

THE COST OF YOUTH HOMELESSNESS IN AUSTRALIA STUDY

Snapshot Report 1

THE AUSTRALIAN YOUTH HOMELESS EXPERIENCE

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BACKGROUND

"Scariest thing that has happened to me was being homeless even for a short time"

—CYHA PARTICIPANT, AGED 24

There are too many Australians who are homeless, living without shelter or a place to call home. Young people in particular are impacted by homelessness making up some 42 per cent of the Australian homeless population. It is estimated that approximately 44,000 young Australians under the age of 25 are homeless, but the actual number is likely to be higher (ABS, 2011).

In this study, homelessness is defined as 'a state of non-permanent accommodation' and includes such outcomes as sleeping rough and living on the streets, in parks, cars and makeshift dwellings; staying in crisis or transitional accommodation; temporarily living or couch surfing with other households because they are running away from home and need a place to stay or have no accommodation of their own; staying in very cheap hotels or motels as a form of accommodation; and living in boarding houses.

Homelessness is one of the most severe forms of disadvantage and social exclusion that any person can experience. It is also a frightening and traumatic experience, particularly for children and young people just beginning to make their own way in life. It makes everyday activities like attending secondary school, engaging in further training, or getting a job, difficult in the extreme. Homeless young people often experience mental and physical health problems and experience much higher rates of disconnection from family and friends. The personal and community costs of homelessness are very high.

The absence of safe and secure accommodation, compounded in many cases by poor health, difficult financial circumstances and social isolation, has direct adverse effects on young people's health and wellbeing. The choices many young homeless people make, in order to cope or survive the homeless experience, put them at further risk of harm. We need to know more about these impacts, about the experiences and lives of young people and about the effectiveness and cost-effectiveness of homelessness programs if we are to better respond to the needs of young people.

The Cost of Youth Homelessness in Australia research study attempts to understand both the experience and impact of homelessness on young people and its personal and societal costs. It is the first national youth homelessness study of its kind in Australia. Close to 400 young Australians were surveyed over three consecutive years. The majority of those surveyed (close to 300) were either homeless or at very high risk of homelessness, in an unstable housing situation and receiving support from homeless services at the time of first interview.

This study seeks to build the limited evidence base on these issues and better inform policy makers and agencies about what resources are needed to ensure homeless young people are adequately supported out of homelessness and into safe and secure independent accommodation. The results reveal that the difficulties faced by young homeless people and those at risk of homelessness are particularly disturbing.

The Cost of Youth Homelessness in Australia Study Snapshot Report 1: The Australian Youth Homeless Experience provides selected findings from the first wave of data collection and is the first of several reports on the findings from the Cost of Youth Homelessness in Australia study. It provides a brief account of the depth of problems that homeless young Australians experience. A second report in the series will examine the economic costs of homelessness and will be launched in mid-2015.

"Being homeless is one of the worst experiences ever"

CYHA participant, aged 22

KEY MESSAGES

The Cost of Youth Homelessness in Australia Study Snapshot Report 1: *The Australian Youth Homeless Experience* provides selected findings from the first wave of data collection. Some key messages can be reported from this data:

- 1. OVER HALF OF YOUNG PEOPLE UNDER THE AGE OF 25 RECEIVING SUPPORT FROM HOMELESS SERVICES SLEPT ROUGH AT LEAST ONCE PRIOR TO TURNING 18. THE MOST DOMINANT FORM OF HOMELESSNESS AMONG YOUNG PEOPLE IS COUCH-SURFING.**
2. NEARLY TWO-THIRDS (63%) OF THE HOMELESS YOUTH WHO WERE SURVEYED HAD BEEN PLACED IN SOME FORM OF OUT-OF-HOME CARE BY THE TIME THAT THEY HAD TURNED 18.
- 3. OVER A THIRD (39%) OF THE HOMELESS YOUTH SURVEYED REPORTED POLICE COMING TO THEIR HOME BECAUSE OF VIOLENCE BETWEEN PARENTS ON ONE OR MORE OCCASIONS, WITH 14% EXPERIENCING POLICE COMING TO THEIR HOUSE MORE THAN 10 TIMES.**
4. THE PREVALENCE OF MENTAL HEALTH CONDITIONS WAS HIGH AMONG HOMELESS YOUTH, WITH 53% REPORTING THAT THEY HAD BEEN DIAGNOSED WITH AT LEAST ONE MENTAL HEALTH CONDITION IN THEIR LIFETIME. MOOD DISORDERS AND ANXIETY DISORDERS WERE THE MOST PREVALENT DISORDERS AMONG HOMELESS YOUTH.
- 5. HIGH LEVELS OF PSYCHOLOGICAL DISTRESS WERE EVIDENT AMONG HOMELESS YOUTH AND QUALITY OF LIFE OUTCOMES WERE CONSIDERABLY LOWER THAN FOR THE GENERAL POPULATION.**
6. THE INCIDENCE OF REPORTED NON-SUICIDAL SELF INJURY AND ATTEMPTED SUICIDE WAS MUCH HIGHER AMONG HOMELESS YOUTH THAN YOUNG JOB-SEEKERS AND YOUNG PEOPLE GENERALLY.
- 7. FIFTY-TWO PER CENT OF HOMELESS YOUTH WERE UNEMPLOYED AT THE TIME OF INTERVIEW, THAT IS, THEY WERE WITHOUT WORK YET REPORTED THAT THEY WERE LOOKING FOR WORK AND AVAILABLE TO START WORK.**
8. A LACK OF PERMANENT ACCOMMODATION AND EXPERIENCING POOR HEALTH OR HAVING A DISABILITY WAS IDENTIFIED BY THE HOMELESS SUPPORT GROUP AS SIGNIFICANTLY AFFECTING THEIR ABILITY TO FIND WORK.

"I am able to pay my rent and afford food. Without the services, I may have ended up homeless, or having to make other sacrifices I didn't want to make"

– CYHA participant, aged 23

THE SAMPLE

The Cost of Youth Homelessness in Australia study sample is made up of two comparison groups: one group comprising of homeless and at risk of homelessness young people; and the other group comprising disadvantaged, but not homeless, young people. The latter being young people who were seeking some type of employment (job-seekers). At the time of the first interview, respondents in the homeless group were receiving support from a specialist homelessness service or a Reconnect service while those in the job-seeker category were receiving support from a Job Services Australia agency.

