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Centre for Social Impact

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Introducing Australia’s Social Pulse

Having access to safe, affordable, secure housing; an adequate standard of living; good health; education; social inclusion and the right to services, supports and care that recognizes the needs of individuals and treats them with dignity and respect regardless of their backgrounds, are aspects of life that we all need, value and aspire to (Maslow 1943; e.g. living ‘a good life’, Sen, 1999; Nussbaum, 1992; subjective wellbeing; Hamilton and Redmond, 2010; OECD, 2011). They affect our happiness and make our society economically stronger (e.g. Stiglitz, 2009) and are a human right (UN Human Rights Conventions). And yet, in Australia and across the world, access to those fundamental features of life is still a struggle for many.

Economic indicators like GDP, unemployment, inflation and interest rates, are all well established and regularly reported on in mainstream media. But what about the parts of our lives that tell the story of our social progress? How are we doing in other areas that matter to our lives?

It has been recognised, especially after the Global Financial Crisis, that indicators other than financial measures matter and that collectively they paint a holistic picture of how countries are faring (ABS, 2002b; Saunders, 2010; D’Acci, 2011). This led to nations, institutions and transnational bodies developing criteria for measuring wellbeing alongside economic prosperity to capture how people are faring, their experiences and aspirations beyond material needs (Saunders, 2010).

While some efforts have been undertaken locally, Australia’s social purpose sector lacks a cohesive, consistent and reliable source that tracks our social progress. Without this, we cannot determine if we are improving social outcomes, addressing complex social problems and strengthening society. Nor can we evaluate whether our financial investments in social areas are achieving their aims. Australia’s Social Pulse responds to these gaps by providing rigorous measurement of the nation’s social progress.

Building on existing Australian social statistics, Australia’s Social Pulse measures changes over time in key social indicators across a range of domains. It uses statistical analysis to investigate associations between outcomes and community, household, and individual characteristics to provide an in-depth understanding of the nation’s social pulse. The report examines key indicators across the following domains:

- Education
- Employment
- Health
- Disability
- Living standards
- Housing and homelessness
- Social cohesion
- Life satisfaction

Australia’s Social Pulse helps answer crucial questions such as ‘How is Australia tracking against key social issues? Who is faring well and who is faring poorly? How have outcomes changed over time, and for whom?’ This report is designed to be used across the social purpose sector and to help identify where initiatives, policies and/or investments are needed to improve social outcomes. It indicates areas or particular population cohorts in which innovation, investment or policy changes may be required in the future, and provides an almanac of how Australia is faring in some of the most important social areas.
HOUSING AND HOMELESSNESS

Housing provides shelter, safety, security and privacy (AIHW, 2013) and is a significant predictor of a person’s health and wellbeing (Muir et al., 2015). For this reason, reliable and affordable access to housing is a key factor influencing positive social outcomes in Australia. Yet housing affordability is also a key issue in Australia at present, with the cost of both home ownership and rental properties having risen significantly. This has exposed many people to financial risk and, for some households, the cost of housing may decrease their ability to meet other living expenses (AIHW, 2013) and may mean that they spend such a significant proportion of their income on housing, over 30%, that they are classed as under ‘housing stress’ (AIHW, 2013).

In the most extreme cases where people do not have reliable and affordable access to housing, they are at risk of homelessness. Homelessness is significant as it is linked to a range of indicators of disadvantage, including poorer outcomes in relation to attending school and further education, finding and maintaining employment and keeping up relations with family and friends (Flatau et al., 2015, Zhu, 2015). Youth homelessness is a particular concern, often affecting young people’s current education and wellbeing outcomes (Flatau et al., 2015, Commonwealth of Australia, 2015b) and limiting their future rates of employment (Zhu, 2015).

In addition, physical and mental health problems are higher among people who are homeless than in the general population, with one study finding, for example, that up to 53% of young people who were homeless had experienced a mental health problem (Flatau et al., 2015). In some cases, the combination of homelessness, poorer social and economic engagement, health problems and a simultaneous experience of other social problems can result in severe and multiple disadvantage (Duncan and Corner, 2012)

This chapter looks at the trends in housing conditions, including type of tenure, living space and satisfaction with dwelling and neighbourhood. It also looks at housing affordability and stress and homelessness in Australia.

