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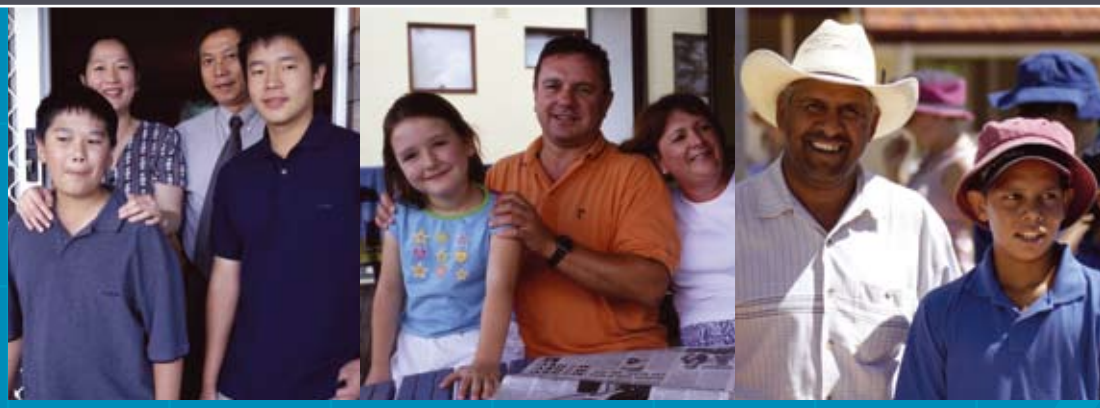

Household Organisational Management Expenses (HOME) Advice Program Evaluation Report 2007

Improving the lives of Australians

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June 2007

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Disclaimer

This report was prepared by the Institute for Social Research at Swinburne University. The views expressed within the report do not necessarily represent the views of the author or the Department of Families, Community Services and Indigenous Affairs.

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Glossary of Terms

Action Research
Practice-focused research whereby plans are implemented, data collected, the evidence of practice reviewed leading to revised concepts about what should be done. Sometimes referred to as 'practitioner-guided research' the process is cyclical and the outcomes may be highly valid for the local situation while not necessarily being so more broadly.

Client Case
A case or a family supported through the HOME Advice Program. A family or case is defined as a group of two or more persons who usually live in the same household and who are related to each other by blood, de facto or de jure marriage or adoption.

Homelessness
The definition of homeless in this report is the three category definition of homelessness used by the Australian Bureau of Statistics for the 2001 and 2006 Census collections:

- Primary homelessness: people without conventional accommodation – living on the streets, sleeping in deserted buildings, in cars, under bridges, in impoverished dwellings.
- Secondary homelessness: people moving between various forms of temporary shelter, including emergency accommodation, hostels, friends, relatives.
- Tertiary homelessness: people living in single rooms in private boarding houses on a long-term basis, without their own bathroom, kitchen or security of tenure.

Housing Authority
A housing authority is a state or territory government agency responsible for providing public housing.

Early Intervention for families
An intervention directed to at-risk families facing the prospect of homelessness in the near future if their current situation continues and worsens.

Parenting Payment (PP)
Parenting Payment (PP) is a Centrelink payment to an eligible parent who has a child under 16 years of age.

Minimum Data Set (MDS)
The minimum data set records information about circumstances, service delivery and outcomes for clients.

Newstart Allowance (NSA)
Newstart Allowance (NSA) is a Centrelink payment for eligible job seekers, over 21 years who are unemployed.

Reconnect
An Australian Government funded early intervention program for young people, who are homeless or at risk of becoming homeless, with 100 service providers throughout Australia. Four years funding of $85,000,000 in the 2007 budget was announced by the Minister for Community Services Hon Nigel Scullion on 24th April, 2007.

Site
A site is the geographic area where a HOME Advice Program agency is located and operates.

Supported Accommodation Assistance Program (SAAP)
SAAP is the national supported accommodation program in Australia funded under a special program agreement between the Australian Government and the states and territories. Most SAAP services provide accommodation and support for homeless people in crisis or under transitional support arrangements.

Support Period
A support period is the length of time that a family has received support from a community provider (CP).

Youth Allowance (YA)
Youth Allowance (YA) is a Centrelink payment for eligible job seekers under 21 who are unemployed and full-time students 16–24 years.

