

People who received alcohol and other drug treatment services and specialist homelessness services who have died

Louise Tierney¹, Jennifer Brew¹, Nikki Schroder¹, Chris Killick-Moran¹

¹Australian Institute of Health and Welfare (AIHW), Canberra, Australia

Presenter's email: louise.tierney@aihw.gov.au

Introduction:

In Australia, premature death has been found among clients of specialist alcohol and other drug treatment services (AODTS) and specialist homelessness services (SHS); a high proportion from preventable causes [1,2]. There is little nation-wide evidence of mortality among people receiving support from both AODTS and SHS service systems.

Methods:

Mortality among people receiving both AODTS and SHS support since 2012 was examined using linked data over the study period July 2012 to June 2023. Data were limited to ages 10 and over. The SHS and AODTS client sample contained around 1.9 million de-identified records, which were matched against the National Death Index. A range of descriptive statistics and crude mortality rates were examined.

Key Findings:

Throughout 2012–23 almost 65,000 people died and had a history of AODTS and/or SHS support, comprising 27,300 who had received SHS only, 25,900 who received AODTS only, and 11,800 who had received both services.

Around 3 in 10 deaths (29% or 11,200) among people aged 25–40 in Australia during 2012–23 had received either SHS, AODTS or both services at some point since 2012. Median age at death was younger among people who received both SHS and AODTS (46 years) compared with AODTS-only clients (54 years) and SHS-only clients (60 years).

Throughout 2012–23, among deaths in people who received both SHS and AODTS, almost 2 in 5 (37% or 4,400) were treated for alcohol only throughout their specialist AOD treatment history. In 2022–23, over 3 in 5 (63% or 1,300) deaths among people who received both SHS and AODTS were potentially avoidable – over 3 potentially avoidable deaths per day.

Discussions and Conclusions:

Understanding the patterns, trends and causes of deaths among this vulnerable group may highlight health inequalities and inform prevention services, and improvements to policy and service design.

Implications on communities, practice, policy and/or First Nations communities:

More regular, robust measures of health outcomes among vulnerable groups would be achieved if integrated data were embedded in regular reporting and outcomes frameworks, advancing current reporting frameworks that routinely use data from single systems or programs.

Disclosure of Interest Statement:

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governments, as described in the National Agreement on Social Housing and Homelessness.

The National Deaths Index (NDI) is a Commonwealth dataset maintained by the AIHW. It contains records of deaths registered in Australia since 1980. Data comes from Registrars of Birth, Deaths and Marriages in each jurisdiction, the National Coronial Information System and the Australian Bureau of Statistics.

References:

1 [*People who received specialist Alcohol and Other Drug Treatment Services in their last year of life*](#), AIHW, Australian Government, accessed 05 January 2026

2 [*People receiving specialist homelessness services support in the last year of life*](#), AIHW, Australian Government, accessed 05 January 2026