Key statistics

• According to data from the ABS, home ownership is the most common type of tenure in Australia, although it has declined between 2001 and 2011.

• Analysis of HILDA data reveal that in 2013 Indigenous Australians had significantly lower odds to be living in a dwelling that is owned, compared to non-Indigenous people. They were, however, statistically more likely to be living in a dwelling that is socially rented, compared to non-Indigenous people, in the same year.

• HILDA data show that average satisfaction with housing and neighbourhood was quite high overall, although the 2013 scores were slightly lower compared to 2001 – and that difference was statistically significant.

• Compared to people in areas of median socio-economic disadvantage (3rd SEIFA quintile), people living in areas of high socio-economic disadvantage (1st and 2nd SEIFA quintiles) had higher odds of living in a dwelling with more than two people per bedroom (analysis of HILDA data).

• Consistent with increases in median annual rent and median average mortgage payments higher than increases in median gross annual household income, ABS data show a significantly higher proportion of households were spending 30% or more of the income on housing costs in 2013, compared to 2001.

• High levels of psychological distress and the presence of disability were associated with higher odds of living in a household in housing stress (analysis of HILDA data).

• Between 2001 and 2011, ABS data indicate that while median annual rent and mortgage payments doubled, median household income only increased by 60%, eroding housing affordability.
Findings

Housing conditions

Good housing conditions are crucial for a range of positive outcomes, including health, employment and education. Although there is no standard set of measures, housing conditions typically refer to a combination of the characteristics of the dwelling and whether they meet the housing needs of the occupants; environmental factors related to the location of the dwelling; as well as tenure status (OECD 2011c). Three indicators of housing conditions can be considered to understand people’s housing situations: 1) type of tenure; 2) living space; and 3) satisfaction with dwelling and neighbourhood.

Type of tenure

Type of tenure refers to whether a household rents, owns the dwelling in which they live – outright or with a mortgage – or has some other arrangement that allows them to occupy the dwelling (ABS 2013b). As Figure 1 shows, home ownership is the most common form of tenure in Australia, although the proportion of households that own the dwelling in which they live in declined between 2001 (66.2%) and 2011 (64.3%). In parallel, the proportion of households renting privately increased from 21.6% in 2001 to 23.5% in 2011 (Figure 1).

The decline in home ownership and increase in private renting is not surprising given the current trends in the housing market. With house prices increasing (ABS 2015f), many people are unable to afford to buy a dwelling and instead turn to renting. This is reinforced by increasing rent costs (ABS 2015d) which make it even harder for people to save enough for a home deposit while still meeting current housing costs.

Figure 1: Proportion of households, by tenure type

![Proportion of households, by tenure type](image)

Source: ABS Census

Social housing typically caters to “households unable to secure or sustain appropriate housing in the private market”, either because of an affordability issue or challenging circumstances (AIHW 2010). In spite of a decline in housing affordability, the proportion of households socially renting, defined here based on data available in HILDA as a situation where individuals rent a dwelling from a government housing authority or a community or co-operative housing group, decreased between 2001 and 2011, from 5.1% to 4.5%. This fall can possibly be explained by two factors: a decline in social housing stock and a greater reliance on housing assistance schemes, particularly the Commonwealth Rent Assistance (CRA). Between 2000 and 2010, public housing stock decreased from 348,600 to 325,700. While this was partly offset by an increase in community housing stock over the same period, with
additional growth expected, a gap still remains (ABS 2011b). In parallel, the number of CRA recipients increased by 18% between 2000 and 2010 (ABS 2011b), possibly further indicating a greater reliance on the private rental market. This may be a result of the long waiting lists for social housing, forcing disadvantaged people to try to compete in the private market and increasing their risk of becoming homeless (Horne R and Adamson D, 2016).