NDCA
The National Data Collection Agency is the central body for collecting data on all SAAP funded services within Australia

Supported Housing Assistance Program (SHAP)
This is a Western Australian program funded by the Department of Housing and Works that targets support to at-risk families living in public housing to prevent eviction.

Rental Indicator (RIND)
The 'at-risk' indicator derived from the ABS census data on families in rental accommodation.

Homeless Indicator (HIND)
The 'at-risk' indicator derived from the estimated number of homeless families by state and territory using the Counting the Homeless data.

Acknowledgements

This evaluation was commissioned by the Australian Government Department of Families, Community Services and Indigenous Affairs (FaCSIA). The project was managed by FaCSIA along with the Centrelink National Office and we would like to thank David McGinniss and Lucetta Thomas (FaCSIA National Office), as well as Heather Malerbi and Peter Humphreys (Centrelink National Office) for their valuable guidance and support throughout the duration of the first year of the evaluation and more recently Terri Francis, Klaudia Greenaway (FaCSIA) and Mira Grin from Centrelink. Ellen Wood from FaCSIA has had overall responsibility for this project and Ellen's critical input has always been very helpful over the duration of the evaluation.

A comprehensive consultation was undertaken across the whole program and included visits to each site in their home state and/or territory. During these visits we spoke with all staff of the HOME Advice Program, the community agency provider senior managers, Centrelink senior social worker supervisors, as well as workers from other programs and services. We also met with some of the families who had been assisted through the HOME Advice Program. We would like to extend our appreciation to all the stakeholders who took time out to come and speak with us. We would also like to extend a special thank you to the community agency workers and Centrelink HOME Advice social workers in each of the HOME Advice Program sites, who organised the consultation schedules and talked with us about the program. This provided us with a rich and robust source of qualitative data to learn and work from. In particular, we would like to thank:

- The Victorian HOME Advice Program team for their participation and effort in trialling the follow-up survey which was conceived by the Family Focus team in Dandenong and later adopted as an important data collection tool for this evaluation.
- The South Australian HOME Advice 'Wodlitinattoai' Program and the Northern Territory Program for their insight, knowledge and expertise on homelessness for Indigenous families;
- The NSW, Tasmanian and Northern Territory (along with the Victorian) HOME Advice Program teams for their valuable participation on the discussion board of the evaluation website.

We would like to gratefully acknowledge the committed support of colleagues from Swinburne University: Ms Liss Ralston who did the statistical analysis for the interim report, and Jascher Zimmerman and Dr Denny Meyer who undertook data analysis for the final report. Finally, thanks to Ms Grace Lee, the administrator at the Institute for Social Research (ISR) who provided administrative support for the duration of the project.

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Introduction

The HOME Advice Program has been developed as a response to family crises involving many issues but in all cases accompanied by a financial crisis leading to the risk of homelessness. The policy thinking underpinning the HOME Advice Program initiative was that the prevention of homelessness is better than dealing with homeless families and children. In 2005–06, $323.9m was spent on homelessness services through the Supported Accommodation Assistance Program (SAAP). Without early intervention and prevention, at risk families will become homeless families – currently some 30 per cent of SAAP clients are families with 54,700 accompanying children.

The HOME Advice Program is an innovative government initiative of 'early intervention' and prevention of homelessness between government and the community sector and as a highly effective intervention to support Australian families in need. The precursor to HOME Advice was the Family Homelessness Prevention Pilot (FHPP) and in 2004, on the basis of positive evaluation findings, the pilot program was developed into a more established, albeit small program – HOME Advice.

Table 1: Client families assisted, HOME Advice Program (2004–07), FHPP (2002–04)

Case Type	Families Assisted	Adults	Children
FHPP cases	554	874	1,146
HOME managed cases	611	897	1,316
HOME casual clients	714	933	1,423
Additional HOME cases 2007	159	232	329
HOME open cases May 31 2007	152	241	370
Totals for HOME Advice	1,636	2,303	3,438
Totals for HOME Advice + FHPP	**2,190**	**3,177**	**4,584**

In the three years 1 July 2004 to 30 June 2007, the HOME Advice Program has assisted 1,636 families (an average of 545 per year) or 2,303 adults and 3,438 children (counted up to 30 June 2007). Casual clients were families who received support under the program but not full case management. Apart from a shorter support period casual clients were similar to client families. The program currently consists of one agency per state and territory jurisdiction. The past three years have focused on refining the model and by means of a strong evaluation to assess the evidence that would bear on decisions about the future of the initiative.