The *Cost of Youth Homelessness in Australia Survey* is comprised of a series of questions across a broad range of fields, and was administered by way of interview. Data was gathered about respondents' backgrounds, their family relationships, health and overall wellbeing, substance use, early homelessness experiences, their childhood, their current income, education and labour market status and use of health and other services. The survey data have been used to calculate the personal, social and economic costs young homeless people experience and society bears.

Data collection occurred in three waves from 2012-2015 in Victoria, Western Australia, New South Wales, the Australian Capital Territory, South Australia and Queensland (See table 1 for a breakdown of responses). With the exception of the ACT, each of these jurisdictions also had representation from young job-seekers.

PROFILE OF STUDY PARTICIPANTS

The first wave of the *Cost of Youth Homelessness in Australia Survey* was administered during 2012 to 298 young people who were, at the time of interviewing, receiving support from a Specialist Homelessness Service or a Reconnect service and to 96 job-seeking young people receiving support from Job Services Australia. A profile of participants in the study is presented below in Table 1.

Table 1: Gender, age, background and residence of sample

		Homeless young people	Job-seeking young people
Number of respondents		298	96
Gender	Male	39%	56%
	Female	61%	44%
Age	Range	13-25	16-25
	Median	18	20
	Mean	18.57	20.56
Background	ATSI	12%	7%
	Australian born	85%	87%
State/Territory	NSW	25%	9%
	WA	20%	21%
	QLD	7%	34%
	VIC	25%	24%
	SA	20%	12%
	ACT	4%	0%

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

Participants in the homeless youth sample were aged 13 to 25 years, with the median age being 18. More than half of the homeless respondents (61%) were female. The majority of the homeless group (85%) were Australian-born, with 12% identifying as Aboriginal or Torres Strait Islander (ATSI). A significant number of the homeless group had given birth to or fathered at least one child (20.5 per cent) as compared 8.4 per cent of the job seeker group. In contrast to the homeless group, the median age for young job-seekers was 20, and a higher proportion of the sub-sample were men (56%) as compared with the homeless group.

EDUCATION

Homeless youth aged 15 to 25 are more likely than young people generally to leave school early. This leaves them in a vulnerable position in terms of their entry to the labour market.

We found that only one third (31%) of homeless young people over the age of 18 at the time of first being interviewed in the study, had completed Year 12. In comparison, 57% of the job-seeking group over the age of 18 had finished Year 12.

More encouragingly, post-school, 66% of the homeless sample over the age of 18 had completed some form of educational or training qualification, compared with 75% of job-seekers. For those homeless youth who had completed year 12 and were over the age of 18, 44% completed a diploma or certificate and 10% completed a trade qualification.

Although our study points to high rates of early school leaving among young homeless people aged 18 or over, we also found that two-thirds of current school-aged homeless or at risk of homeless people (those 18 and under) reported that they were still at school or at TAFE or University at the time of completing the first wave of the Survey. The strain that homelessness places upon day-to-day activities including on continuing secondary education as well as the high rate of early school leaving among homeless youth generally may have suggested a much lower rate of school participation among current, school-aged homeless people.

We attribute higher than expected rates of school participation in our sample of school-aged young people not only to their resilience but also to the support to stay at school received by homeless youth from agencies assisting young homeless people and to schools. Recall that all homeless people who were surveyed in the first wave of the study were receiving support from community support agencies. Programs to assist homeless young people stay at school and gain educational and trade qualifications are critical to giving young people a chance to gain employment and progress through the housing market.

EMPLOYMENT

Table 2 presents a profile of the labour market position of both the homeless and job-seeker groups in our study.

Table 2: Labour force status for homeless and job-seeking young people

		Homeless young people		Job-seeking young people	
		N	%	N	%
Do you currently have a job?	Yes full time paid	7	2	2	2
	Yes part time paid	22	8	16	17
	Yes in family business/ farm unpaid	0	0	1	1
	No	266	90	75	80
For those who did not currently have a job					
Are you currently actively looking for work?	Yes	161	61	70	93
	No	103	39	5	7
Are you currently available to work?	Yes	182	69	67	89
	No	81	31	8	11
Labour force status					
Labour force status	Employed	29	10	19	20
	Unemployed (Labour Force)	152 (181)	52	65 (84)	69
	Not in the labour force	112	38	10	11
	Total	293	100	94	100
Labour Force Participation rate					
(Labour force/Population)			61	89	
Unemployment rate					
(Unemployed/Labour Force *100)			84	77	

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

We divided respondents into the three labour force categories: 1) those employed; 2) the unemployed (who together make up the so-called 'labour force') and, 3) those not in the labour force. To be employed a person needs to have worked one hour or more in the reference period. Unemployed people are those who are not employed, are actively seeking work and are available to start work. The not-in-the-labour force category includes all who are neither employed nor unemployed.

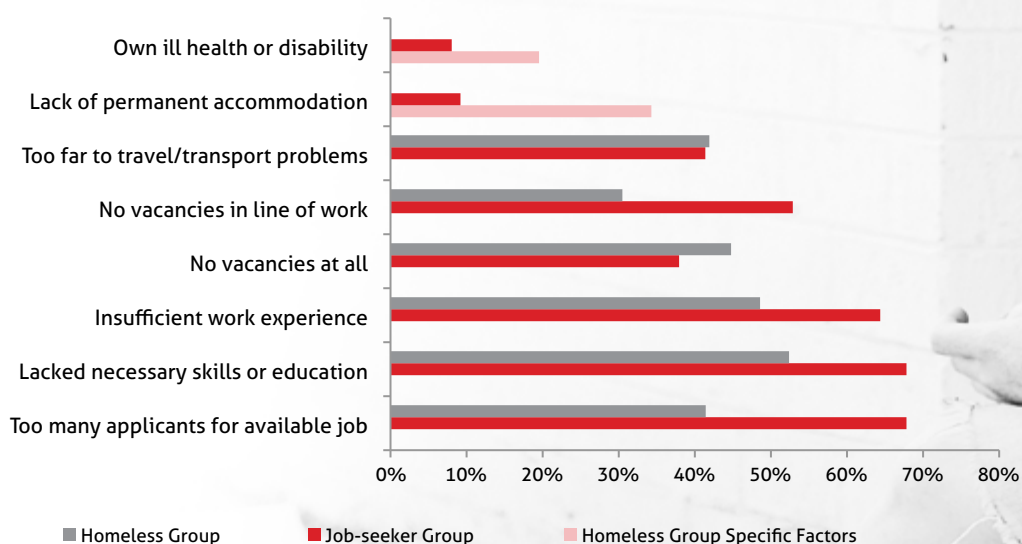
Unemployment is extremely high among homeless young people.