The desire for security of tenure often associated with home ownership, and the potential economic benefits of owning a dwelling (ABS 2013d), makes it the most desired form of housing in Australia (AHURI 2015). But with Australian housing among the most expensive in the world (IMF 2015), home ownership is out of reach for a growing number of people. Analysis of HILDA data revealed that in 2013, people aged 65 years and over had significantly higher odds of living in a dwelling that is owned by a member of the household (p < 0.01, Figure 2). In parallel, people living in the most disadvantaged socio-economic areas (1st and 2nd SEIFA quintiles) had significantly lower odds (p < 0.01) of living in a dwelling that is owned, compared to people living in areas of median disadvantage (3rd SEIFA quintile). There were, however, no significant differences in the likelihood of living in a dwelling that is owned between people living the least disadvantaged areas, compared to people living in median disadvantage areas (p > 0.05). The trends in likelihood of living in a dwelling that is owned, by age group and area of socio-economic disadvantage echo the current housing situation in Australia. With house prices averaging four times average annual household disposable income (Fox and Finlay, 2012), younger people and people with lower incomes struggle to break into home ownership (Flood and Baker, 2010).

Gender and disability status were not associated with significant differences in living in a dwelling that is owned (p > 0.05). However, compared to people with a low level of psychological distress, people with a moderate, high or very high level of psychological distress were significantly less likely to be living in a dwelling that is owned (p < 0.01). Indigenous Australians, compared to non-Indigenous people, also had significantly lower odds of living in a dwelling that is owned, with a probability of 43% for Indigenous Australians, compared to 71% for non-Indigenous people. The odds of living in a dwelling that is owned were statistically significantly higher in inner regional areas, compared to major cities (p < 0.01). There were however no significant differences between the odds of living in a dwelling that is owned in outer regional (p > 0.05) and remote areas (p > 0.05), compared to major cities.
In stark contrast to home ownership is social renting. Since living in socially rented accommodation might be more a product of circumstance rather than a choice, it is important to understand who is more likely to face such a situation.

According to our analysis of HILDA data, people aged 0 to 14, and 65 and over had statistically significantly higher odds of living in a dwelling that is socially rented (p < 0.01), compared to 25 to 64 year olds in 2013 (see Figure 3). On the other hand, the odds of living in a dwelling that is socially rented for people aged 15 to 24 were not statistically different from the odds for 25 to 64 year olds. There was also no statistical difference between the odds of females compared to males of living in a dwelling that is socially rented (p > 0.05).

People with higher levels of psychological distress had statistically higher odds of living in a dwelling that is socially rented, compared to people with low levels of psychological distress (p < 0.01) with the predicted probability increasing with level of distress. People with a disability also had significantly higher odds of living in a dwelling that is socially rented compared to people with no disability (p < 0.01), with an average predicted probability of 6% for people with a disability and 3% for people with no disability.

Likewise, Indigenous Australians had a statistically higher likelihood of living in a dwelling that is socially rented, compared to non-Indigenous people (p < 0.01). In fact, the average predicted probability of living in a dwelling that is socially rented was over five times higher for Indigenous Australians (19%) compared to non-Indigenous people (3%).

Compared to people living in areas of median disadvantage, people living in the least disadvantaged socio-economic areas (4th and 5th SEIFA quintiles) were less likely to be living in a dwelling that is socially rented (p < 0.01 for both). In contrast, people living in the most socio-economically disadvantaged areas (1st SEIFA quintile) were more likely to be living in a dwelling that is socially rented (p < 0.01) compared to people living in median disadvantage areas.

Other than for inner regional areas, remoteness was not associated with statistically different odds of living in a dwelling that is socially rented, compared to major cities (p > 0.05 for both people living in outer regional and
remote areas). People living in inner regional areas had a lower likelihood of living in a dwelling that is socially rented (p < 0.01) compared to people living in major cities.