This report is the final evaluation report of the HOME Advice Program. The report focuses on three core themes:

- establishing the need for a response to family homelessness due predominantly to a multitude of issues leading to a mounting financial crisis and the prospect of homelessness;
- the effectiveness of the HOME Advice Program in preventing at risk families becoming homeless;
- the efficiency with which the program delivers these outcomes for families.

The evaluation was required to examine and measure the effectiveness as well as issues of cost-efficiency and cost effectiveness for the program. Extensive fieldwork at the eight sites gathered a large database of first hand qualitative information from workers and sometimes client families. All these discussions were fully transcribed for analysis. Family case studies were obtained to provide detail on the experiences of working with different families. When individuals are mentioned by name and their circumstances detailed, these are composite cases that have been de-identified by combining the events and features of several real people, but they provide illustrative detail about issues. Where quotes are used they have been de-identified. Program documents were sourced and the evaluation team took charge of processing the client and casual client data forms. This data formed the base quantitative data for the evaluation. However, a follow-up survey of clients in 2005 was done to find out how sustainable the program outcomes were in the 12 months or so after the end of support.

During the evaluation a website was deployed as yet another means of gathering data but at the same time providing for better communication within the program. The HOME Advice Program evaluation website went 'live' in late April 2006 and proved to be a good source of information and qualitative data for the evaluation. A number of discussion boards were set up on core topics of the program including: Early Intervention; Casual Clients; and Centrelink/Community Agency Partnership. The discussion forums added value to and complemented the information gathered by the evaluation team during the national site visits in late 2004 and early 2005 and provided opportunities for the evaluators to ask questions about emerging issues and clarify the analysis.

The logic of the evaluation report is to begin with the need and the characteristics of the client families entering the program, followed by a description of the model and how it is implemented in practice. Is the program effective and what are its costs, including the long-term cost-benefit position? Thus, Chapter 2 establishes the need for the program and provides information on the families supported through HOME Advice. In the broadest terms, need is the number of families at-risk of becoming homeless. Another indication of need is the number of families referred to the agencies or who seek assistance. Chapter 3 describes the program model and reflects on the model-in-practice. In Chapter 4, the practical work of the community agency workers and the Centrelink HOME Advice social workers is discussed. Because a developmental approach was followed, there is a good body of practice knowledge and a small but sufficient critical mass of experienced people who could resource new workers and agencies in an expanded program. Chapter 5 discusses program management and raises some points for consideration in moving forward to an expanded program as well some policy issues for further consideration. Chapter 6 lays out the main findings about the effectiveness of the program while Chapter 7 makes the required cost comparisons and works through the complexity of a cost-effectiveness and cost-efficiency analysis. Finally, Chapter 8 summarises the strengths of the program and Chapter 9 proposes two recommendations for consideration.

Executive Summary

The Household Organisational Management Expenses (HOME) Advice Program is an Australian Government early intervention initiative designed to assist families who are at risk of becoming homeless. It is a highly flexible early intervention program with the capacity to respond to the broad range of issues which may contribute to a family's housing instability. The program uses a holistic, strengths based, family centred practice approach to provide support to the whole family unit including parents, children and other household members. A unique component of the program is its capacity to respond quickly and effectively to a family's income support issues through a dedicated Centrelink HOME Advice social worker specifically designated to work with the program and its client families.

Family homelessness has become a major issue for homelessness policy and practice and families make up a significant group within the broader homeless population. The precursor to the HOME Advice Program was the Family Homelessness Prevention Pilot (FHPP) which began in 2002 with the Australian Government committing $5 million over 3 years. The program is an initiative under the National Homelessness Strategy and signified the first national early intervention effort directed specifically to family homelessness prevention. In the 2004–05 budget the Australian Government committed $10.4 million over four years to the HOME Advice Program. The HOME Advice Program represents an important national level strategic partnership between an Australian Government department (FaCSIA), an Australian Government agency (Centrelink) and non-government service providers. Currently, there are eight HOME Advice Program sites, one in each state and territory.

