ACT Shelter

# Homelessness in the ACT

Briefing on characteristics, trends and service use patterns | August 2026

Every year, thousands of Canberrans turn to Specialist Homelessness Services (SHS) because they are homeless, or at risk of becoming homeless. This factsheet brings together the most recent published data from the Australian Institute of Health and Welfare (AIHW) Specialist Homelessness Services collection to provide an evidence-based picture of homelessness in the ACT. This opening section summarises the headline figures and the most significant trends. The sections that follow set out the detailed data and analysis behind them – covering who is seeking assistance and why, how the ACT compares with the rest of Australia, and where the system is under the greatest pressure.

## At a glance

The headline numbers behind homelessness support in the ACT

**4,194** people were assisted by specialist homelessness services in the ACT in 2024-25 – down 25% since 2011-12, even as the national client base grew 22%

**1 in 114**
Canberran received homelessness assistance this year (compared to 1 in 94 nationally)

*Among those seeking assistance from specialist homelessness services in the ACT in 2024-25:*

**53%**
were **already homeless** when they first sought help
*Australia: 49%*

**61%**
were experiencing **housing affordability stress** – the most common reason for seeking help
*Australia: 49%*

**37.7%**
experienced **persistent (chronic) homelessness,** more than any state or territory
*Australia: 27.4%*

**~10x**
higher rate for **Aboriginal & Torres Strait Islander** Canberrans
*More likely to seek SHS than non-Indigenous Canberrans*

**117 days**
**median length of support**
*More than double the national median for Australia: 58 days*

**19.1%**
of ACT clients are **in paid employment**
*Highest rate of any state/territory when first seeking help*

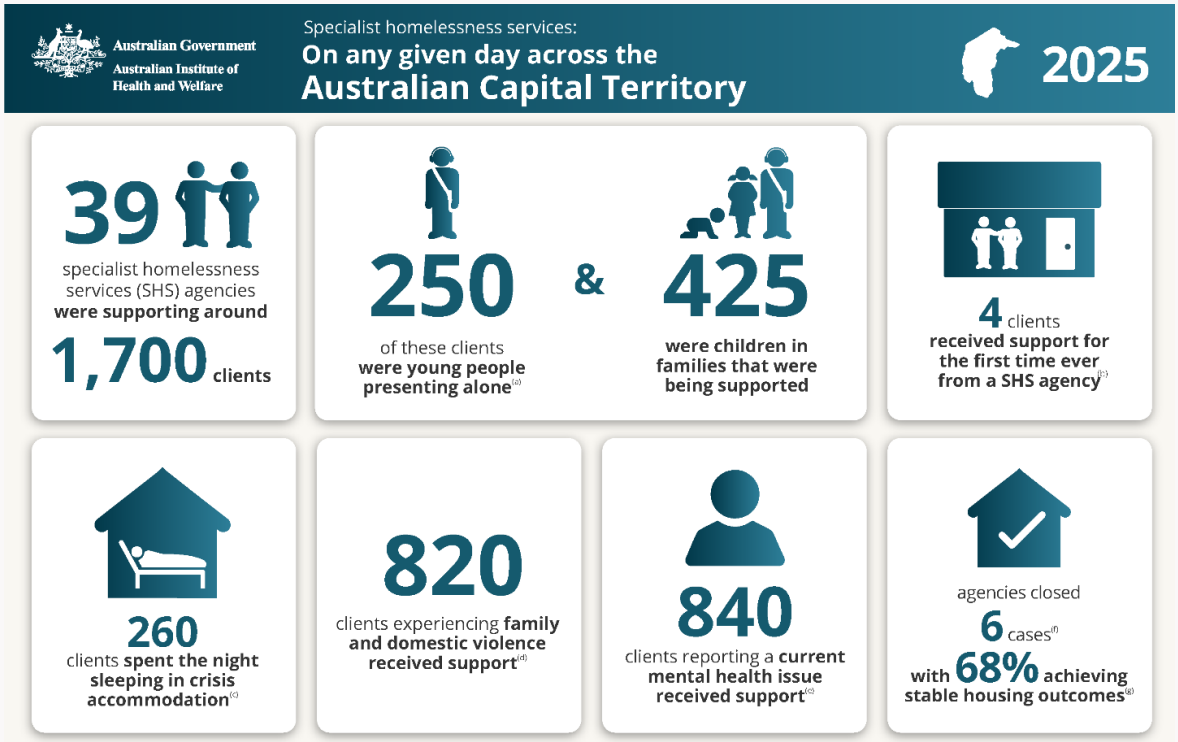
**71.6%**
had at least one **'complex need'** – **family/domestic violence, mental health, or drug and alcohol**
*Australia: 60.0%*

**51.9%**
needed **long-term housing,** but only **9.3%** received it
*Australia: 60.0%*

**49.5%**
have a current **mental health issue**
*Highest rate of any state/territory; Australia: 30.7%*

# Key trends and findings

| | |
|---|---|
| 2 | **Homelessness services are under increasing pressure, supporting fewer people for longer**<br>The number of people using ACT specialist homelessness services annually has fallen 25% since 2011–12. At the same time, the number of people receiving support at any given time continues to grow due to longer support periods and services having less capacity to assist new clients. Persistent homelessness, return-to-homelessness, and failed prevention have all worsened over the past year, pointing to a system under capacity strain rather than falling community need. |
| 2 | **Housing affordability is now the leading driver of demand**<br>Housing affordability stress is the leading reason for seeking assistance, overtaking every other reason since 2023. This is the clearest structural change in eight years of monthly ACT data, and it underscores how central housing costs have become to who needs support and why. |
| 3 | **ACT clients have far higher rates of mental health and multiple other needs**<br>49.5% of ACT clients have a current mental health issue (30.7% nationally), and 71.6% have at least one of family/domestic violence, mental health or drug/alcohol issues (60.0% nationally) – helping explain why support is now delivered for a longer period time (a median 117 days, against 58 nationally). |
| 4 | **The ACT has the highest rate of persistent homelessness in Australia**<br>38% of all ACT clients in 2024–25 had experienced persistent (chronic) homelessness, rising to 40% among Aboriginal and Torres Strait Islander clients; more than half who were persistently homeless had a current mental health issue, and around a half (52%) were children and young people. |
| 5 | **Aboriginal and Torres Strait Islander Canberrans remain vastly over-represented**<br>They are almost 10 times more likely than non-Indigenous Canberrans to seek SHS support, and more likely to experience multiple, compounding structural vulnerabilities. |
| 6 | **More of the ACT's population is ageing into homelessness**<br>The number of monthly clients aged 65 and over grew by 249% between mid-2018 and early 2026 – more than 10 times the growth rate across all clients – even as presentations by very young children fell. |
| 7 | **A growing proportion seeking assistance are working**<br>Around one in five ACT clients are in paid employment when they first seek assistance, the highest rate of any state or territory, reinforcing that housing costs are a key factor pushing working Canberrans towards homelessness. |




(a) Children & young people receiving support alone are aged 12–24. Children in families are aged 0–17. In this infographic, these groups are mutually exclusive.
(b) Clients who had not previously received SHS support since the collection began in 2011–12.
(c) Crisis accommodation refers to short-term or emergency accommodation, and may include hotels, motels and caravan parks.
(d) Average number of clients who experienced family & domestic violence per day.
(e) Average number of clients with a mental health issue per day.
(f) Clients who had a valid 'homelessness last reported' status.
(g) Only includes cases where housing status at the end of support was known.
Source: AIHW 2025. https://www.aihw.gov.au/shs-annualreport

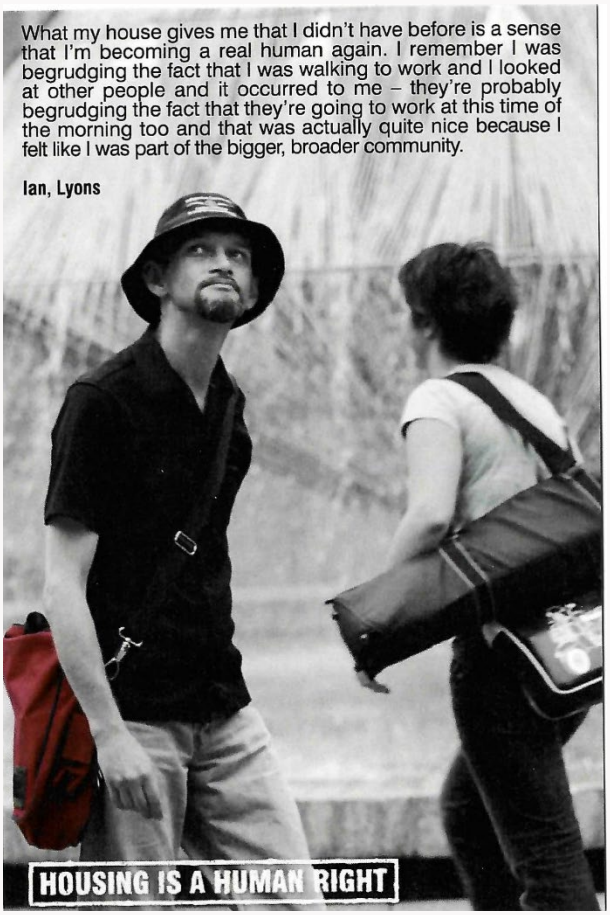
## Defining 'homelessness'

There is no single, universally accepted definition of homelessness. Different data collections and research methodologies measure homelessness in different ways, reflecting the complexity of the issue.

The Australian Bureau of Statistics (ABS) defines homelessness as the absence of one or more elements that constitute a home. Under the ABS definition, a person is considered homeless when they do not have suitable accommodation alternatives and their current living arrangement:

- is in a dwelling that is inadequate;
- has no tenure, or only short-term and non-extendable tenure; or
- does not provide control of, and access to, space for social relations (ABS, 2012).

The Specialist Homelessness Services (SHS) Collection, the national dataset on specialist homelessness support in Australia, uses a different approach. It classifies a person as homeless if they are living in non-conventional accommodation (such as sleeping rough) or in short-term or emergency accommodation, including temporary arrangements with friends or relatives (AIHW, 2025).




**Specialist homelessness services (SHS)** are government-funded programs delivered by specialised agencies to help people who are homeless or at risk of losing their housing. In the ACT they provide targeted support including crisis accommodation, tenancy help, counselling and legal advice, and help with issues like substance use, gambling and/or mental ill health.

## Understanding the data

The data presented in this briefing is drawn primarily from the Australian Institute of Health and Welfare's (AIHW) Specialist Homelessness Services (SHS) Collection, including the most recent annual and monthly SHS reports, together with AIHW data published in the Productivity Commission's *Report on Government Services*.

These datasets provide valuable insights into trends in homelessness and housing insecurity, including demand for homelessness services and the characteristics of people seeking assistance. However, they do not measure the full extent of homelessness in the community.

Importantly, SHS data only captures people who access specialist homelessness services. Many people experiencing homelessness or housing insecurity never seek assistance, meaning the number of people recorded in SHS data is lower than the total number experiencing homelessness or at risk of homelessness.