The unemployment rate (unemployed people expressed as a percentage of the labour force) among homeless youth in the sample was a staggering 84%. Nearly one-quarter (22%) of homeless young people have never had a paid job in their lifetime. This compares with only six per cent of young job-seekers who had never been in paid employment. The findings from our sample of young people differ significantly from the general youth population where the unemployment rate among young people aged 15 to 24 years was 14% in 2014 (ABS, 2014).

Over one third (39%) of homeless youth in the study were classified as not in the labour force (did not currently have a job, and were not actively looking for work or available to start work). For those homeless youth not in the labour force, significant numbers were currently engaged in other activities; 51% were currently continuing their education, and 29% had children in their care (76% of the young homeless respondents in our sample not in the labour force are female). Mental health problems in this group were significant with 60% of the group reporting diagnosis of a mental health condition in their lifetime.

Amongst both the homeless youth and young job-seeker groups, a high proportion reported looking for work in their lifetime (88% and 98% respectively) and of having experienced difficulties in their endeavours to find work (82% and 95% respectively, see Figure 1). Both groups identified the absence of necessary skills or education as one of the main barriers to finding work. Overall, job-seekers identified a broader range of problems with finding work than the homeless youth (see Figure 1). However, a 'lack of permanent accommodation', and 'own poor health or disability', were identified by young homeless people as circumstances that affected their capacity to find work at rates significantly higher than young job-seekers. These two factors underline the key differences in the difficulties faced by homeless and job-seeking youth in finding employment.

Figure 1: Types of difficulties faced when looking for work for homeless and job-seeking young people



Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

INCOME

Consistent with low employment rates, few respondents reported that they received income from wages or salary (see Figure 2).

The vast majority of young homeless people are on income support arrangements.

Youth Allowance was the major source of income for both the homeless and job-seeker groups, with more than half in each cohort indicating they receive this payment. Newstart Allowance was received by around one in three (34%) job-seeking young people, with few other sources of government income reported by this group. Close to one third of homeless youth (31%) were receiving income from Newstart Allowance, the Parenting Payment or the Disability Support Pension. The median fortnightly before tax income received solely from government pensions or benefits was \$407.50 for homeless youth.

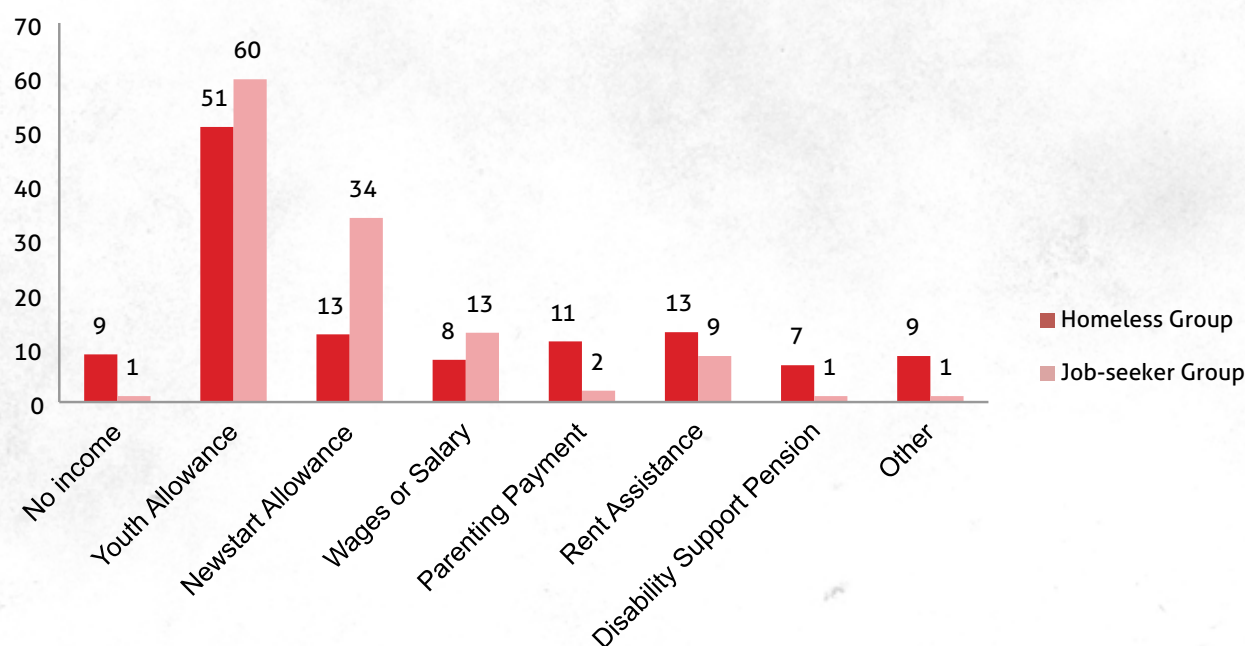
Receipt of Disability Support Pension (DSP) among homeless youth (7%) was significantly higher than the job-seeker group (1%), but far lower than that for adult homeless people, where 39% of adult homeless men and 17% of adult homeless women accessed DSP in one recent study (Zaretsky et al., 2013). Eleven per cent of homeless youth reported receiving the Parenting Payment as their current source of income, compared to only 2% of job-seekers. For the homeless group, this represents 54% of those who have children.

Close to one in ten (9%) homeless youth were not receiving any income at all at the time of the survey placing them in an extreme financial position.