Need and Context

- In the context of the HOME Advice Program 'at risk' means risk of becoming homeless. Families include couples without children, couples with children and single adults with children.
- Estimating the potential population of families who are at risk of homelessness is complex. However, two estimates by different methods using *Counting The Homeless 2001* and ABS 2001 Census data suggest conservative point-in-time population figures of between 7,800 and 15,800 families at risk of becoming homeless in Australia. The 'at risk' population over a year could be twice the point in time estimate (between 15,000 and 30,000) but there is no simple way of estimating this multiplier. Service provision capacity needs to consider both 'point-in-time' and annual figures of need.
- It is now well recognised that programs and strategies that focus on early intervention and prevention are the best way of achieving the desired outcomes for families and individuals experiencing difficulties. Early intervention programs such as Reconnect and the HOME Advice Program are exemplars of this approach.

- HOME Advice strongly aligns with the Government's priorities for greater self-reliance and economic, social and community engagement for Indigenous Australians, participation for marginal groups, choice and opportunities for families and children and strong and resilient communities.

Profile of HOME Advice Families

- Altogether, the HOME Advice Program and its predecessor the Family Homelessness Prevention Pilot Program (FHPP) have assisted a total of 2,190 families including 3,177 adults and 4,584 children since its inception in 2002. From 1 July 2004 to the 30 June 2007, the HOME Advice Program has assisted 1,636 families including 2,303 adults and 3,438 children.
- While families entering the HOME Advice Program are more likely to be female headed sole parent families (52%) most with at least two children, there is also a significant minority of male headed sole parent families (6%). The majority of HOME Advice families are on some type of Centrelink benefit (89%), with many not in the labour force (59%). While most families reside in rental housing (either private or public) and have never been homeless before, there is a small group of families who have mortgages.
- Aboriginal and Torres Strait Islander families were specifically targeted at the South Australian site and just over half (51%) of client families presenting to the agency in the Northern Territory were Indigenous families. The total proportion of Indigenous client families supported by the HOME Advice Program across all states and territories was 27 per cent (all or some family members identify as Indigenous).
- Families born outside of Australia account for about 14 per cent of all HOME Advice client families. For the Victorian agency in Dandenong more than 50 per cent of families assisted in 2005–06 were from non-English speaking backgrounds. On a national level, this Victorian figure represents 42 per cent of all HOME Advice Program families who are from non-English speaking backgrounds. Eight per cent of the culturally and linguistically diverse families in the HOME Advice Program either could not speak English well or could not speak English at all.

Program Design and Service Model

- There are five core components that make up the HOME Advice Program model. These are:
  - *Early intervention* which involves identifying and reaching families before they become homeless and assisting them to avert homelessness through sustainable changes in their situation and circumstances.
  - *Holistic approach to interventions* which is working with all relevant family members including, children, grandparents, aunts, uncles, adult siblings and other extended family and/or household members. Working holistically also involves a dedicated capacity to respond appropriately to Indigenous family homelessness with an early intervention capacity.
  - *Strengths based, family centred practice* is focused on working along the full continuum of issues that families may have and for however long such support and assistance is needed.
  - *Flexible brokerage* incorporates the provision of financial assistance to client families where other community and government resources are not available or simply do not exist and when immediate financial assistance will provide a sustainable outcome.
  - *Creating and maintaining partnerships* ensures that the HOME Advice Program does not function in isolation from other services or sectors. The partnership between the community agency providers and Centrelink is the central partnership of the program and is an important component in the success of the HOME Advice Program.
- The HOME Advice service response follows a clear program logic that is designed to efficiently address a family's immediate housing and financial crisis in order to prevent further deterioration of their situation. This process involves: receiving 'timely referrals' from sources that are in a position to identify 'at risk' families; conducting appropriate assessment to ensure that a family is at risk of homelessness; relieving the immediate situation through addressing the financial and housing crisis, and ongoing support.

- The aim of this support is to assist families to achieve sustainable changes in their circumstances in order to strengthen parental self-confidence, improve relationships, and encourage a stronger sense of family unity and increase resilience. On average, families are supported for six months (23 weeks). The outcome is that this leads to family stability with a low risk of homelessness recurring.
- The HOME Advice 'Wodlitinattoai' program in Salisbury, South Australia is solely targeted to assist Indigenous families. The Wodlitinattoai program has developed an Indigenous specific early intervention practice framework and successfully tested the HOME Advice Program model in an Indigenous cultural context.