Previous research has suggested most people who experience homelessness do not seek assistance from specialist homelessness services. An ABS report found that among people who had experienced homelessness in the previous ten years, only around one-third sought support from a service organisation during their most recent episode of homelessness (ABS, *General Social Survey 2014*, published 2015).

For this reason, ACT Shelter considers homelessness service data to be an important indicator of demand for assistance and changes over time, but not a complete measure of the incidence or prevalence of homelessness.

# Analysis in full

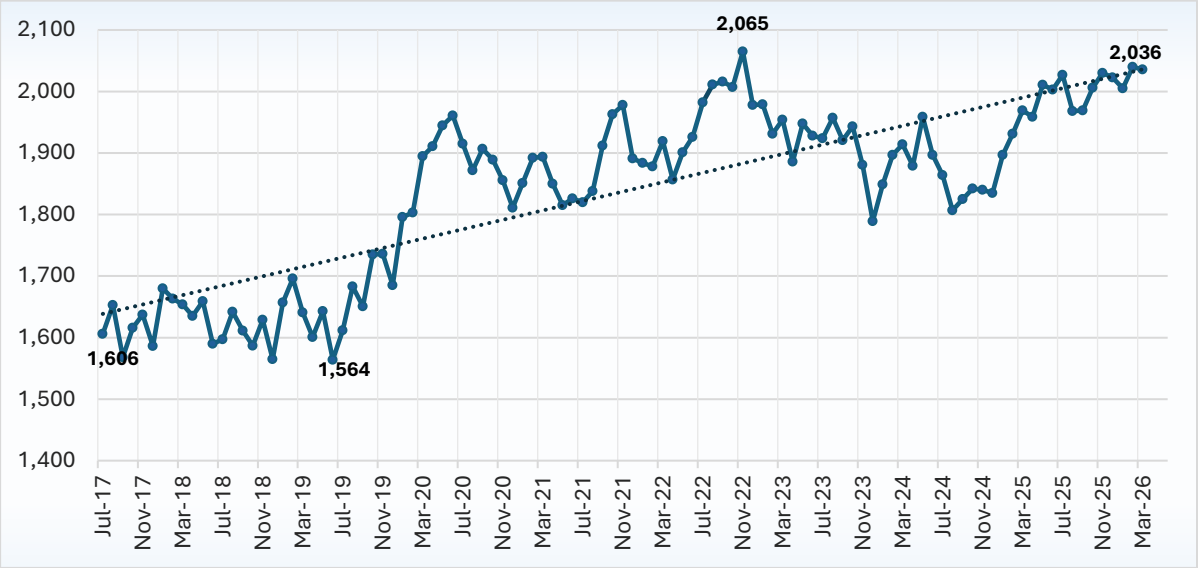
## Longer support periods are increasing pressure on homelessness services

Homelessness services in the ACT are supporting fewer unique clients each year, while simultaneously carrying larger ongoing caseloads.

### *The number of people receiving support from Specialist Homelessness Services each month has increased over time*

The number of people receiving support from Specialist Homelessness Services (SHS) in the ACT has generally increased since monthly reporting commenced in July 2017. While monthly client numbers fluctuate, the overall trend is upward, increasing from 1,606 people in July 2017 to 1,964 people in March 2025, with the trendline indicating a sustained increase in the number of people receiving assistance from homelessness services over this period. Because this measure counts everyone actively receiving support in a given month, it provides an indication of the workload facing homelessness services.

**Figure 1. Number of people seeking assistance from specialist homelessness services, ACT, Jul 2017 to Mar 2026**




*Source: AIHW, Specialist Homelessness Services, Monthly Data Table, May 2026.*

### *Annual client numbers have fallen despite growing demand on services*

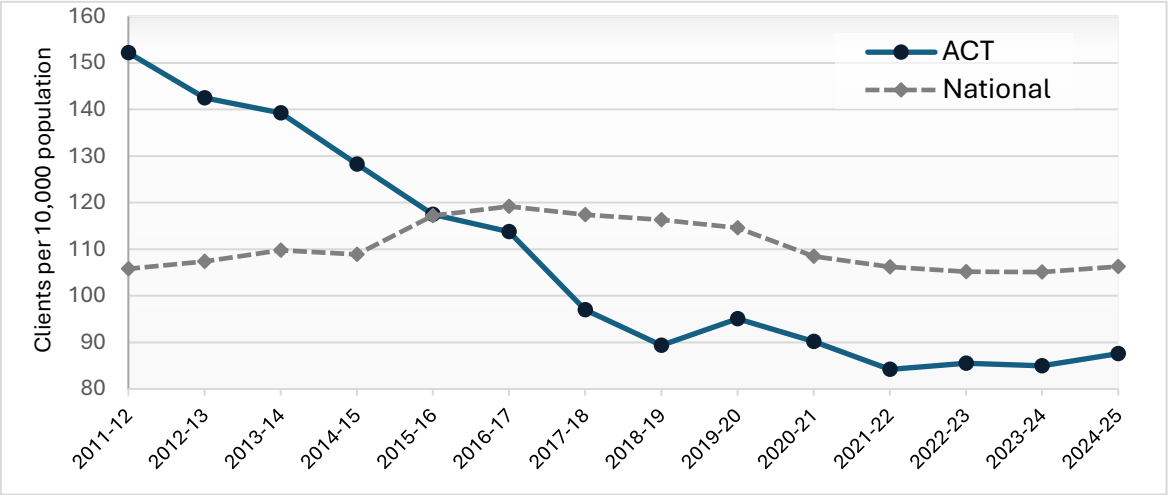
Annual SHS data tells a different story. This counts each person only once during the financial year, regardless of how long they receive support. In 2024-25, one in 114 people received homelessness assistance, compared with one in 94 nationally. Since 2011–12, the ACT's SHS client rate has fallen by 42%, from 152.2 to 87.6 clients per 10,000 population, while the national rate has remained broadly unchanged (105.8 to 106.3 per 10,000). The ACT and national rates were relatively similar between 2016–17 and 2019–20, but have since diverged, with the ACT rate falling well below the national rate over the past five years (figure 2).

In raw numbers, the number of people assisted by SHS in the ACT declined from 5,602 in 2011–12 to 4,194 in 2024–25 (a decrease of 25.1%), while nationally the number of people assisted increased from 236,429 to 288,970 (an increase of 22.2%). However, this decline in annual client numbers should be considered alongside other measures of service demand, including monthly client numbers and increasing support durations.

At first glance, the long-term annual and monthly Specialist Homelessness Services (SHS) data appear to tell different stories. The annual data show that the number of unique people assisted by SHS in the ACT has fallen substantially since 2011–12. Yet the monthly data show that the number of clients receiving

support at any given time has generally increased since 2017. These trends are not contradictory. Rather, they reflect two different measures of service demand. Annual data count each person only once during the financial year, regardless of how long they receive support, while monthly data count everyone actively receiving support in that month.

**Figure 2. SHS client rate per 10,000 population, ACT and National, 2012 to 2025**




*Source: AIHW Specialist Homelessness Services Collection, Annual Report 2025-25, Supplementary tables - Historical tables SHSC 2011–12 to 2024–25 (Table HIST.CLIENTS). Rates are crude rates per 10,000 population (ERP).*

Viewed together, the data point to a homelessness service system under increasing pressure. In the ACT, the median length of support has increased significantly over time and is now considerably longer than the national median. As people remain in homelessness services for longer – often because they cannot secure affordable private housing or access social housing – services are supporting larger ongoing caseloads, even though they are assisting fewer unique clients over the course of a year. In other words, services are becoming increasingly occupied by people with longer and more complex support needs, or who cannot be readily rehoused, reducing their capacity to assist new clients. The decline in annual client numbers should therefore not be interpreted as a reduction in homelessness or demand for assistance. Instead, it more likely reflects a system where housing pathways are increasingly blocked, support episodes are longer, and homelessness services are under growing strain.

### *Does a falling annual SHS client count mean homelessness has fallen?*

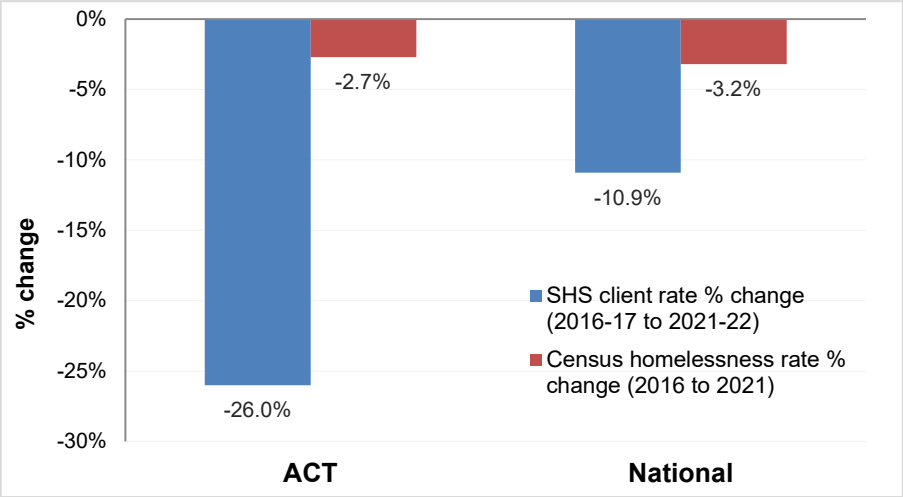
Not necessarily. The annual SHS client count measures the number of unique people assisted over a financial year - not the total demand for homelessness services or the prevalence of homelessness. A decline in annual client numbers could reflect lower need, but it can also result from changes in how services operate, who they are able to assist, and how long people remain in the system.

Several factors suggest the latter is more likely in the ACT. Compared with 2011–12, the ACT now has fewer specialist homelessness services relative to its population, support episodes are much longer, and clients are remaining in supported accommodation for considerably longer than the national average. When people cannot move into affordable or social housing, they stay in homelessness services for longer, reducing the number of new clients services can assist over the course of a year. This is consistent with the increasing monthly caseloads shown elsewhere in this briefing.

Importantly, a sharp decline in SHS client numbers is not reflected in other indicators of housing need. Housing affordability has deteriorated, public housing waiting lists have grown, and Census estimates of homelessness have changed little over the same period.

The ABS Census provides an estimate of homelessness that is independent of SHS service usage – it counts people experiencing homelessness regardless of whether they contacted a specialist service. Comparing the change in this measure with the change in the SHS client rate, over the same window, is one of the more direct ways to test whether the SHS decline reflects a genuine fall in homelessness.

*Figure 3. % change in the SHS client rate (2016-17 to 2021-22) versus % change in the ABS Census-based homelessness rate (2016 to 2021), ACT vs National.*




Source: Table HIST.CLIENTS; PC Report on Government Services 2026, Table 19A.2.