Figure 3: Predicted probability of living in a dwelling that is socially rented, total population

![Figure 3: Predicted probability of living in a dwelling that is socially rented, total population](image)

Source: Based on logistic regression from HILDA 2013 data, n = 22,904 (including 0-14s); 17,242 (15+)

Notes: 1 Result for 0-14s based on enumerated person file results, not controlling for Kessler 10 score. Other results based on responding person file results, including all control variables above.

2 Kessler 10 category of level of psychological distress

3 Socioeconomic Index for Areas: quintile of relative disadvantage

Living space

Having adequate living space relative to the number of people in the dwelling is important for many reasons. Living in overcrowded dwellings can not only affect health and wellbeing, it can also affect family relationships and children’s education (ABS 2012f, SCRGSC 2011). The ABS assesses over-crowding, as per the Canadian National Occupancy Standard (CNOS), by comparing a household’s bedroom requirement to the number of bedrooms in their current dwelling (ABS 2012g). The CNOS states that there should not be more than two people per bedroom, with some exceptions on the basis of age and sex (ABS 2012g).

Using HILDA data, it was possible to estimate the number of people per bedroom by dividing the number of people living in a dwelling by the number of bedrooms in that dwelling. Reported in Figure 4 is the proportion of people living in dwellings where there would be more than two people per bedrooms. While this is not a precise estimate of over-crowding, it gives an idea of how many people may be facing living conditions that are not appropriate to their housing needs.

As Figure 4 shows, in 2001 an estimated 1.7% of individuals were living in a dwelling with more than two people per bedroom. This proportion statistically significantly dropped to 1.4% in 2006 (p < 0.05). However, in 2011, the proportion of individuals living in a dwelling with more than two people per bedroom had increased to 2.2% with the change between 2006 and 2011 being statistically significant (p < 0.01). This proportion statistically significantly decreased again to 1.4% in 2013 (p < 0.01). The difference between 2001 and 2013 figures was also statistically significant (p < 0.05).
Analysis of 2013 HILDA data revealed that the odds of living in a dwelling with more than two people per bedroom were significantly higher (p < 0.01) for children and young people aged 0 to 14, compared to 25 to 64 year olds, with an average predicted probability of 3% and 1% respectively (see Figure 5). The odds of living in a dwelling with more than two people per bedroom were also significantly higher for Indigenous people (p < 0.01), compared to non-Indigenous people. Their average predicted probability of living in a dwelling with more than two people per bedroom was 4%, compared to 1% for non-Indigenous. It should be noted that what is considered household “crowding” can be subjective and may be related to cultural differences as well as other factors (AIHW, 2014).

No statistical differences in the likelihood of living in a dwelling with more than two people per bedroom were found relative to gender, disability status, level of psychological distress and remoteness (p > 0.05). However, there were differences when looking at areas by level of socio-economic disadvantage. Compared to people in the 3rd quintile, people in areas of the most disadvantage (1st SEIFA quintile) had significantly higher odds of living in a dwelling with more than two people per bedroom (p < 0.05). On the other hand, people in the least disadvantaged areas (5th SEIFA quintile) had significantly lower odds of living in a dwelling with more than two people per bedroom (p < 0.01), compared to people in the 3rd SEIFA quintile.
**Figure 5: Predicted probability of living in a dwelling with more than two people per bedroom, total population**

Source: Based on logistic regression from HILDA 2013 data, n = 22,916 (including 0-14s); 17,523 (15+)

Notes:
1. Result for 0-14s based on enumerated person file results, not controlling for Kessler 10 score. Other results based on responding person file results, including all control variables above.
2. Kessler 10 category of level of psychological distress

**Housing affordability and stress**

Irrespective of tenure type, housing costs – that is rent or mortgage payments – often represent one of the biggest expenses for a household (ABS 2015c). The median gross annual household income, median annual rent and median annual mortgage payments all increased between 2001 and 2011. However, the rate at which they increased were quite different; while median annual rent and mortgage payments doubled from 2001 to 2011, median household income only increased by 60%, eroding housing affordability (see Figure 6).