HOME Advice in Practice

- The Centrelink-FaCSIA-community agency partnership is an important innovative feature of the HOME Advice Program model. A close partnership between the Centrelink National Office support staff and the community provider as well as a close working relationship between the Centrelink HOME Advice social worker and the community agency HOME Advice workers in each state and territory are necessary conditions for overall program effectiveness. The ability of the dedicated Centrelink HOME Advice social worker to resolve complex income support related problems immediately is a critical component for successful early intervention.
- While each of the HOME Advice Program sites existed in a different community context and had some unique features, day-to-day practice was remarkably similar.
- A close relationship with the Centrelink HOME Advice social worker working on site at the community agency was trialled in most states and territories. In some, co-location involved the Centrelink HOME Advice social worker on site for the full complement of three days per week, while in other sites they would work from the community agency one or perhaps two days per week.
- For many Indigenous communities, kinship obligations place a significant burden on families, which contributes to financial and housing stress. Here, the HOME Advice Program's main aim is to assist the family to build a capacity for practical strategies to deal with these situations.
- Workers from the Indigenous dedicated site noted that first contact is an important stage in engaging Indigenous families and securing their trust. The Indigenous community at this site was noted as 'tightly knit' and an individual's last name would identify kinship connections, family ties/relatives and traditional land origins. Careful attention was paid to a range of cultural issues such as the kin group Indigenous families came from, and the state of family and community relationships.

Program Management

- Management of the program was the responsibility of the Housing Policy and Support Branch in FaCSIA (previously FACS) while supervision and deployment of the Centrelink social work staff was undertaken through Centrelink.
- Support to the HOME Advice Program was delivered by members of the FaCSIA team, assisted and supported by senior staff from the Centrelink National Support office. Visits were carried out and were important opportunities to inform program administrators about implementation issues, as well as opportunities for feedback from community agency HOME Advice Program staff. The interaction also provided some scope for problem solving of partnership, program and system level issues.
- As well as visits, there have been regular teleconferences between the sites and the FaCSIA National Office and Centrelink National Office team. On all accounts these have been regarded as an important contribution to the discussion of issues and maintenance of good communication between the National FaCSIA and Centrelink team and the sites.
- It is particularly important to assess and record detailed information relating to client needs and issues. One reason is that since remaining in independent accommodation is a core outcome there needs to be a valid measure of 'at riskness' so that the target group entering the program can be adequately monitored.

Program Effectiveness

- Most families (84%) coming into the program were in some form of rental accommodation. Overall, some 86 per cent of families remained in adequate housing or improved their housing situation during their support period. For every 10 families passing through the program, eight to nine avoided homelessness over the time they were in contact with the HOME Advice Program and receiving support.
- The core program objective was for families to maintain adequate housing or an improved housing situation (i.e. homelessness is averted). While there was some variation between the states there was a generally high level of achievement of this program objective; Australian Capital Territory – 98%; New South Wales – 88%; Northern Territory – 82%; Queensland – 66%; South Australia – 92%; Tasmania – 86%; Victoria – 94%; and Western Australia – 86%.
- The key measure of effectiveness was housing stability and whether it was sustainable. The results from the follow-up survey done as part of this evaluation measured the level of sustainability on the outcomes for families some six to twelve months after they exit the program.
- The follow-up survey found that a total of 72 per cent of families did not experience homelessness after receiving support, while one in ten experienced a period of homelessness. For analytical purposes, the results of the follow-up survey for South Australia and the Northern Territory were separated from the other six sites (where the former is an Indigenous dedicated site and the latter has more than 50 per cent Indigenous client families, to provide an analytical profile approximate to the broader Australian population, as well as a separate analysis for Indigenous families).
- There was no significant difference in the outcomes for Indigenous families compared with non-Indigenous families at the end of the support period. The agency in South Australia was Indigenous-specific (92% achieved housing stability) and the Northern Territory where about half of the client families were Indigenous achieved 82 per cent.
- The level of program effectiveness achieved in the HOME Advice Program was higher than that of the youth homelessness pilot program in the lead-up to the Commonwealth's decision to launch the national Reconnect Program. The sustainability of housing stability and evidence of increased resilience for the supported families in the HOME Advice Program is a significant outcome of the program.