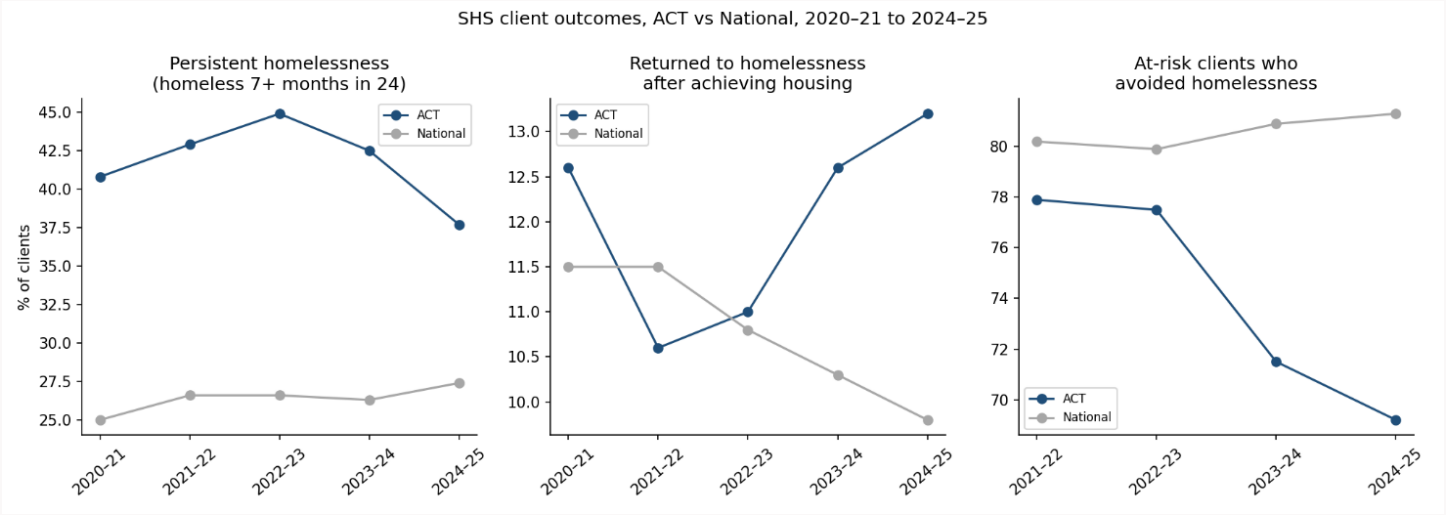
Between the 2016 and 2021 Censuses, the ABS-estimated homelessness rate in the ACT fell only marginally, from 40.2 to 39.1 per 10,000 population (-2.7%), and the national rate fell similarly (49.8 to 48.2, -3.2%). Over a closely comparable window, however, the ACT's SHS client rate fell by 26.0% (113.8 to 84.2 per 10,000), far more steeply than the national SHS rate's 10.9% fall (119.2 to 106.2) over the same years. This is a meaningful cross-check: an independent measure of actual homelessness barely moved in the ACT, while the ACT's rate of SHS service use fell sharply – evidence that favours a service system or measurement explanation over a genuine reduction in homelessness need.

Taken together, the evidence suggests the decline in annual SHS client numbers is more likely to reflect a service system under increasing pressure, with constrained capacity and longer support periods, than a substantial reduction in homelessness or the need for assistance.

## Worsening outcomes suggest a system under strain

If declining SHS client numbers reflected a genuine improvement in homelessness in the ACT, outcomes for people remaining in the system would be expected to improve or at least remain stable. Instead, all three key outcome measures reported by the Productivity Commission have worsened in recent years.

**Figure 4. SHS client outcomes, ACT vs National, 2020–21 to 2024–25.**




*Source: PC Report on Government Services 2026, Tables 19A.42, 19A.41, 19A.33.*

Persistent homelessness is significantly higher in the ACT than anywhere else in Australia, with 37.7% of SHS clients experiencing homelessness for more than seven months over a two-year period in 2024-25, compared with 27.4% nationally. The ACT has recorded the highest persistent homelessness rate of any jurisdiction in every year from 2020-21 to 2024-25 (peaking at 44.9% in 2022-23).

The proportion of clients returning to homelessness after achieving housing has also increased in the ACT, from 10.6% in 2021–22 to 13.2% in 2024–25, while falling nationally from 11.5% to 9.8%. At the same time, the proportion of at-risk clients who successfully avoided homelessness fell sharply in the ACT, from 77.9% to 69.2%, while the national rate remained relatively stable (80.2% to 81.3%).

Together, these measures show that people remaining in the ACT's SHS system are more likely to experience prolonged homelessness, more likely to return to homelessness after being housed, and less likely to avoid homelessness in the first place. These trends are difficult to reconcile with a story of declining need; instead, they point to a system under increasing strain, consistent with the longer support periods and increasing complexity of need outlined elsewhere in this briefing.

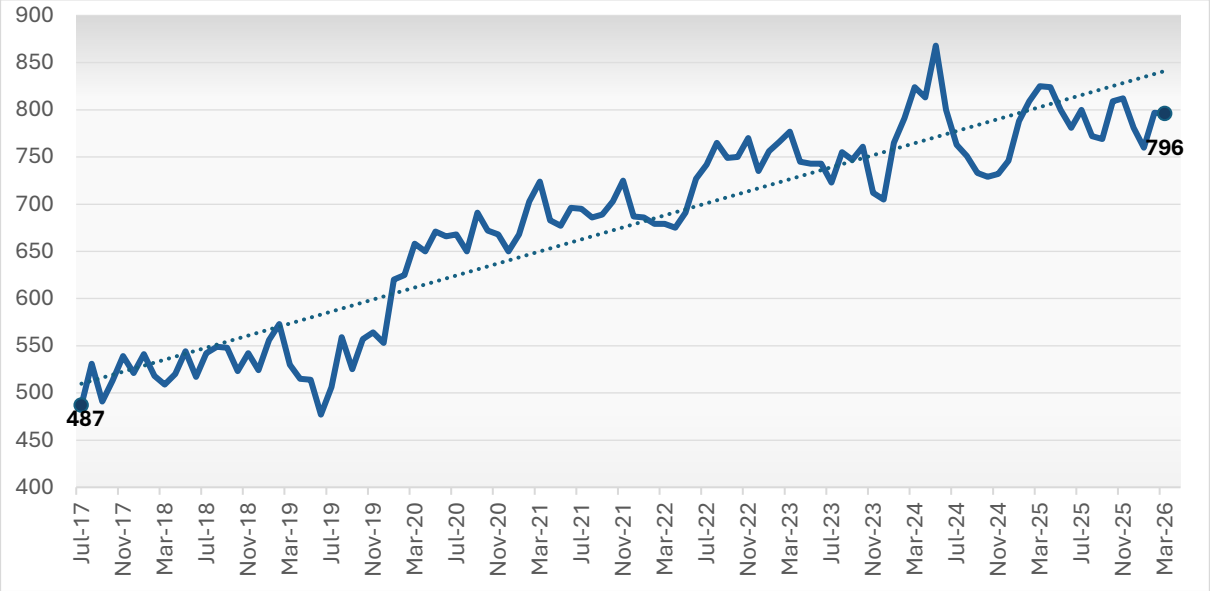
## Complexity of need has been increasing over time

People seeking homelessness assistance in the ACT increasingly present with multiple and complex needs, placing additional pressure on homelessness services.

### *Nearly half the people seeking assistance have a mental health issue*

Mental ill health is both a driver and consequence of homelessness. In 2024-25, 49.5% of ACT SHS clients had a current mental health issue, substantially higher than the national rate of 30.7%. Both the number and proportion of people accessing homelessness services with mental health issues have increased over time.

**Figure 5. Number of people seeking assistance from ACT homelessness services with a current mental health issue, July 2017 to March 2026**




*Source: AIHW, Specialist Homelessness Services, Monthly Data Tables, May 2026.*

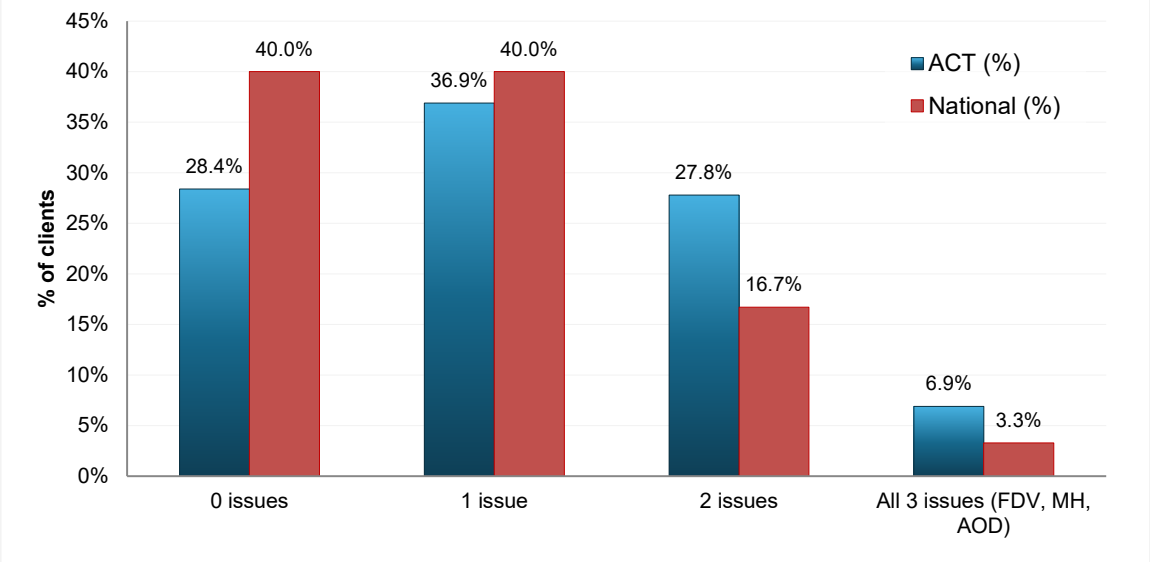
## *People accessing services in the ACT are more likely to have multiple complex needs*

In 2024-25, most people seeking assistance had multiple vulnerabilities and needs. In 2024–25, 71.6% of ACT SHS clients had at least one of three key indicators of complexity: family and domestic violence, mental health issues, or problematic drug and alcohol use, compared with 60.0% nationally.

Many service users had multiple, co-occurring issues. Just over a third (36.5%) of clients with a mental health issue in the ACT also experienced issues with domestic and family violence (32.3% nationally). Among clients in the ACT experiencing substance use issues, 44.1% also had mental health issues (40.6% nationally), while 90% also experienced family and domestic violence and/or had a current mental health issue (82% nationally).

The proportion of people accessing SHS services with co-occurring family/domestic violence (FDV), mental health, and 'problematic drug/alcohol issues' is substantially higher in the ACT than other jurisdictions (Figure 6).