**Figure 6: Median gross annual household income, median annual rent and median annual mortgage payments**

Source: ABS Census
In 2001, housing costs made up 17.7% of household annual gross income (Figure 7). Housing costs decreased to 17.1% of household annual gross income in 2006. However, housing costs rose to 19.3% of household annual gross income in 2011 and 25% of household annual gross income in 2013.

Although incremental differences between the years were not statistically significant (p > 0.05), there was a generally increasing trend in the proportion of annual gross income that households spend on housing costs. This is consistent with the trends in median gross annual household income and median rent and mortgage.

Figure 7: Average proportion of gross income spent on housing costs

In many cases, decreasing housing affordability puts people at risk of housing stress. Housing stress is defined here as a situation where a household spends more than 30% of its gross income on housing costs, that is, rent or mortgage repayments (AIHW 2013a). Housing stress can affect people’s living standards by limiting the amount of income left over for non-housing expenses (ACOSS 2014). According to data from the HILDA survey, the proportion of households in housing stress significantly increased from 13.9% in 2001 to 15.6% in 2006 (p < 0.05; see Figure 8). It further increased to 19.7% in 2011 before decreasing to 16.7% in 2013, with the differences between the years being significant (p < 0.01). This was, however, still significantly higher compared to 2001 figures (p < 0.01).

Figure 8: Proportion of households spending more than 30% of gross income on housing costs
Analysis of 2013 HILDA data revealed that, compared to 25 to 64 year olds, the odds of living in a household spending more than 30% of gross income on housing costs was significantly higher for 0 to 14 year olds (p < 0.01) and significantly lower for people aged 65 and over (p < 0.01). The average predicted probability of living in a household facing housing stress was 16% for 0 to 14 year olds, 13.7% for 25 to 64 year olds and 10% for people aged 65 and above (see Figure 9).

High levels of psychological distress, the presence of disability and living in areas of relative disadvantage were also associated with higher odds of living in a household in housing stress. Compared to people with a low level of psychological distress, people with moderate, high or very high levels of psychological were significantly more likely to live in a household in housing stress (p < 0.01). People with a disability were more likely to live in a household in housing stress, compared to people with no disability (p < 0.01), with an average predicted probability of 14.9%, and 12.4% respectively. Further, compared to people living in areas of median socio-economic disadvantage (3rd SEIFA quintile), people in areas of high socio-economic disadvantage (1st and 2nd SEIFA quintiles) had higher odds of living in households facing housing stress (p < 0.05).

There were no significant differences in the likelihood of females compared to males (p > 0.05), or Indigenous people compared to non-Indigenous people (p > 0.05) of living in households in housing stress. There were also no statistical differences in the odds of living in a household in housing stress by remoteness.

Figure 9: Predicted probability of being in gross housing stress, total population

<table>
<thead>
<tr>
<th>Age</th>
<th>Gender</th>
<th>Disability status</th>
<th>Indigenous status</th>
<th>K10 - category</th>
<th>SEIFA - quintile</th>
<th>Geography</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-14</td>
<td>Male</td>
<td>No disability</td>
<td>Non-Indigenous</td>
<td>Low</td>
<td>1st most disadvantaged</td>
<td>Major cities</td>
</tr>
<tr>
<td>Age 15-24</td>
<td>Female</td>
<td>No disability</td>
<td>Indigenous</td>
<td>Low</td>
<td>2nd most disadvantaged</td>
<td>Inner regional</td>
</tr>
<tr>
<td>Age 25-64</td>
<td>Male</td>
<td>No disability</td>
<td>Non-Indigenous</td>
<td>Low</td>
<td>3rd most disadvantaged</td>
<td>Outer regional</td>
</tr>
<tr>
<td>Age 65+</td>
<td>Female</td>
<td>No disability</td>
<td>Indigenous</td>
<td>Low</td>
<td>4th most disadvantaged</td>
<td>Remote</td>
</tr>
</tbody>
</table>

Source: Based on logistic regression from HILDA 2013 data, n = 22,969 (including 0-14s); 17,274 (15+)

Notes: 1 Result for 0-14s based on enumerated person file results, not controlling for Kessler 10 score. Other results based on responding person file results, including all control variables above.