"Where I'm living right now the rent is really high, because I'm not working sometimes I don't have enough money for nappies and milk. It's very hard to find work right now"

– CYHA Participant, aged 23

Figure 2: Current sources of income for homeless and job-seeking young people



Source: The Costs of Youth Homelessness in Australia Survey - Wave 1.

EARLY HOMELESSNESS EXPERIENCES

Just over half of the homeless youth reported first having slept rough prior to turning 18 (see Figure 3).

Fifty-two percent of the homeless group reported that they had slept rough (in parks, on the streets etc.) prior to turning 18. Early onset rough sleeping was also high in our job-seeker group with 18% of job-seekers reporting having slept rough at least once prior to turning 18. This latter finding illustrates the close connection and spillover between unemployment and homelessness and the need for different service systems to be well-integrated (Flatau et al. 2013b). Our results are in line with an earlier study on intergenerational homelessness (Flatau et al. 2013a) indicating that homelessness is present for many homeless people from an early age and is often a precursor for long periods of adult homelessness.

Targeted interventions in youth-based homelessness programs will act to end the homelessness cycle and will prevent homelessness progressing to the next generation.

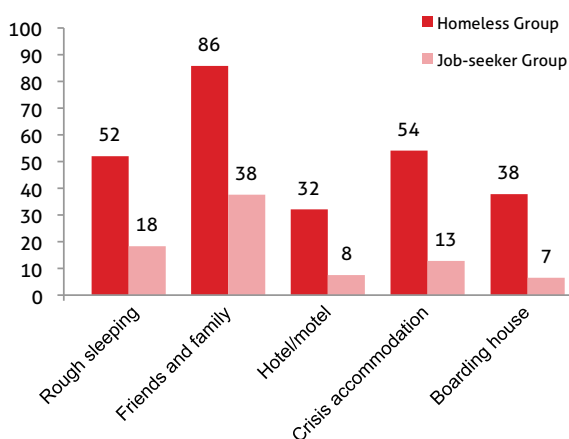
Couch-surfing is the dominant form of homelessness prior to the age of 18 with 86% of the homeless group reporting that they had stayed with (non-immediate) family and friends as they had nowhere else to live prior to the age of 18. More than one-third of job-seekers (38%) stayed with family and friends at some point prior to the age of 18 as they had nowhere else to live.

Figure 4 presents estimates of the number of times homeless youth experienced different forms of homelessness under the age of 18. Multiple spells of staying with friends and family was common, with 62% of the homeless group staying with friends and family at least a few times before turning 18.

“There needs to be more available units for homeless youths to be able to live and pay subsidised rent and bills”

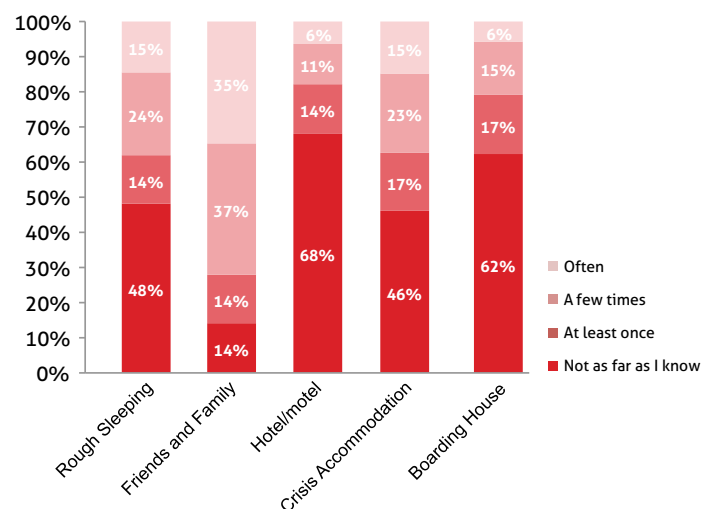
– CYHA participant, aged 18

Figure 3: Forms of homelessness experienced before turning 18 years of age for homeless and job-seeking young people



Source: The Costs of Youth Homelessness in Australia Survey - Wave 1.

Figure 4: Frequency of different homelessness circumstances before age 18 for homeless youth



Source: The Costs of Youth Homelessness in Australia Survey - Wave 1.

OUT OF HOME CARE AND VIOLENCE IN THE HOME

Two risk factors associated with homelessness among young people are out-of-home care arrangements, and experiencing violence in the household. In our study, young people were asked about their early lives including the incidence of out-of-home care arrangements and violence in the parental home. Out-of-home care refers to foster care, kinship care (where the caregiver is a family member or a person with a pre-existing relationship with the child), or residential care (in a residential building with paid staff).

Our study confirms the very strong relationship between homelessness, foster care and other out-of-home care arrangements.

Two thirds of the homeless group in the study reported that they had been placed in some form of out-of-home care by the time that they turned 18 (63%), a significantly higher number than that of the job-seeking group (18%). To give one reference point to these figures, in June 2013 there were 40,459 children in out-of-home care, equating to less than 1 per cent (0.78%) of all Australian children (AIHW, 2014).

Of the homeless youth who were placed in out-of-home care, 63% had been placed in residential care, 45% in kinship care and 33% in foster care. Homeless youth were first placed in out-of-home care at a median age of 14.

To further explore the experiences of early home life among participants in the study, respondents were asked the following two questions: 1) "As far as you are aware, did the police ever come to your home because of violence (either verbal or physical) between your parents/carers?" and 2) "As far as you are aware, did you ever have to leave home (even if just for a few hours) because of violence between your parents/carers?".

Thirty-nine per cent of homeless youth reported police coming to their home because of violence between parents on one or more occasions, with 14% experiencing police coming to their house more than 10 times.

More than half (56%) of the homeless youth sample had to leave home because of violence between parents or guardians on at least one occasion. Of those who ran away from home because of violence between parents/carers, the median age of their first experience leaving home was only 10.



Approximately one in six young homeless people reported running away from home more than 10 times. Around one-quarter of those who ran away from home due to violence between parents went to relatives, 32% went to friends while 20% went to the street or park (slept rough). The latter finding underlines the strong relationship between violence in the family home and early onset rough sleeping.