**Figure 6. Distribution of co-occurring FDV, mental health and drug/alcohol issues among all SHS clients, ACT vs National, 2024–25.**




*Source: AIHW Specialist Homelessness Services Collection, Annual Report 2025-25, Table CLIENTS.47.*

The ACT also has a substantially higher proportion of clients experiencing all three issues simultaneously: 6.9%, more than double the national rate of 3.3%. Conversely, fewer ACT clients had none of these three indicators (28.4%, compared with 40.0% nationally). These figures show that the ACT homelessness service system is supporting a caseload with higher levels of complexity and acuity than the national average, increasing the time, resources and specialist support required to achieve positive outcomes.

## Population groups and the characteristics of people seeking assistance

The overall client rate was higher in the ACT in 2024–25 than the previous year, with higher or similar rates reported for most client groups except for Indigenous clients and children and young people receiving support alone.

**Table 1. The rate at which people sought specialist homelessness service (per 10,000 people in the population)**

| | ACT | | Australia | |
|---|---|---|---|---|
| | 2023–24 | 2024–25 | 2023–24 | 2024–25 |
| **All clients** | **85.0** | **87.7** | **105.1** | **106.3** |
| Indigenous clients | 755.5 | 707.3 | 752.9 | 784.2 |
| Older people (55 and over) | 41.0 | 39.7 | 38.8 | 40.8 |
| Family and domestic violence | 33.9 | 38.6 | 41.1 | 42.8 |
| Clients with disability | 2.1 | 2.4 | 3.1 | 3.3 |
| Clients with mental health issues | 46.4 | 48.9 | 37.5 | 36.9 |
| Exiting custodial arrangements | 3.3 | 3.0 | 3.8 | 3.7 |
| Leaving care | 3.6 | 3.4 | 2.3 | 2.3 |
| Children on protection orders | 10.2 | 13.0 | 14.4 | 14.7 |
| Problematic drug/alcohol use | 14.7 | 13.5 | 10.2 | 10.2 |

*Source: AIHW, Specialist homelessness services annual report 2024–25, historical supplementary tables*
*Crude rates are used except for Indigenous rates which are directly age-standardised.*

### *Aboriginal and Torres Strait Islander peoples are vastly over-represented among those who are homeless in the ACT*

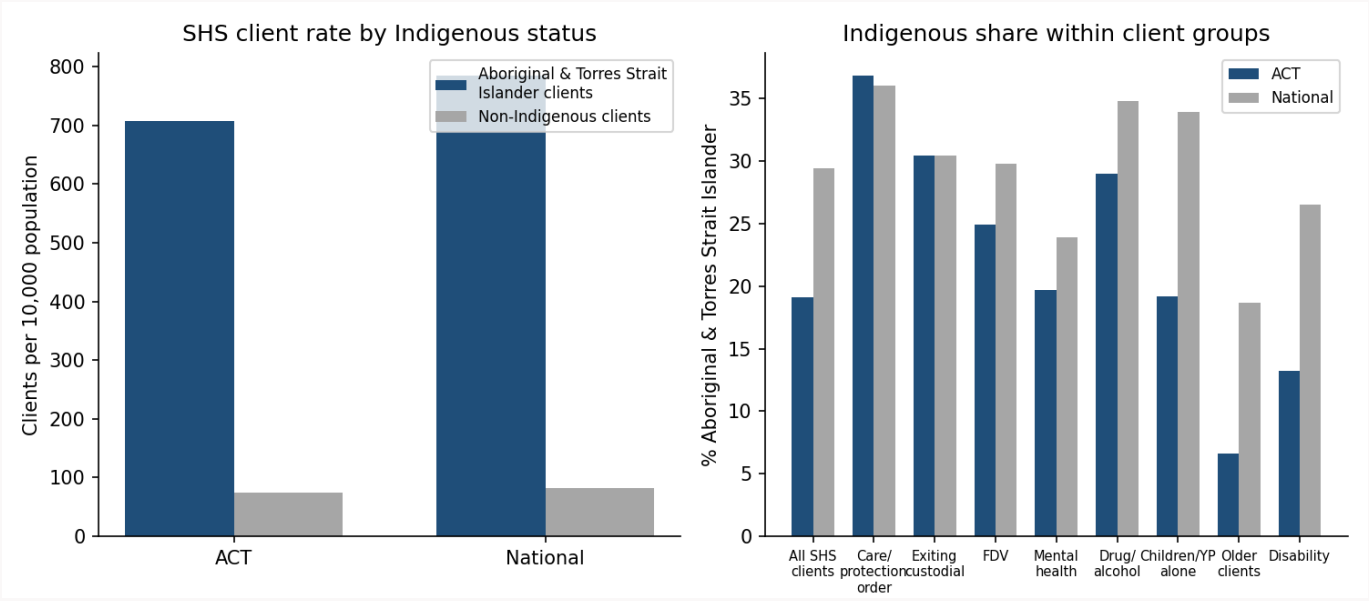
Aboriginal and Torres Strait Islander peoples are significantly over-represented among people seeking homelessness assistance in the ACT (figure 7). In 2024–25, 798 Aboriginal and Torres Strait Islander people accessed Specialist Homelessness Services, representing 19.1% of all ACT SHS clients. This equates to a rate of homelessness service use almost ten times higher than for non-Indigenous Canberrans.

While the ACT proportion is lower than the national figure (29.4%), this reflects the ACT's smaller Aboriginal and Torres Strait Islander population share. Of particular concern, almost 40% of Aboriginal and Torres Strait Islander SHS clients in the ACT experienced persistent homelessness in 2024–25 – the highest rate of any jurisdiction (*AIHW, Table PERS.1: Clients who experience persistent homelessness, by selected client cohorts, 2018–19 to 2024–25*).

Aboriginal and Torres Strait Islander people accessing SHS in the ACT also experience high levels of complex need. In 2024–25, two-thirds (66%) reported either alcohol and other drug issues and/or a current mental health issue, compared with 36% nationally.

Over-representation is particularly pronounced among some client groups, including children on care and protection orders (36.8% of ACT clients) and people exiting custodial arrangements (30.4%). Aboriginal and Torres Strait Islander people are comparatively under-represented among ACT clients with disability (13.2% vs 26.5% nationally) and older clients (6.6% vs 18.7% nationally). These differences warrant further attention, including whether they reflect differences in access, identification or service pathways rather than lower levels of need.

**Figure 7. Left: SHS client rate per 10,000 population by Indigenous status, ACT vs National. Right: Aboriginal and Torres Strait Islander clients as a share of each client group, ACT vs National.**

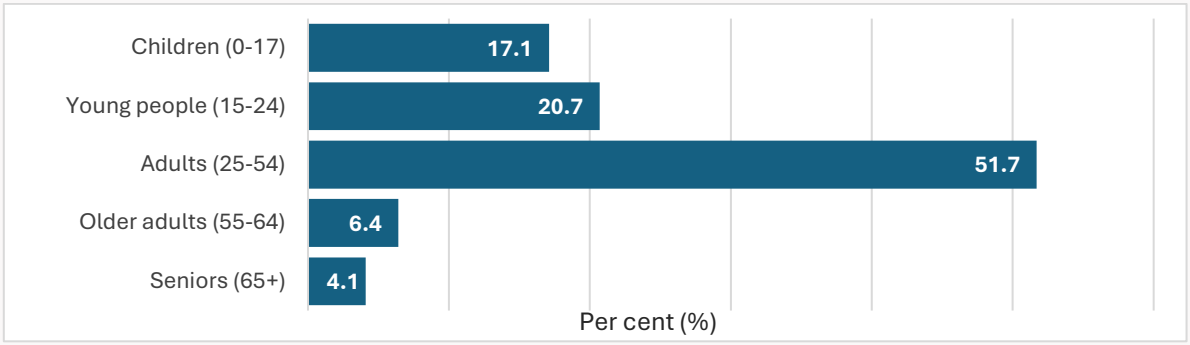



*Source: AIHW, Source: Specialist homelessness services annual report 2024–25, Tables INDIGENOUS.2, CLIENTS.43.*

## *Children and young people comprise over one third of people using homelessness services*

Children and young people make up a substantial proportion of people accessing ACT homelessness services. In 2024-25, people aged under 25 accounted for around 38% of all SHS clients, while adults aged 25–54 comprised more than half of all clients.

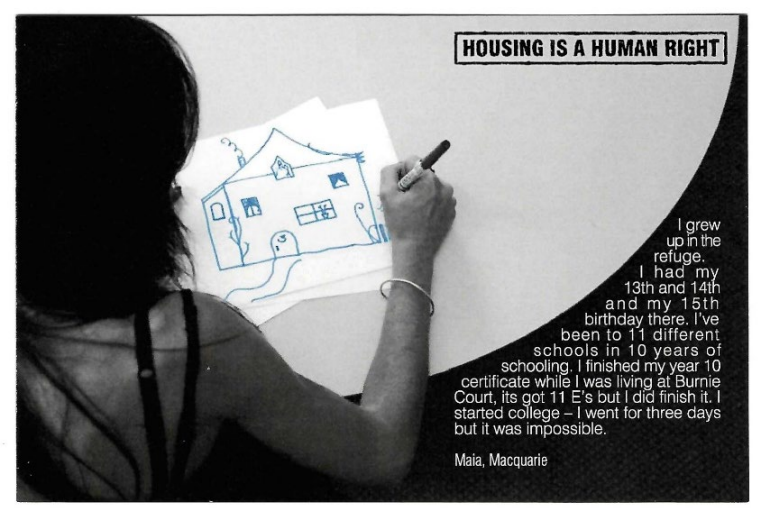
**Figure 8. Age of people seeking homelessness services in ACT, 2024-25, (%)**




*Source: AIHW, Specialist homelessness services annual report 2024–25*

Children and young people receiving support alone (aged 12–24) made up 683 ACT clients in 2024-25 (16.3% of all clients), higher than the national share of 14.0%. However, the number of young people seeking assistance alone has declined substantially over time, falling from 1,629 clients in 2011–12 to 683 in 2024–25 (a 58% decrease), compared to a more modest national decline (44,608 to 40,537, -1.2% a year).

A further 129 ACT clients were children on a care and protection order (3.1% of ACT clients), and 164 ACT were leaving statutory out-of-home care altogether (3.9%), higher proportion than nationally (2.2%).