Homelessness

Homelessness in Australia is defined as a situation where an individual does not have access to appropriate alternatives, and has a current living arrangement that: involves living in an inadequate dwelling; has no tenure security; and/or has no privacy (ABS 2012g).

In 2011, the ABS estimated that 105,237 people were homeless on Census night. That is approximately 49 persons for every 10,000 persons enumerated in the Census and represents an 8% increase in the homeless rate since 2006. The majority of the increase was driven by a rise in the number of people living in ‘severely’ overcrowded dwellings,
with this group representing 39% of the homeless in 2011 – approximately 19 in 10,000 people – compared to 35% in 2006 – approximately 18 in 10,000 people. There was however a decrease in the number of people living in improvised dwellings, tents, and sleeping out between 2006 and 2011, both as a proportion of people who were homeless, as well as a rate per 10,000 of the population (ABS 2012c).

While the data captured by the ABS allows for an estimation of the magnitude of homelessness on a particular day, it does not reflect the flows in and out, or the duration of, homelessness. It also does not provide much insight into who is most likely to be homeless. Due to the nature of the HILDA data – it does not set out to estimate the homeless rate in a given year – it was not possible to develop a comprehensive measure of who is likely to be experiencing homelessness. As an alternative, we looked at the Specialist Homelessness Services (SHS) Collection data. Started in 2011, it captures information about people accessing SHS and, where possible, classifies them as either homeless or at risk (AIHW 2013b).

The profile of homelessness

In 2011-12, according to the Specialist Homelessness Services (SHS) Collection data, 30% of SHS clients were identified as homeless compared to 34% of in 2012-13 (see Table 1). This increase can partly be explained by the reduction in the number of people who were not classified as either homeless or at risk in 2012-13 compared to 2011-12, although this could also indicate an increasing homelessness problem.

Table 1: Specialist Homelessness Services Clients

<table>
<thead>
<tr>
<th></th>
<th>2011-12</th>
<th>2012-13</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>Homeless</td>
<td>70,584</td>
<td>30%</td>
</tr>
<tr>
<td>At risk</td>
<td>90,442</td>
<td>38%</td>
</tr>
<tr>
<td>Not classified</td>
<td>75,403</td>
<td>32%</td>
</tr>
<tr>
<td>Total</td>
<td>236,429</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Specialist Homelessness Services (SHS) data cubes

According to the SHS data, in 2011-12 and 2012-13, ‘housing crises’ remained the most common reason for seeking assistance, followed by ‘inadequate or inappropriate dwelling conditions’ (Figure 10). There was an increase in the proportion of people reporting those as reasons for accessing SHS between the two years: from 18.1% to 18.9% for ‘housing crises’ and from 13.9% to 16% for ‘inadequate or inappropriate dwelling conditions’. Domestic and family violence, and financial difficulties were third and fourth most common reason reported by SHS clients identified as homeless for accessing SHS. However, a lower proportion of people reported either as the main reason for accessing SHS in 2012-13 compared to 2011-12.
Figure 10: Proportion of clients identified as homeless, by main reason for accessing SHS

In both years, the proportion of SHS clients identified as homeless who were male was slightly higher than the proportion of SHS clients identified as homeless who were female. In addition, about 60% of SHS clients identified as homeless were living in major cities, and 22% had been diagnosed with a mental health issue by a professional (see Appendix C: Homelessness).

Indigenous Australians were systematically over-represented in both years. They made up over 20% of SHS clients identified as homeless, with a slight increase between 2011-12 and 2012-13 (Figure 11). While these figures only consider clients who disclosed their Indigenous status, this is still worrying given Indigenous Australians only made up 2.5% of the population according to the 2011 Census (ABS, 2012b).