Young people were also asked in the study about the type of family violence experienced (see Table 3). Around 90% of homeless young people reported that they had witnessed violence between family members at home in one form or another, including both their parents or carers arguing; criticising or calling the other person names; threatening to physically hurt the other person; hearing or seeing a parent or carer throw, hit, kick or smash something in front of the other person; threaten the other person with a weapon; and/or physically hurt or fight with the other person. In terms of the latter forms of extreme violence, a significant number of respondents reported that they witnessed extreme forms of physical violence in the parental home often or all of the time. The consistency of violence and aggression in the early lives of those who are homeless suggests, once again, that early lifetime experiences play a key role in determining whether or not homelessness will be experienced later in life.

Table 3: Experiences of conflict between parents/guardians, for homeless and job-seeking young people

Type of conflict experienced		Homeless young people		Job-seeking young people	
		Indigenous	Non Indigenous	Indigenous	Non Indigenous
Argue with the other person	Never	23	12	0	17
	Rarely	9	14	14	14
	Sometimes	29	22	14	32
	Quite a lot	11	21	57	24
	All the time	26	23	0	9
Criticise or call the other person names	Never	23	20	0	24
	Rarely	14	10	0	21
	Sometimes	20	20	43	18
	Quite a lot	3	15	43	25
	All the time	37	26	0	8
Threaten to physically hurt the other person	Never	44	41	57	64
	Rarely	9	12	14	8
	Sometimes	15	12	0	14
	Quite a lot	3	11	14	8
	All the time	27	15	0	1
Throw, hit, kick or smash something in front of the other person	Never	40	37	43	55
	Rarely	14	10	29	13
	Sometimes	17	18	0	13
	Quite a lot	3	10	14	11
	All the time	23	17	0	4
Threaten the other person with a weapon	Never	46	60	71	79
	Rarely	14	11	0	7
	Sometimes	14	10	0	4
	Quite a lot	9	3	14	5
	All the time	14	8	0	1
Physically hurt or fight with the other person	Never	51	48	71	67
	Rarely	3	12	0	12
	Sometimes	23	13	0	11
	Quite a lot	6	8	14	5
	All the time	14	10	0	1
All types	Not Applicable	3	8	14	5

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

***Note: in all categories, a minority responded with not applicable. This may be due to the respondent growing up in a single parent household or due to the respondent not remembering, especially in cases where parents separated while the respondent was very young.

CONTACT WITH FAMILY

Participants in our study were asked if they have had face to face contact with their parents/guardians in the past 3 months, and if so, the frequency of this contact. Two-thirds (67%) of young homeless people had face to face contact with their female parent or guardian in the past 3 months, and 42% had contact with their male parent or guardian. As a point of comparison, 83% and 57% of young job-seekers had contact with their female and male parent or guardian respectively.

In regard to the frequency of contact, homeless youth had very low rates of current contact with parents/guardians compared with young job-seekers, as shown in Table 4. Only 14% of the homeless youth sample (who have seen their parents at least once in the past 3 months) saw their female parent or guardian daily. In comparison, 63% of job-seekers saw their female parent or guardian daily. This reflects in large part of course the fact that that more job seekers lived at home than homeless people.

Table 4: Frequency of contact with male and female parents/guardians, for homeless and job-seeking young people

How often did you have face to face contact with your parent or guardian		Homeless young people (%)	Job-seeking young people (%)
Female parent or guardian	Daily	14	63
	More days than not in a week	6	1
	A couple of days a week	12	9
	Weekly	19	8
	Fortnightly	15	6
	Once a month	20	11
	Once in three months	15	1
Male parent or guardian	Daily	14	48
	More days than not in a week	5	2
	A couple of days a week	11	7
	Weekly	15	7
	Fortnightly	11	13
	Once a month	25	11
	Once in three months	19	11

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*



HEALTH AND WELLBEING AMONG HOMELESS YOUNG PEOPLE

LONG-STANDING HEALTH CONDITION

The prevalence of long-standing health problems is very high among homeless youth with around a third of respondents reporting having a long-standing physical health condition.

The physical health conditions of the homeless group varied greatly and encompassed a large range of conditions, including: 3rd degree burns, asthma, epilepsy, heart murmur, migraines, and shoulder/back injuries.

EXERCISE AND SPORT

The homeless group are very diverse in in terms of sport participation in sport and exercise rates, but overall, exhibit much lower rates of sport and exercise than other young people.

Nearly a third of homeless youth in our study reported never exercising or playing sport.

At the same time, there were some very active homeless young people in our study. One quarter (26%) of homeless youth engaged in physical activity every day and 18% reported exercising or playing sport two or more times a week. Over a third (39%) of young job-seekers exercised or played sport every day and 32% reported exercising or playing sport two or more times per week.

National Physical Activity Guidelines recommend at least '60 minutes of moderate to vigorous physical activity ...every day of the week for children aged 5–17 years. For those aged 18 years and over, the guidelines recommend at least 30 minutes of moderate intensity physical activity on most (preferably all) days of the week' (AIHW 2011, p 13). In the general population aged 15-24 around 44% met these guidelines (AIHW 2011), while our survey results suggest far fewer homeless young people do so.

MENTAL HEALTH

The prevalence of mental health conditions was high in the homeless youth sample, with 53% reporting that they had been diagnosed with at least one mental health condition in their lifetime.

Rates of reported mental health conditions were higher among young women, where 55% reported diagnosis of at least one mental health condition in their lifetime (compared to 50% of young men). These rates of diagnosed mental illness were lower than that for adult homeless groups, where a recent study found over 80% Australian homeless adults reported at least one diagnosed mental health condition (Zaretsky et al., 2013; see also Flatau et al. 2012 and Spicer et al. 2015).

Although rates of diagnosed mental illness for the job seeker group are lower than for homeless youth, they were still higher than the general Australian youth population. Among young people aged 16-24 years in Australia, 26% were assessed as meeting the criteria for diagnosis of a lifetime prevalence of a mental health disorder and experiencing symptoms in the previous 12 months in the 2007 National Survey of Mental Health and Wellbeing (AIHW, 2011).

Table 5: Have you ever been diagnosed by a medical practitioner with at least one mental health problem in your lifetime?