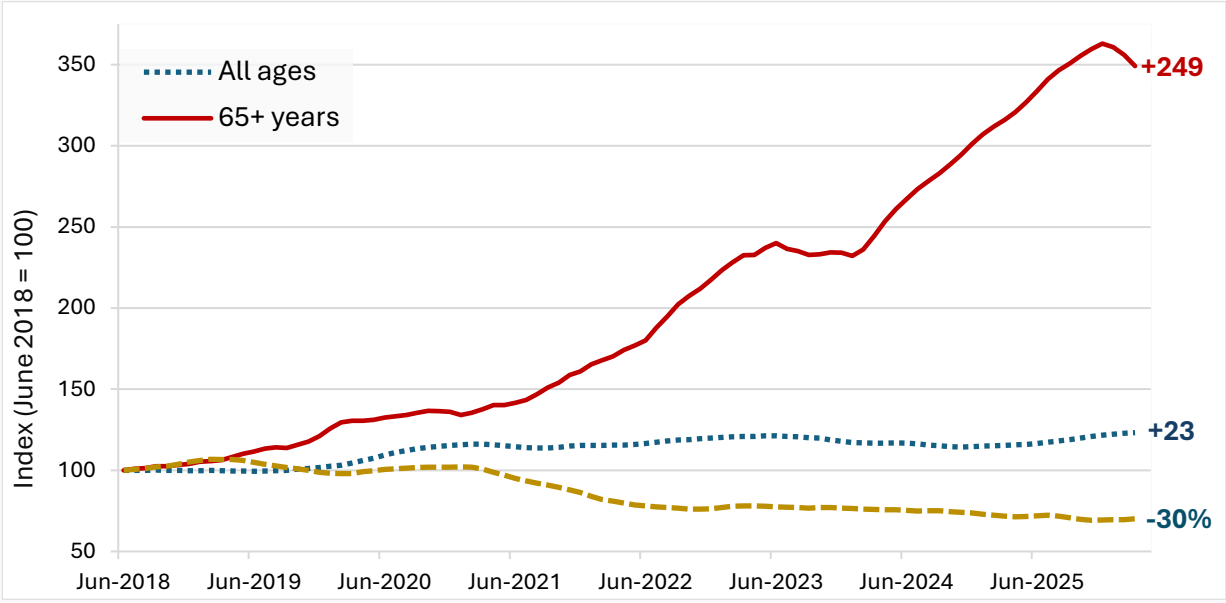


### *The number of older people accessing assistance at any given time is increasing*

Older Canberrans represent a smaller share of people seeking homelessness assistance than other age groups. In 2024-25, 442 people aged 55 and over accessed ACT Specialist Homelessness Services (SHS), representing 10.5% of all clients (similar to the national share of 11.0%).

However, monthly service data reveal a striking increase in older people within the homelessness system. The proportion of SHS clients aged 65 and over has almost tripled since mid-2018, increasing from 1.6% to 4.4% of the monthly caseload – far exceeding the growth across all clients (23%) over the same period. Growth has been particularly pronounced among older women (+365%), although older men have also increased substantially (+180%).

**Figure 9. ACT specialist homelessness service clients by age group, 12-month rolling average, indexed to June 2018**




*Source: AIHW, Specialist Homelessness Services, Monthly Data Tables, May 2026.*

The rate of older Canberrans (aged 55 and over) accessing SHS annually has also increased significantly, rising 53.9% between 2017–18 and 2024–25 (from 25.8 to 39.7 clients per 10,000 population), more than four times the national growth rate of 12.4% over the same period. Almost all of this growth has occurred since 2020–21, after the rate remained relatively stable throughout the 2010s, although it eased slightly in the most recent year.

The steeper increase in the monthly service usage data compared to annual service data for older Canberrans reflects longer support periods among older clients. The median length of support for clients aged 55 years and over has increased from 101 days in 2020–21 to 125 days in 2024–25 (more than double the national median in each year) while the average number of support periods per client has remained largely unchanged. As a result, older clients are remaining visible in monthly caseloads for longer, contributing to growing pressure on homelessness services.

This mirrors the broader pattern evident across the ACT homelessness system: longer support periods increase monthly caseloads while reducing the number of unique clients services can assist each year.

Older clients in the ACT also spend considerably longer in supported accommodation than elsewhere in Australia, with a median stay of 89 nights in 2024–25 compared with 29 nights nationally.

The ACT is also the only jurisdiction where older clients receiving accommodation or tenancy sustainment assistance are predominantly male, in contrast to the national pattern, although the small number of clients means this finding should be interpreted cautiously. These trends highlight the need for future service planning that responds to the growing and changing needs of older people experiencing homelessness.

### *People with disability are under-represented in service usage data*

In 2024–25, 114 ACT SHS clients were recorded as having disability, representing 2.7% of all ACT clients (2.4 per 10,000 population). This is lower than the national rate of 3.1% (3.3 per 10,000 population). The gap is longstanding: since 2013–14, the number of ACT SHS clients recorded with disability has declined by an average of 1.1% per year, while nationally the number has increased by 2.4% per year.

SHS data capture only disability that is identified, disclosed and recorded during service delivery, and therefore do not reflect the true prevalence of disability among people experiencing homelessness. Given that around one in six Australians live with disability, the very low proportion recorded in SHS data suggests possible under-identification or underrepresentation.

SHS data capture only disability that is identified, disclosed and recorded during service delivery, and therefore do not reflect the true prevalence of disability among people experiencing homelessness. Given that around one in six Australians live with disability, the very low proportion recorded in SHS data suggests possible under-identification or underrepresentation.

### *Single parents and family composition*

In 2024-25, single parents with children made up 21.8% of all ACT presentations, compared with 29.0% nationally. Within the ACT's family/domestic violence caseload, 52.6% of ACT clients who have experienced FDV were living as a one-parent family with children (compared to the 46.1% nationally). The historical unassisted-requests data indicates that over the past eight years, the profile of who in the ACT goes unassisted has shifted away from sole parents and toward people presenting alone.

### *People experiencing domestic and family violence are the single largest client group*

Family and domestic violence (FDV) is the single largest client group in both the ACT and nationally. 1,847 ACT clients (44.0% of all clients) had experienced FDV in 2024–25, exceeding the national share of 40.3%. The number of ACT clients experiencing FDV has grown substantially over the past 13 years (1,403 in 2011–12 to 1,847 in 2024–25, +2.1% a year on average), which is slightly slower than the national growth rate (+3.0% a year) but still a sustained upward trend. FDV is also the most common reason recorded for a general-assistance unassisted requests, and a substantial share of ACT's FDV clients also have co-occurring mental health or AOD issues, underlining the layered nature of need for this group locally.

### *People exiting institutions*

Two distinct 'exiting institution' groups are tracked: people exiting custodial (justice) arrangements and children/young people leaving statutory out-of-home care.

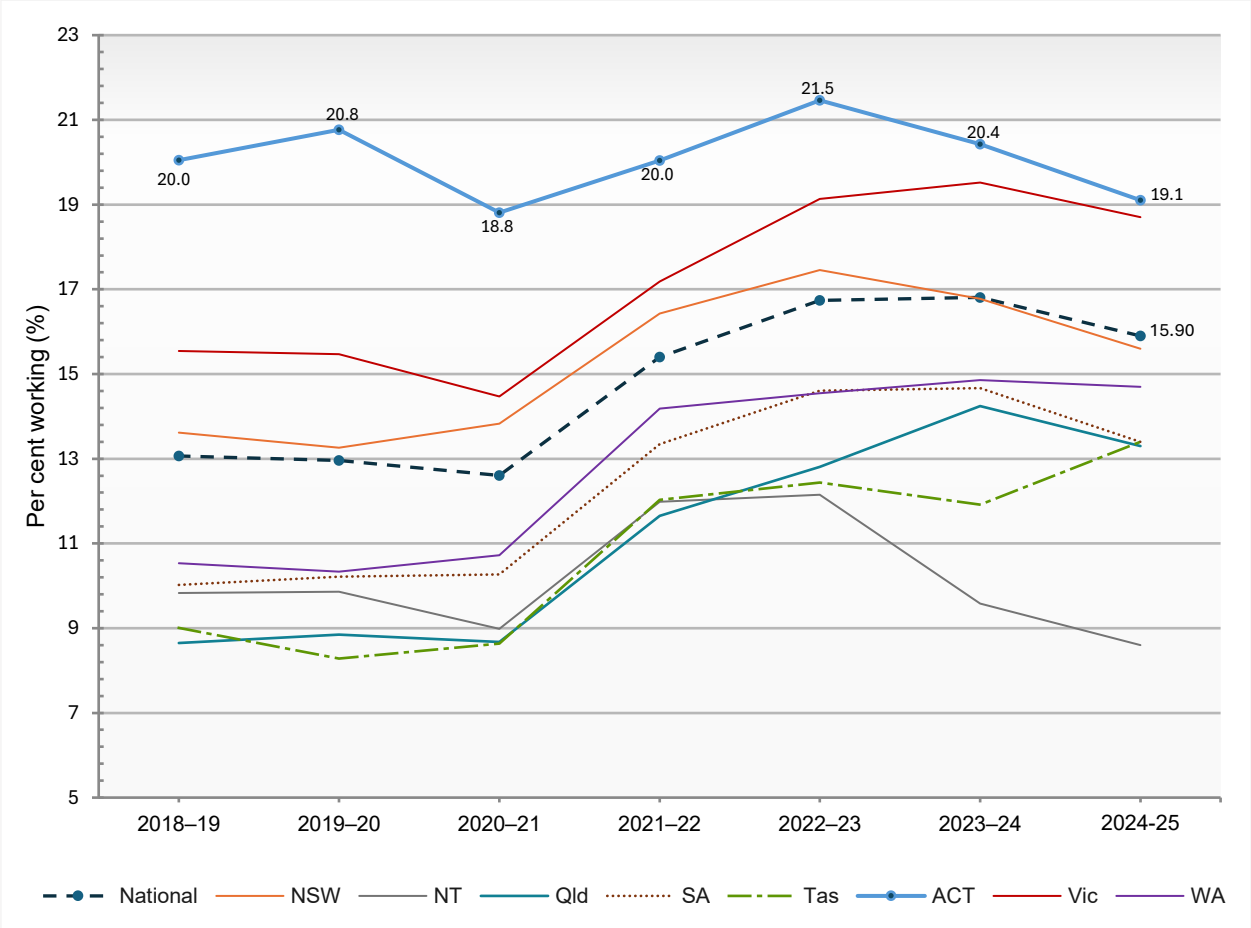
- ***Exiting custodial arrangements***: 126 ACT clients in 2024–25 (3.0% of ACT clients; 3.0 per 10,000) — essentially identical to the national share (3.0%; 3.7 per 10,000). Aboriginal and Torres Strait Islander people make up 30.4% of this group in both the ACT and nationally, underscoring the link between over-incarceration and homelessness risk.
- ***Leaving out-of-home care:*** 164 ACT clients (3.9% of ACT clients) — well above the 2.2% national share. This group has stayed essentially flat in the ACT over 13 years (-0.3% a year) while growing steadily nationally (+2.3% a year), which suggests the ACT's elevated share reflects a persistent, longstanding gap rather than a new or worsening trend, but one that has not improved either.

### *People in paid employment are more likely to access homelessness services in the ACT than elsewhere*

Around **one in five people (19.1%)** seeking assistance from specialist homelessness services in the ACT are in paid employment – the highest proportion of any Australian jurisdiction. This challenges the perception that homelessness only affects people outside the workforce. In the ACT, a significant proportion of people seeking homelessness assistance are employed, reflecting the extent to which high housing costs are placing even working Canberrans under severe financial pressure.

The data also indicates a modest improvement in employment outcomes during the course of SHS support. By the end of support, the proportion of ACT clients in paid employment had increased from 19.1% to 21.8% (including an increase in full-time employment from 7.3% to 8.3% and part-time employment from 11.8% to 13.5%). Over the same period, the proportion of clients who were unemployed fell from 58.7% to 54.9%. These changes were larger than those recorded nationally, suggesting that ACT clients receiving homelessness support may experience stronger employment outcomes than the national average. However, given the ACT's relatively small client population, these findings should be interpreted with appropriate caution.