Figure 11: Proportion of clients identified as homeless, by Indigenous status (excluding not stated)
The majority of SHS clients classified as homeless were aged 25 to 64, although there was an increase in the proportion of children aged 0 to 14 years (Figure 12). This was further reflected in the presenting family type. The proportion of clients who identified themselves as homeless who were a couple with child(ren) or single with child(ren) increased between 2011-12 and 2012-13. The increase in the number of children accessing homelessness services is particularly concerning because “[c]hildren’s health, educational advancement and overall well-being are deeply influenced by the quality of housing in which they live” (OHCHR n.d.). The lack of access to adequate housing tends to affect their growth and development and can have long-term consequences, not only for them as individuals but for society as a whole (OHCHR, n.d.).

Figure 12: Proportion of clients identified as homeless, by age group

![Proportion of clients identified as homeless, by age group](image)

Source: Specialist Homelessness Services (SHS) datacubes

Figure 13: Proportion of clients identified as homeless, by presenting family type

![Proportion of clients identified as homeless, by presenting family type](image)

Source: Specialist Homelessness Services (SHS) datacubes
So what?
We are:

- Increasingly experiencing housing stress, as a result of housing costs (for renters and owners) increasing at a higher rate than income
- Experiencing a decrease in social housing stock
- Increasingly reliant on housing assistant schemes for private rentals

Rates of homelessness are increasing, especially for some population groups including:

- Indigenous people
- Young people

We need to think more about:

- Addressing housing affordability
- Increasing the availability of social housing.
REFERENCES


AIHW 2013. Australia’s health 2013. Canberra: AIHW.


AUSTRALIAN BUREAU OF STATISTICS 2012b. Census of Population and Housing - Counts of Aboriginal and Torres Strait Islander Australians, 2011


AUSTRALIAN BUREAU OF STATISTICS 2012g. Information paper: Methodology for estimating homelessness from the census of population and housing.


AUSTRALIAN BUREAU OF STATISTICS 2015e. Labour Force, Australia Cat. No. 6202.0


AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE 2013a. Housing assistance in Australia 2013, cat. no. HOU 271. Canberra: AIHW.

AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE 2013b. Specialist Homelessness Services 2012-13, cat. no. HOU 273. Canberra: AIHW.


AUSTRALIAN SOCIAL INCLUSION BOARD 2012a. How is Australia faring. Social inclusion in Australia. 2nd ed.


CHINCHILLA, M. n.d. Social cohesion and community safety in new and redeveloped mixed income housing. Written on Behalf of the San Francisco Department of Public Health’s Program on Health Equity and Sustainability.


DRUG AND ALCOHOL CLINICAL ADVISORY SERVICE n.d. The Kessler 10 - Information for health professionals. *Screening and Assessment*. DACAS.


FLATAU, P., THIELKING, M., MACKENZIE, D., STEEN, A., BAUSKIS, A. & NOLAN, K. 2015. The Cost of Youth Homelessness in Australia Study - Snapshot Report 1: The Australian Youth Homelessness Experience. Australia: Swinburne University’s Institute for Social Research; the University of Western Australia and Charles Sturt University, in partnership with The Salvation Army, Mission Australia and Anglicare NSW South, NSW West & ACT.


HORNE R & ADAMSON D 2016. Our cities will stop working without a decent national housing policy. *The Conversation*.

HOUSEHOLD INCOME AND LABOUR DYNAMICS IN AUSTRALIA SURVEY 2013. Wave 13M Interview Showcards. *HILDA Survey Instruments: Wave 13*. The University of Melbourne


MUIR, K., MARJOLIN, A. & ADAMS, S. 2015. Eight Years on the Fringe: What has it meant to be severely or fully financially excluded in Australia? Sydney, Australia: Centre for Social Impact for the National Australia Bank.


ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT 2010. Sickness, disability and work: Breaking the barriers - A synthesis of findings across OECD countries. OECD.

ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT 2011a. Education at a glance. OECD.


ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT 2016a. Poverty rate (indicator). OECD.


STANWICK, J., LU, T., RITTIE, T. & CIRCELLI, M. 2014. How young people are faring in the transition from school to work. prepared by the National Centre for Vocational Education Research for the Foundation for Young Australians.


