Aboriginal and/or Torres Strait Islander respondents** (76.3%) had higher acuity scores than **males** (68.0%) and were identified as needing permanent housing with long term support. A greater proportion of participants **aged under 55** had higher acuity scores than those **over 55**.

Reflecting well-known risk factors of homelessness, the majority of Western Australian respondents in the Advance to Zero database with a **serious brain injury or head trauma** (85.8%), **learning or developmental difficulties** (88.9%), or a **physical disability** (79.6%) reported high acuity scores.

Women Sleeping Rough in Western Australia



45.6%
Rough sleepers



38.8
Average age
3 years younger than men sleeping rough

Table 3 Mean time of women sleeping rough in Western Australia (by living on the streets and without stable housing)

	Women sleeping rough (n=451)	Women not sleeping rough (n=521)
Mean time living on the streets or in emergency accommodation	68.4 months (5.7 years)	43.1 months (3.6 years)
Mean time without stable housing	78.3 months (6.5 years)	44.7 months (3.7 years)

Source: Advance to Zero national data June 2022.

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What do you need to be safe and well?



HOME

“House - a place to call home”
“Get off the streets. have somewhere where I can be with my pets and live a responsible life”
“Home - stable accommodation to be reunified with children”
“Roof over my head, secure lockable accommodation, my own space”



MENTAL HEALTH

“Help, support, doctor, psychiatrist, permanent accommodation”
“Service of AA, Counselling for anxiety and panic attacks and depression”
“Being able to see a counsellor regularly”
“Emotional support, safe housing, independence, counselling”



BASIC NECESSITIES

“Good blanket, a good feed and a nice soft mattress”
“Somewhere to live that I can shower and go to the toilet”
“Some place warm”
“Safe, dry sheltered area with blankets staying away from busy parts. Food, water and showers, phone”



PHYSICAL HEALTH

“I'd like to work on my health issues and I'm afraid I'm going to be moved on from my squat”
“More money, affordable health care”
“Stable, secure accommodation, access to services and medical care”



FAMILY AND COMMUNITY

“Being around good people, people being supportive”
“To know my kids are fine (good quality of life)”
“Welfare of my son, accommodation”

Women rough sleepers are at higher risk of poorer **physical and mental health outcomes**, which result in **high acute service utilisation** and thus **high healthcare costs**. The data also indicates **greater problematic drug and or alcohol use** and **poorer social wellbeing** for women sleeping rough.

Strategies targeted at this cohort may result in the **reduction of economic burden to the health sector**. Care and support are needed to improve their physical and mental health, coupled with preventative initiatives to reduce the inflow of homelessness.

To access the **Report** use the following citation: Flatau P., Lester L, Kyron M., Lai, C., and Li, M. (2022). *Ending Homelessness in Western Australia 2022*, Perth: The University of Western Australia. <https://doi.org/10.25916/ns0d-0q24>

The online **Dashboard** displays the latest statistics on the state of homelessness in WA, the drivers of homelessness and trends in the funding of homelessness services.: <https://endhomelessnesswa.github.io/home/>

Other **infographics** of the report: Homelessness in Western Australia in 2022