	Homeless young people (%)		Job-seeking young people (%)	
	Male	Female	Male	Female
Diagnosed with at least one mental health condition	50	55	27	42

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

Mood disorders and anxiety disorders were the most prevalent disorders among both the homeless and job-seeker respondent groups (see Table 6). Young homeless women report the highest rate of diagnosed mental health disorders with close to half (43%) identifying that they had been diagnosed with an anxiety disorder in their lifetime. The prevalence of anxiety disorders was much higher in both groups than in the general population. Mood disorders were also more prevalent among homeless young women than all other groups (36%). Surprisingly, reported rates of substance use disorder were lower than that of the general population although quite different methods for assessing prevalence may explain this result in large part. In our study lifetime prevalence of mental health disorders is based on self-report of diagnosis by a practitioner as compared with the general population estimates derived from the 2007 National Survey of Mental Health and Wellbeing study in which survey responses are used to determine whether the criteria for diagnosis had been met. For young people it is likely that survey responses are likely to provide a higher prevalence estimate for a substance use disorder than medical practitioner diagnosis. Apparently low rates of substance use disorders may reflect under-reporting of substance use disorder diagnosis by young people receiving support from services as they may be afraid that revealing current drug and alcohol use may limit their ability to access accommodation services.

Table 6: Proportion reporting a diagnosis of a mental health condition by a mental health practitioner in their lifetime

	Homeless young people (%)		Job-seeking young people (%)		General population (2007) (16-24 yrs) (%) ^(a)	
	Male	Female	Male	Female	Male	Female
Mood disorder	26	36	9	29	-	-
<i>Affective disorders</i>					4	8
Anxiety disorder	25	43	15	32	8	14
Personality disorder	8	10	2	5	-	-
Psychotic disorder	8	6	0	0	-	-
Dissociative disorder	3	2	0	0	-	-
Substance use disorder	12	7	6	5	16	10
Eating disorder	4	7	0	0	-	-
Impulse-control disorder	8	3	2	0	-	-

Source: *The Costs of Youth Homelessness in Australia Survey and AIHW (2011)*.

(a) Results for the general population aged 16-24 are based on the 2007 National Survey of Mental Health and Wellbeing evidence relating to the meeting of criteria for diagnosis of a lifetime mental health disorder and displaying symptoms over the 12 months prior to interview.

Of those homeless youth who had been diagnosed with a mental health condition in their lifetime, less than half (44%) had been prescribed medication. A slightly higher proportion of young homeless women had been prescribed medication than young homeless men. Women were also more likely to be taking medication for their mental health condition at the time of being questioned (43%), while only 1 in 5 (19%) homeless young men were currently taking medication for a mental health condition. Similar trends are observed when looking at those who had received support in the past 12 months from a medical practitioner, or some form of mental health service or specialist. The proportion of young homeless women who had received such support was double (48%) the proportion of men (24%) who had received similar support.

Young job-seeking women also reported higher rates of prescription of medication, continued use of prescribed medication and use of support from a medical practitioner or mental health service than their male counterparts.

Table 7: Medication and medical support for a mental health condition(s)

	Homeless young people (%)		Job-seeking young people (%)	
	Male	Female	Male	Female
Prescribed any medication for a mental health condition	41	46	19	29
Still taking medication for this mental health problem	19	43	40	50
Received support from a medical practitioner, a mental health service or a mental health specialist in relation to a mental health problem in the past 12 months	24	48	17	34

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1*.

NON-SUICIDAL SELF-INJURY AND SUICIDE ATTEMPTS

Respondents were asked to reflect on the last six months of their life and identify whether they had harmed themselves without the intention of killing themselves (such as scratching, cutting, burning), or whether they had attempted suicide or deliberately hurt themselves in a way that may have potentially harmed or killed them.

The incidence of reported self-harm and attempted suicide is very high among homeless youth particularly among young women.

One in five (20%) homeless young women had attempted suicide in the past six months compared to around one in ten (12%) young men. More than one in four (28%) young homeless women engage in non-suicidal self-injury behaviours compared with 17% of young men.

The incidence of non-suicidal self-injury and attempted suicide is lower among the young job-seekers than young homeless people but as with the findings for homeless youth prevalence is higher among young women than young men in the job-seeker group.

Table 8: Self-harm and attempted suicide in the last six months

	Homeless young people (%)		Job-seeking young people (%)	
	Male	Female	Male	Female
Hurt themselves without the intention of committing suicide (in the last 6 months)	17	28	8	13
Attempted suicide or deliberately hurt themselves in a way that may have potentially harmed or killed them (in the last 6 months)	13	20	2	5

Source: *The Costs of Youth Homelessness in Australia Survey - Wave 1.*

Further analysis was conducted to investigate some of the drivers of attempted suicide. Across both women and men, the incidence of attempted suicide among the homeless group was 17%. Among those who felt that they were not currently living in safe and secure accommodation, the attempted suicide rate was higher at 27%. Those homeless people currently being supported in safe and secure accommodation reported lower rates of attempted suicide. Among those who suffered from a long standing physical health condition, 25% had attempted suicide. The attempted suicide rates for those who had experienced primary homelessness as a minor and in those whose parents have divorced or separated were 24% and 23% respectively.

Just over half (55%) of homeless youth who had attempted suicide in the past six months had not received any counselling or professional support for this.

For those who had attempted suicide in the past six months and had received support for this, 59% reported that the counselling or support helped them to either stop having or cope effectively with suicidal thoughts.

For the group of homeless youth who had attempted suicide in the past six months, almost 8 in 10 (78%) reported diagnosis of a mental illness in their lifetime. Three quarters (74%) had been prescribed medication for a mental illness and 44% were still taking medication for this mental health problem. Additionally, three quarters (74%) had received support from a medical practitioner in the past 12 months.

PSYCHOLOGICAL DISTRESS

The Kessler 10 (K10) is a 10 question self-report measure of non-specific psychological distress based on questions about the level of nervousness, agitation, psychological fatigue and depression experienced in the most recent 4 week period. In this study, the measure was utilised to measure the extent of psychological distress experienced by participants in the month leading up to the survey.