**Figure 10. Clients who are in employment when they seek assistance (states and territories), 2018–19 to 2024–25**



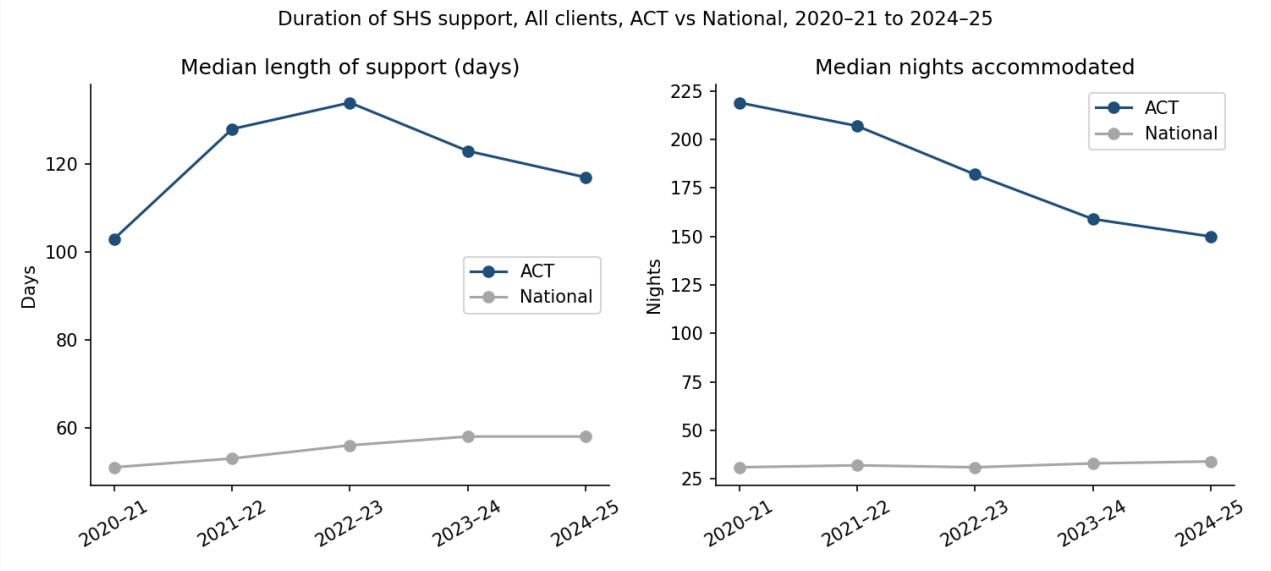

*Source: AIHW, (2025), Specialist homelessness services annual report 2024–25 (Table CLIENTS.34: Clients aged 15 and over, by labour force status at the end and start of support, and by state and territory, 2024–25).*

# Service use patterns and system strain

## *Longer support periods point to more complex needs and constrained exits from homelessness*

One of the clearest findings in the ACT data is the length of time people remain engaged with Specialist Homelessness Services. From 2020–21 to 2024–25, the median length of support provided to ACT clients was around two to three times the national median, while the median time spent in supported accommodation was between four and seven times higher than the national figure.

**Figure 11. Median length of support (days) and median nights accommodated, all SHS clients, ACT and Australia, 2020–21 to 2024–25.**




*Source: Productivity Commission, (2026), Report on Government Services, Homelessness Services, Table CLIENTS.48.*

In 2024–25, ACT clients received a median of 117 days of support, compared with 58 days nationally, and spent a median of 150 nights in supported accommodation, compared with 34 nights nationally. A higher proportion of ACT clients also received accommodation assistance (41.2%, compared with 30.1% nationally). Although the median number of nights accommodated has declined from its peak of 207 nights in 2021–22, it remains substantially higher than the relatively stable national trend.

Together with the other trends outlined in this briefing, these figures point to a homelessness system where people are remaining in support for longer once they enter it. Longer support periods reflect both the complexity of people's needs and the difficulty of securing pathways out of homelessness, particularly into affordable and social housing. While longer support enables services to provide more sustained assistance, it also reduces turnover and limits the number of new clients services can assist each year. This helps explain why annual SHS client numbers have declined even as monthly caseloads and other indicators point to increasing pressure on the system.

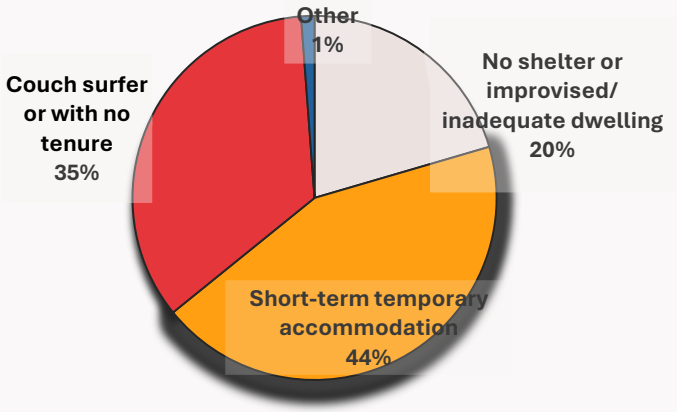
## *More people seeking assistance are already homelessness and needing accommodation*

The ACT homelessness system is increasingly supporting people who are already homeless, rather than preventing homelessness before it occurs. Limited pathways into medium- and long-term housing mean people are remaining in support for longer, creating bottlenecks that reduce services' capacity to assist new clients.

In 2024-25:

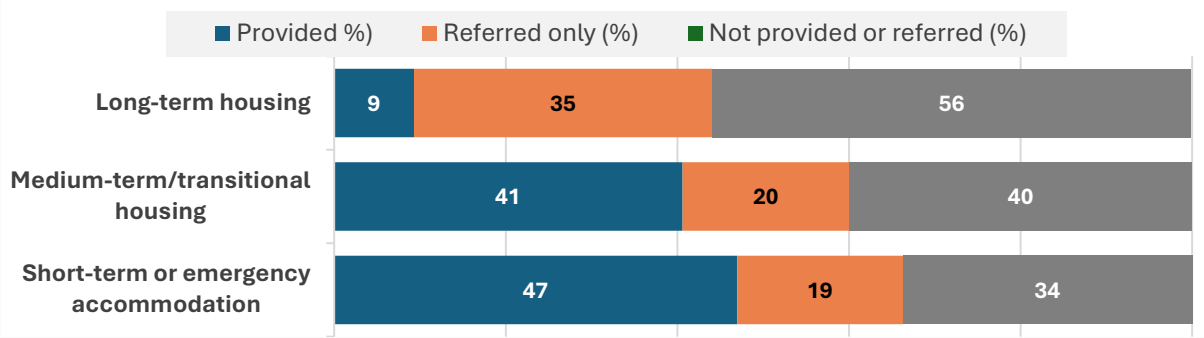
- **53%** of clients in the ACT were homeless on first presentation, higher than the national rate (49%).
- 47% had experienced homelessness in the month before their first support period.
- 87% of clients at risk of homelessness were assisted to maintain their housing.
- 52% of clients experiencing homelessness were assisted into housing.

Among those experiencing homelessness at first presentation, ACT clients were slightly more likely than the national average to be couch surfing or living in a dwelling without tenure (34.6% compared with 30.8%), and slightly less likely to be sleeping rough or without shelter (20.5% compared with 26.3%). However, in the month before receiving support, 23.8% of all ACT clients had been sleeping rough or living in non-conventional accommodation, above the national rate of 20.3%.




The high proportion of clients presenting already homeless is reflected in demand for accommodation support. In 2024–25, 76% of ACT clients reported needing accommodation assistance, compared with 59% nationally. However, most clients requiring accommodation did not receive the service they needed (figure 12), highlighting the gap between demand and available housing pathways.

**Figure 12. ACT clients, by most needed accommodation type and service provision status (%), 2024–25**

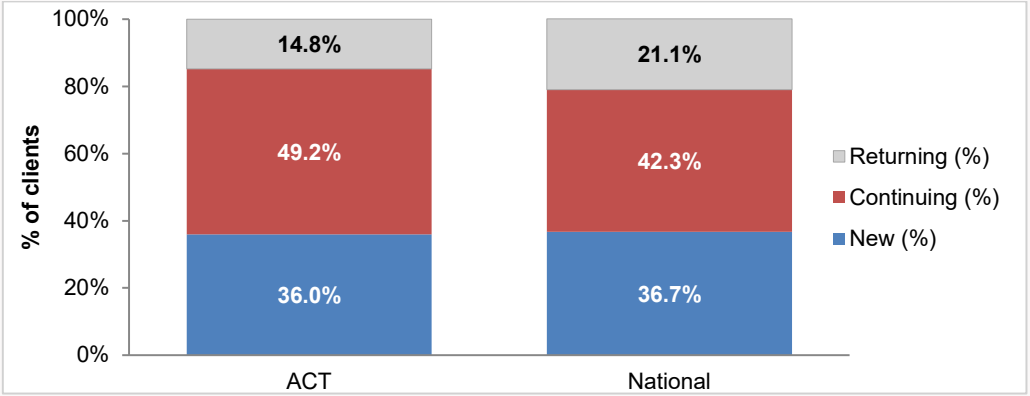



*Source: AIHW, Specialist homelessness services annual report 2024–25*

### *New, continuing and returning clients*

The ACT homelessness service system also has a distinctive client profile, with a higher proportion of people remaining engaged with services from one year to the next. While the share of new clients is similar to the national average (36.0% in the ACT compared with 36.7% nationally), the ACT has a substantially higher proportion of continuing clients – people receiving support in the current year who also received support in the previous year – and fewer clients returning after a longer period away from services.

**Figure 13. Service user group composition (new, continuing & returning clients), ACT and Australia, 2024–25**




*Source: AIHW, Specialist homelessness services annual report 2024–25, Table CLIENTS.40.*

### *Lower rates of case management*

In 2024–25, 55.7% of ACT SHS clients with closed support had a case management plan, compared with 65.1% nationally. This gap is longstanding: the ACT rate has remained consistently below the national rate over the past five years (38–47% compared with 54–55% nationally between 2020–21 and 2024–25), suggesting an ongoing difference in service delivery practice rather than a recent change.

The reasons recorded for clients not having a case management plan vary considerably in the ACT, particularly compared with national trends. The proportion attributed to "other reason" rose sharply to 41.8% in 2024–25, compared with a stable national rate of around 11–12%, while "service episode too short" has also fluctuated substantially. These variations may suggest differences in recording practices or interpretation of categories may be influencing the data.

### *Financial assistance for people experiencing or at risk of homelessness*

Financial hardship and housing affordability pressures are among the leading reasons people seek homelessness assistance in the ACT. In 2024–25, the ACT recorded the highest proportion of SHS clients experiencing affordability stress nationally, with the share more than doubling over the past decade from 6.3% in 2014–15 to 15.0%.