The levels of distress experienced by participants varied greatly between the homeless and job seeker groups. **The proportion of the homeless group who experienced very high or high distress was 57%, compared to 35% of the job-seeker group.** In contrast to this, only 12% of male and 19% of female Australians aged 18-24 fell into the category of experiencing high or very high levels of distress (AIHW, 2011). However, the levels of psychological distress among the homeless group was similar to levels of psychological distress recorded in the Australian adult homeless population in a recent homelessness study, where 62% recorded high or very high levels of psychological distress (Zaretsky et al., 2013; see also Flatau et al. 2012 and Spicer et al. 2015). Furthermore, there is a notable divide between the genders within the two groups in terms of levels of distress. In the homeless group, 51% of males experienced very high or high distress, in comparison to 61% of the homeless female group. In comparison, 31% of males and 41% of females in the employment group experienced this level of distress.

Table 8: Levels of Psychological Distress (Kessler 10)

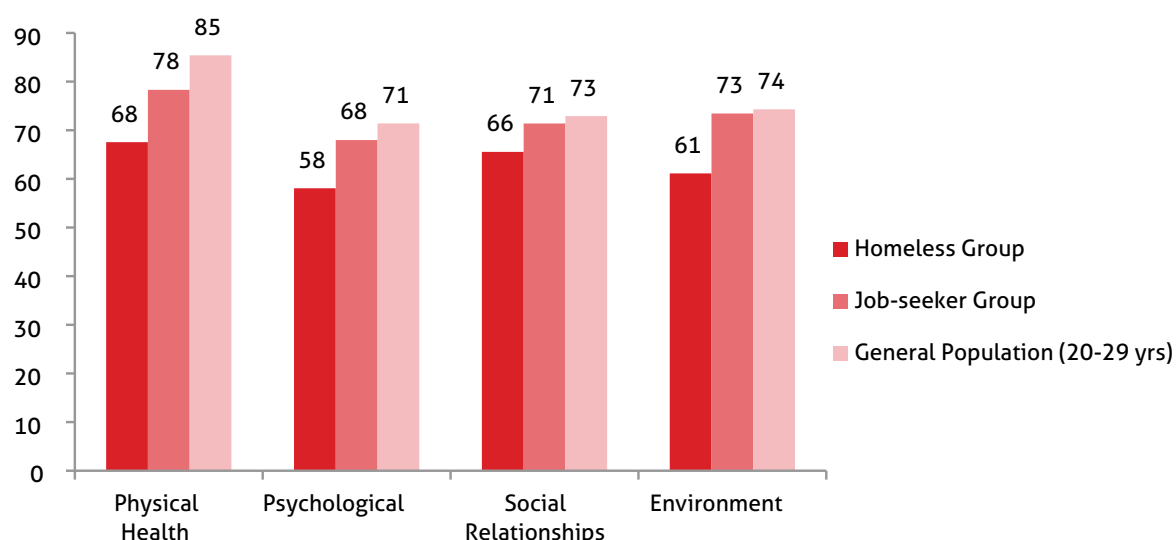
	Homeless young people (%)		Job-seeking young people (%)		General population (2007) (18-24 yrs) (%)	
	Male	Female	Male	Female	Male	Female
Low	28	17	41	24	60	49
Moderate	21	22	28	35	27	32
High or very high	51	61	31	41	12	19

Source: *The Costs of Youth Homelessness in Australia Survey and AIHW (2011).*

QUALITY OF LIFE

Respondents completed the World Health Organisation's WHOQoL-BREF survey as part of the Cost of Youth Homelessness in Australia Survey. Figure 5 presents mean scores generated by the survey from the two cohorts, as well as results from the 20-29 year old age group in the general population (Hawthorne et al., 2006). As evident in the results below, job-seeking young people corresponded reasonably well to the general population across all aspects of quality of life, while homeless youth fell far below both groups on all identified Quality of Life dimensions. This finding is consistent with those for the adult homeless population.

Figure 5: Average domain scores on the WHOQoL instrument, by support type and general population



Source: *The Costs of Youth Homelessness in Australia Survey and Hawthorne et al. (2006).*

SUMMARY

The findings of this study underscore the seriousness of youth homelessness as a social issue in Australia and the need for action at all levels and sectors of government and the community to overcome this problem. Homelessness, compounded by mental and physical health problems, causes a strain on every aspect of a young person's life, such as familial relationships, finding stable employment, sustaining independent accommodation and completing secondary education.

A significant finding from the study was that more than half of respondents had been diagnosed with a mental health condition and high levels of psychological distress were evident among homeless youth. Nearly 20% had been diagnosed with a substance abuse disorder and compared to the general population, quality of life outcomes were considerably lower. Of great concern were the findings around non-suicidal self-injury and suicide attempts, particularly for young women. One in five homeless young women had attempted suicide in the past six months compared to around one in ten young men. More than one in four young homeless women engaged in non-suicidal self-injury behaviours compared with 17% of young men. These findings are important for those providing mental health and drug and alcohol support to homeless young people. Special care needs to be taken when working with homeless youth to ensure that their mental health and emotional needs are addressed and safety plans are in place to reduce risk.

In addition to high psychological distress, a third of homeless young people reported having a long term physical health condition. So providing homeless services is not just about providing safe and secure accommodation, although this aspect is vitally important, there is also a significant need for health and mental health service components to service delivery. The broad range of problems faced by homeless young people, require effective case management and a well-developed integrated response among a range of providers from different service domains.

The study also highlights the fact that homeless youth, in many cases have experienced difficult early lives, which have contributed to their future trajectory into homelessness. Out-of-home care experienced prior to turning 18 was another indicator correlated with homelessness, with two-thirds homeless young people having been in out-of-home care arrangements. This clearly indicates that the transition from out-of-home care into stable independent accommodation is an area of policy and service delivery requiring significant attention – what is it about the system or the group that means that being placed in out-of-home care will, more often than not, lead to homelessness?

Furthermore, two-fifths of homeless respondents experienced police intervention in the household due to extreme conflict between parents, with more than half of the homeless group reporting that they slept rough before turning 18 years of age. Around one-quarter of those who ran away from home due to violence between parents went to relatives, 32% went to friends while 20% went to the street or park (slept rough). The results begin to shed light on the impact of family violence on children's outcomes, especially in relation to homelessness, and highlights the need for strong early intervention programs for families and children and a sustained effort to curtail this insidious social problem.

One of the earliest signs of homelessness may be couch surfing and first wave data from the Cost of Youth Homelessness in Australia study revealed that 86% of homeless young people stayed with (non-immediate) family and friends as they had nowhere else to live prior to the age of 18. Sleeping rough was also high in this group. High quality targeted interventions and support for young people who are couch surfing or running away from immediate family prior to turning 18 should be a government priority and included in the suite of services needed to prevent entry into adult homelessness.

FUTURE DIRECTIONS – SNAPSHOT REPORT 2: THE ECONOMIC COSTS OF YOUTH HOMELESSNESS

The next Snapshot Report will provide an analysis of the economic costs of homelessness both in terms of the costs of providing accommodation and support services as well as health and justice costs borne by government and the community as a result of homelessness. What the report will show is that broadly speaking, job-seeking young people had health and justice costs similar to that of the general population. However, the health and justice costs of homeless youth were considerably higher on average than for general population though not as high as for the adult homeless population. Notably, duration of time spent in institutional settings including hospital, mental health or drug and health facilities or prison or remand facilities was lower than the adult homeless population. However, the young homeless support cohort had higher incidence of contact in a number of areas such as use of casualty or emergency room, ambulance services and medical specialist consultations. They also had a higher incidence of apprehension by police and court appearances and had been stopped by the police while in a vehicle and had been held overnight by the police at rates higher than the adult homeless population. There are several policy implications that are suggested by these findings.

ACKNOWLEDGEMENTS

The *Cost of Youth Homelessness in Australia Survey* is comprehensive in scope and detailed – the survey takes up to one hour to complete. The research team sincerely thanks all the young people that generously and willingly gave up their time to share their life experiences and who made themselves available to be surveyed three times in three years. We hope that through the sharing of their story, youth homelessness will be better understood and supported, not only within the homelessness sector, but by all Australians who care for the future of our children.

The *Cost of Youth Homelessness in Australia* research team would also like to thank all the youth homelessness agencies and Job Services Australia services around Australia who saw the need for such research to be undertaken and supported the project through the important task of recruiting and surveying participants. The project could not have happened without the help of these agencies. Finally, the generous support of the Commonwealth Government Department of Human Services (Centrelink) in locating difficult to reach participants and Woolworths in providing vouchers to some participants is also much appreciated.

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REFERENCES

Australian Bureau of Statistics. (2008). *National Survey of Mental Health and Wellbeing: Summary of Results, 2007*. Canberra, Australian Bureau of Statistics.

Australian Bureau of Statistics. (2011). *Census of Population and Housing: Estimating homelessness*. Canberra, Australian Bureau of Statistics.

Australian Bureau of Statistics. (2012). *Year Book Australia, 2012: Labour*. Canberra: Australian Bureau of Statistics.

Australian Bureau of Statistics. (2014). *Labour Force Australia: Table 17. Labour force status by Sex - Persons aged 15 to 24 years - Trend, Seasonally Adjusted and Original*. Canberra: Australian Bureau of Statistics.

Australian Institute of Health and Welfare (2007). *Young Australians: their health and wellbeing 2007*. Cat. no. PHE 87. Canberra: AIHW.

Australian Institute of Health and Welfare (2011). *Young Australians: their health and wellbeing 2011*. Cat. no. PHE 140. Canberra: AIHW.

Australian Institute of Health and Welfare. (2014). *Child protection Australia: 2012–13*. Child Welfare series no.58. Cat. no.CWS 49. Canberra: AIHW.

Division of mental health and prevention of substance abuse. (1998). *Programme on Mental Health: WHOQL User manual*. World Health Organisation

Flatau, P., Conroy, E., Marchant, T., Burns, L., Spicer, B., Di Nicola, K., Edwards, R., Bauskis, A., Athanassios, M. and Larsen, K. (2012), *The Michael Project, 2007-2010, New Perspectives and Possibilities for Homeless Men*, Mission Australia.

Flatau, P., Conroy, E., Spooner, C., Edwards, R., Eardley, T. & Forbes, C.. (2013a). *Lifetime and intergenerational experiences of homelessness in Australia*, AHURI Final Report No.200. Melbourne: Australian Housing and Urban Research Institute.

Flatau, P., Conroy, E., Thielking, M., Clear, A., Hall, S., Bauskis, A., Farrugia, M., and Burns, L. (2013b), *How Integrated are Homelessness, Mental Health and Drug and Alcohol Services in Australia?* Australian Housing and Urban Research Institute, Melbourne, AHURI Final Report No. 206..

Hawthorne, G., Herrman, H. & Murphy, B. (2006). Interpreting the WHOQOL-BREF: Preliminary population norms and effect sizes. *Social Indicators Research*, 77, 37-59.

Spicer B., Smith, D.I., Conroy, E., Flatau, P., Burns, L. (2015), Mental Illness and Housing Outcomes Among a Sample of Homeless Men in an Australian Urban Centre, *Australian and New Zealand Journal of Psychiatry (ANZJP)*, 2014 Dec 19. pii: 0004867414563187. [Epub ahead of print]

Skevington, S.M., Lotfy, M., and O'Connell, K.A. (2004). The World Health Organization's WHOQOL-BREF quality of life assessment: Psychometric properties and results of the international field trial: A Report from the WHOQOL Group. *Quality of Life Research*, 13, 299-310.


Zaretsky, K., Flatau, P., Clear, A., Conroy, E., Burns, L. & Spicer, B. (2013). *The cost of homelessness and the net benefit of homeless programs: a national study. Findings from the Baseline Client Survey*. AHURI Final Report No. 205. Melbourne: Australian Housing and Urban Research Institute.

APPENDIX A

Special thanks to our industry partner organisations in the states mentioned below for their work in recruiting young people to take part in the survey.

- Anglicare NSW South, NSW West and ACT (ACT)
- Mission Australia (NSW, QLD, SA, WA)
- Salvation Army (NSW, VIC, WA)

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*"Scariest thing that has happened to me
was being homeless even for a short time"*

-CYHA PARTICIPANT, AGED 24