Despite this, financial assistance appears comparatively limited. Only 13.0% of ACT SHS clients received financial assistance in 2024–25, less than half the national rate (27.8%). Average assistance to establish or maintain a tenancy was also substantially lower in the ACT ($687 compared with $1,538 nationally), despite high local rental costs.

By contrast, ACT assistance is more heavily weighted toward crisis accommodation, with average payments for emergency accommodation ($4,685) exceeding the national average ($3,272) by around 43%. This suggests the ACT response is weighted more toward crisis intervention than earlier tenancy sustainment measures that could help prevent homelessness.

### *The ACT has the highest rates of persistent homelessness in Australia*

The ACT has recorded the highest rate of persistent homelessness of any jurisdiction for several years. In 2024–25, 37.7% of ACT SHS clients experienced persistent homelessness, compared with 27.4% nationally. The rate was even higher among Aboriginal and Torres Strait Islander clients (around 40%).

Persistent homelessness is also strongly associated with complex needs: more than half of persistently homeless clients had a current mental health issue, and children and young people accounted for more than half (52%) of those experiencing persistent homelessness in the ACT.

These figures highlight the urgent need for stronger pathways into permanent housing, alongside culturally safe, age-appropriate and wraparound supports for people experiencing complex and prolonged homelessness.

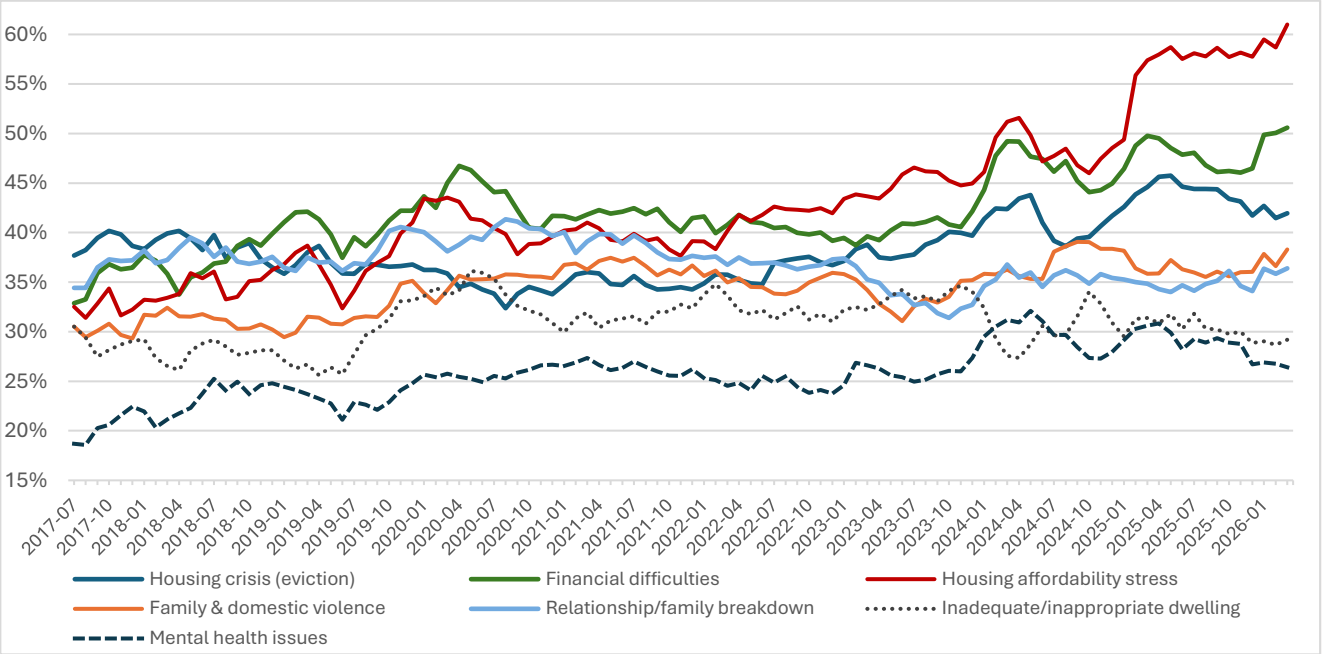
## Reasons people sought assistance from homelessness services

During 2024-25, the three most frequently identified reasons for seeking support were:

- **housing affordability stress** (61%, compared with 36% nationally)
- **financial difficulties** (57%, compared with 41%)
- **housing crisis** (53%, compared with 38%).

Monthly data shows a clear long-term shift in the drivers of homelessness assistance. Figure 5 shows the *percentage of clients* who identified the specified reasons for assistance, while Figure 6 displays the *number of people* each month. While reasons for seeking support fluctuate over time, housing affordability stress has increased steadily since 2017, overtaking all other categories from 2023 onwards to become the most commonly identified reason. This reflects the growing impact of housing costs on Canberrans on lower incomes.

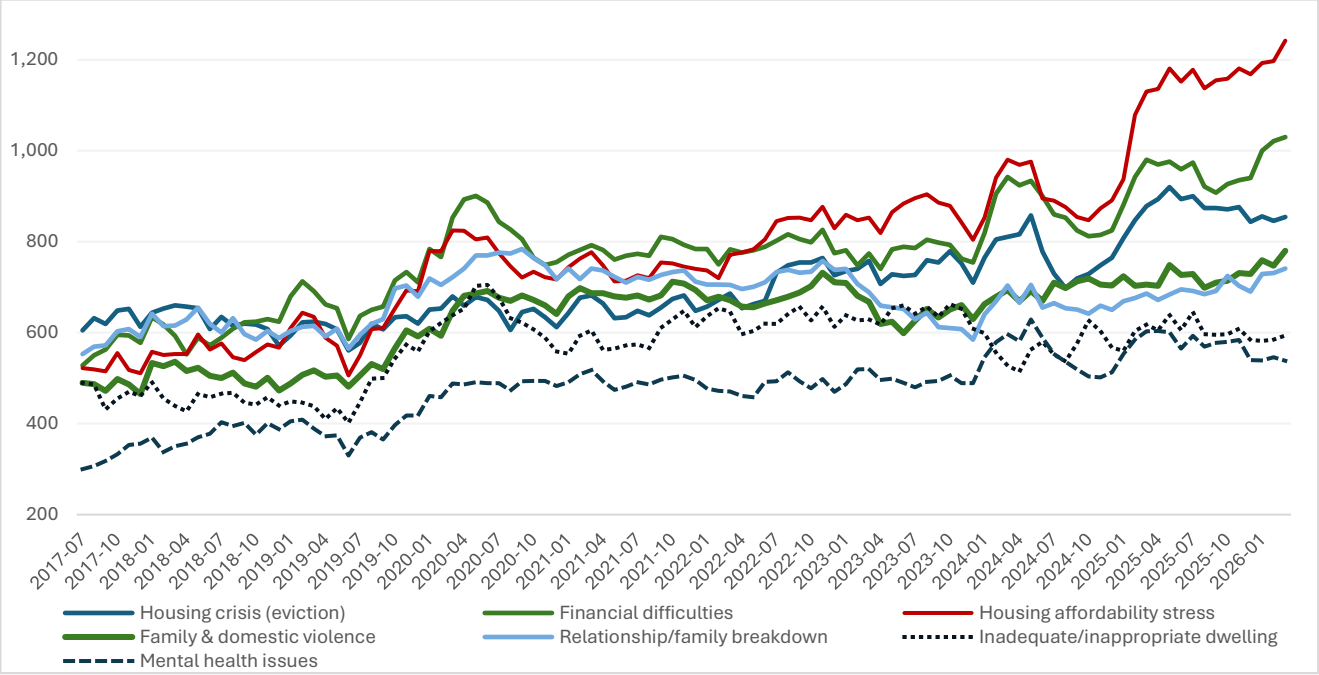
**Figure 14. Reasons for seeking assistance (as percentage of all clients), ACT, Jul 2017 – Mar 2026***




*Source: AIHW, Specialist Homelessness Services, Monthly Data Tables, May 2026.*

** NB: Percentages show the proportion of clients who specified that reason within a given month. The sum of these percentages across the different reasons stated is greater than 100% for each month because a client can specify multiple reasons for seeking assistance. However, each individual reason is counted only once per client across all their support periods active during the month.*

**Figure 15. Reasons for seeking assistance (number of clients), ACT, Jul 2017 – Mar 2026**




*Source: AIHW, Specialist Homelessness Services, Monthly Data Tables, May 2026.*

When clients in 2024–25 were asked to identify the **main reason** for seeking assistance, accommodation-related circumstances were the dominant factor for ACT clients, cited by 47.4% of clients compared with 54.5% nationally. Housing crisis (26.9%), housing affordability stress (14.9%) and inadequate or inappropriate housing conditions (17.0%) were all more common in the ACT than nationally.

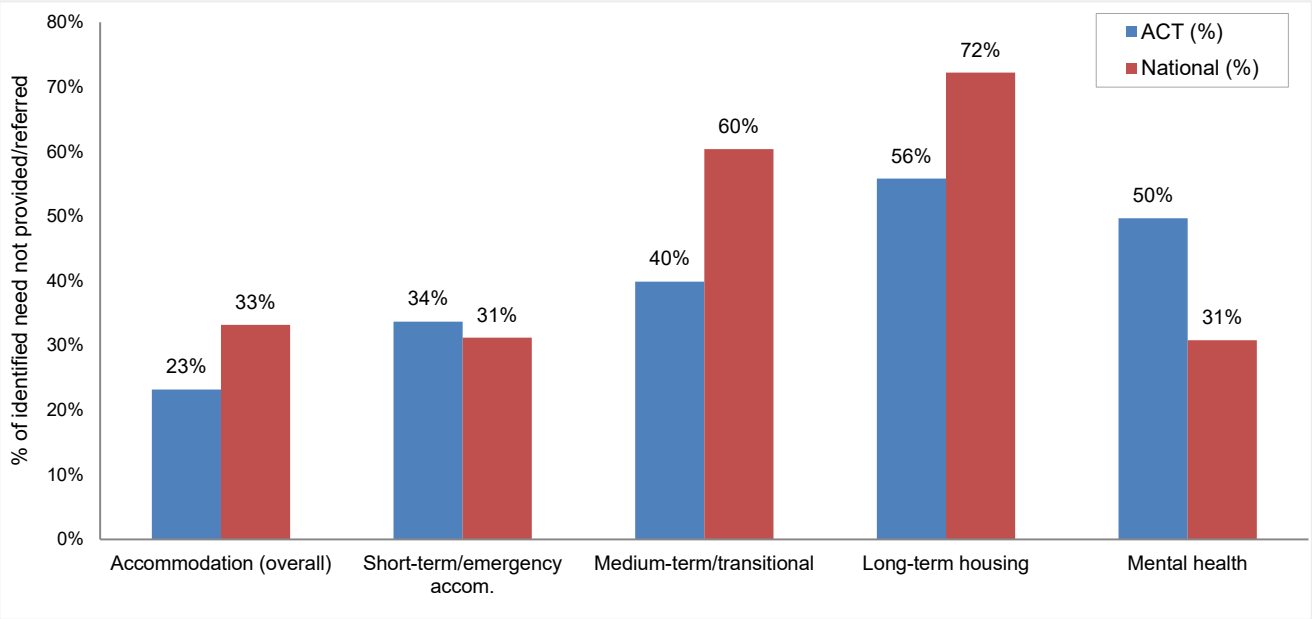
By contrast, interpersonal relationship reasons – including family and domestic violence (13.0% ACT vs 26.7% nationally) – accounted for a smaller share of ACT clients' main reason for seeking assistance than the national pattern, while financial difficulties followed a similar trend (3.3% vs 10.1%).

# Unmet need and service gaps

## *Need identified versus need met*

The AIHW data tracks, for each service type, whether an identified need was actually provided, referred elsewhere, or not provided/referred at all, providing an indication of service gaps (figure 16).

**Figure 16. Share of identified need not provided or referred, by service type, ACT vs National, 2024-25**




*Source: AIHW, Specialist homelessness services annual report 2024–25, Table CLIENTS.24.*

Long-term housing is the standout gap in both the ACT and nationally: 51.9% of ACT clients were identified as needing long-term housing, but only 9.3% actually received it, leaving 55.8% of that identified need unmet (not provided or referred). Mental health need was identified for 22.5% of ACT clients (nearly triple the 8.4% national rate), yet the ACT unmet rate for mental health support is also high, at 49.7% versus 30.8% nationally, indicating ACT SHS clients are both more likely to need mental health support and comparatively less likely to have that need actually met.

By contrast, medium-term/transitional housing shows the ACT performing better than the national pattern on unmet need (39.9% unmet in the ACT vs 60.4% nationally), and overall accommodation provision unmet need is lower in the ACT (23.2%) than nationally (33.2%), suggesting the ACT's relative strength lies in shorter/medium housing responses, while long-term housing and mental health support remain the most significant, and most consistent, gaps.

## *Unassisted requests*

The ACT recorded a daily average of just 0.9 unassisted requests (people who sought help but received none) in 2024–25, equivalent to roughly 342 requests across the year.

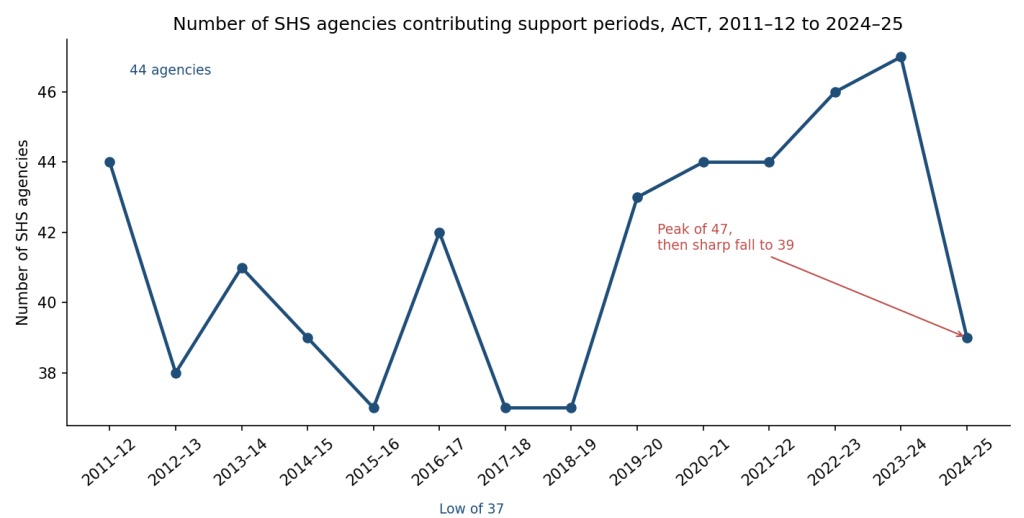
However, these figures should be interpreted cautiously. The AIHW notes that jurisdictions with centralised intake models, such as the ACT, generally record fewer unassisted requests because intake services are required to provide some form of assistance to everyone who presents.

Historical data shows ACT annual unassisted requests have fluctuated between roughly 280 and 470 since 2017–18, without a clear sustained trend. However, the profile of people unable to receive assistance has changed: while single parents accounted for the largest share of unassisted requests in 2017–18, people presenting alone now represent the overwhelming majority of those who do not receive assistance.

## Service system capacity: number of SHS agencies over time

The number of agencies contributing SHS data in the ACT gives a rough proxy for the scale of the local service system, though it does not capture agency size, funding, or service intensity.

**Figure 17. Number of SHS agencies contributing support periods, ACT, 2011–12 to 2024–25**



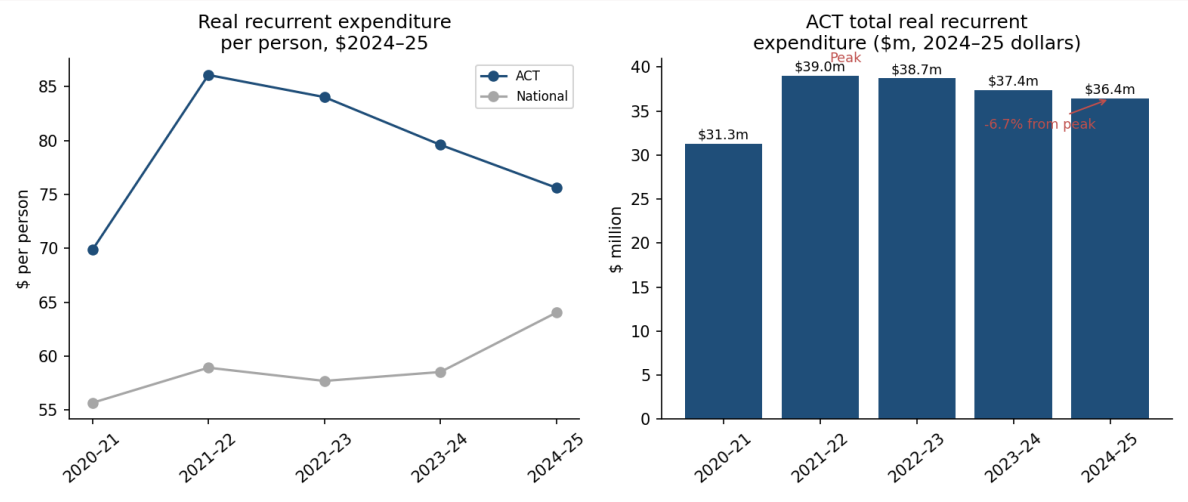

*Source: AIHW SHS Annual Report 2024-25, Table OVERVIEW.1.*

The number of ACT agencies has fluctuated between 37 and 47 over the period, without a clean, sustained downward trend. However, the most recent year shows a sharp fall, from 47 agencies in 2023–24 to 39 in 2024–25 — a 17% drop in a single year.

## Expenditure on homelessness services

The ACT spends more per person on homelessness services than the national average, and has done so throughout the past five years, however real expenditure has been falling for the last three years running.

**Figure 18. Government recurrent expenditure on homelessness services (real, 2024–25 dollars), ACT vs National, 2020–21 to 2024–25**




*Source: Productivity Commission, 2026, Report on Government Services, PART G, TABLE 19A.22, Table 19A.1.*

In 2024–25, the ACT spent $75.63 per person on homelessness services in real terms, well above the national average of $64.05, and higher than every state other than the NT (which is an outlier reflecting its small, dispersed population and very high need). However, the ACT's total real recurrent expenditure peaked at $39.0 million in 2021–22 and has fallen in each of the three years since, to $36.4 million in 2024–25, which represents a real-terms decline of 6.7% from the peak.

# What distinguishes the ACT nationally

| Dimension | ACT pattern relative to national |
|---|---|
| **Overall client trend (2011–12 to 2024–25)** | Client base down 25% and per-capita rate down 42%, while national numbers rose 22% and the national rate held flat. At the same time, there has been an uptick in monthly service usage since 2017. |
| **Is the decline a fall in real need?** | Unlikely to be the main story: Census-measured homelessness fell only ~3% (2016 to 2021, ACT and national alike) while the ACT's SHS rate fell 26% over a comparable window. Increasing complexity of need and duration of support suggest service system is under significant strain. |
| **Persistent homelessness** | Highest of any state or territory every year 2020–21 to 2024–25 (37.7% in 2024–25 vs 27.4% national) |
| **Returning to homelessness after housing** | Rising in the ACT (10.6% to 13.2% since 2021–22) while falling nationally (11.5% to 9.8%) — ACT now worse than national |
| **Preventing at-risk clients becoming homeless** | Falling sharply in the ACT (77.9% to 69.2% since 2021–22) while stable nationally (~80–81%) |
| **Homelessness expenditure** | Highest per-capita spend of any state (above national average throughout), but real total ACT spend has fallen 6.7% since peaking in 2021–22 |
| **Number of SHS agencies** | No clean downward trend 2011–12 to 2023–24, but a sharp 17% one-year fall in 2024–25 (47 to 39 agencies) worth monitoring |
| **Complexity of need** | Markedly higher — more than double the rate of clients with all three of FDV, mental health and AOD issues (6.9% vs 3.3%) |
| **Mental health** | Substantially higher prevalence (49.5% vs 30.7%) and rising steadily for over a decade (+3.1%/yr); larger unmet-need gap (49.7% vs 30.8% not provided/referred) |
| **Drug/alcohol issues** | Higher prevalence (13.6% vs 8.5%), though raw client numbers have been gently declining in the ACT (-1.3%/yr) unlike nationally (+0.5%/yr) |
| **Duration of support** | Much longer — median 117 days vs 58 days; 150 vs 34 median nights accommodated |
| **Caseload stability** | More continuing clients (49.2% vs 42.3%), fewer returning clients (14.8% vs 21.1%) |
| **Disability** | Lower recorded share (2.7% vs 3.1%) and a decade-long declining trend (-1.1%/yr) against national growth (+2.4%/yr) — potentially an identification/access gap |
| **Care leavers** | Higher share of clients (3.9% vs 2.2%), a longstanding rather than new gap (ACT flat, national rising +2.3%/yr) |
| **Aboriginal & Torres Strait Islander clients** | Client numbers essentially flat since 2011–12 (+0.3%/yr) despite near-doubling nationally (+5.1%/yr) |
| **Children/young people alone** | Falling faster in the ACT (-7.1%/yr) than nationally (-1.2%/yr) |
| **Long-term housing gap** | Majority of need unmet, but somewhat less severe than nationally (55.8% vs 72.2% unmet) |
| **Single parents** | Smaller share of all presentations (21.8% vs 29.0%) but larger share within the FDV caseload (52.6% vs 46.1%) |
| **Unassisted requests** | Reported as very low, but not reliably comparable due to the ACT's centralised intake model |
| **Rough sleeping (month prior)** | Higher than national rate (23.8% vs 20.3%) despite ACT's low visible rough-sleeping population |