Program Efficiency

- The issue of long-term cost benefit and the HOME Advice Program cost effectiveness and cost efficiency were important considerations for this evaluation. In the homelessness sector, cost data has not been well developed and only one detailed analysis attempted.
- HOME Advice Program sites provided information on the key cost drivers of the program including staff hours (together with staff salaries), travel and brokerage costs. The cost per client family for the HOME Advice Program ranged from a high of $5,061 to a low of $2,078 and average of $3,079.
- The cost per client family of $3,079 for the HOME Advice Program compares favourably with the Western Australian Supported Housing Assistance Program or SHAP, which is an early intervention response for public housing tenants. Flatau (2007) has calculated an average unit cost per client family in SHAP of $3,300 or $3,247 in government funding. The support provided under SHAP is more limited than HOME Advice, which is more flexible, holistic and longer-term with access to brokerage funds.
- Without early intervention at risk families face the prospect of homelessness and the need for supported accommodation through the Supported Accommodation Assistance Program (SAAP). The HOME Advice Program average cost per client family of $3,079 is lower than the average cost of supporting families in SAAP. As given in the *Report on Government Services 2007*, the average cost per client in SAAP is $3,130, but the cost per client will be lower than this average for single clients and higher for families. Western Australian estimates for SAAP calculated by Flatau (2007) were $1,548 per individual support period and

$4,551 per family support period. However, these SAAP cost figures are based on support and operational costs and do not include a cost component for buildings. The total potential cost offsets from providing assistance to families at risk of becoming homeless will be substantially greater than the average cost of support to homeless families in SAAP.

- Providing assistance to prevent homelessness has a range of benefits for clients and for society. The alternative to an early intervention program is that a significant percentage of families at risk of homelessness become homeless and clients of SAAP. Homelessness has a significant and lasting impact on families, the educational achievement of children and family members' long-term and life-time earnings.
- Families make up some 30 per cent of SAAP support periods over a year, and the families in SAAP come with 54,700 accompanying children (SAAP NDCA Annual Report 2005–2006).
- Quantifiable benefits of the program largely relate to keeping children at school to achieve better life outcomes and keeping families in their homes.

Program Strengths

- The HOME Advice Program model is based on best practice principles and models of intervention in the fields of family work, homelessness and early intervention. These have been collectively applied to the issue of family homelessness for the first time on a national scale.
- A major success factor of the program was the robust gate-keeping practice of all sites to exclusively target families before they became homeless. Even in regional sites where SAAP and other homelessness services were sparse on the ground, the early intervention focus of the program was maintained.
- A potential threat to any early intervention approach is that demand for housing and related homelessness support services will overcome the preventative focus and lead to the service becoming a pseudo-SAAP provider. This did not occur at any of the HOME Advice Program sites.
- The community education aspect of the program extended to the critical 'first to know' agencies such as Centrelink, public housing authorities and real estate agents with a clear message about providing timely referrals to the program as early as possible once a family had been identified as 'at risk'.
- Working holistically with all relevant members of a family, from children to parents, de-facto partners, grandparents, extended family as well as with other household members is a unique strength of the HOME Advice Program.
- Strengths-based, family centred practice is premised on the principle that families change and learn through an appreciation of their strengths and aspirations. This is the foundation of the HOME Advice Program's constructive case-work. Focusing on a family's strengths is an important element of this approach and draws on a family's resilience and efforts in coping and surviving in their difficult economic and social circumstances.
- Achieving effective early intervention for 'at risk' families was largely attributed to the innovative cross-departmental effort that supported the partnerships between the Centrelink HOME Advice social workers and the HOME Advice community agency providers.

Recommendations

A. That the HOME Advice Program be expanded as an Australian Government early intervention/prevention program for assisting families at risk of homelessness. Any expansion of the program should pay attention to:

- The importance of the cross-government partnership between FaCSIA and Centrelink in the program model;
- A match between the quantum of service resources and the extent of need by geographical area in order to optimise effectiveness;
- A cyclical or phased rollout of new agencies;

- An evidence-based approach to program development;
- A strong capacity to assist Indigenous families.

B. That the HOME Advice Program agencies be developed with consideration of:

- A flexible partnership model whereby a Centrelink HOME Advice social worker and the community agency provider work collaboratively;
- Indigenous program units of expertise located within mainstream agencies;
- An action learning component leading to quality assurance and service development within the program;
- A capacity for building and maintaining the local service system as a community of support services for at risk families;
- A national program electronic data collection with client data, a satisfaction survey and a client follow-up survey.

1 Need and Context

Homeless families have become a major issue for homelessness policy and practice and now make up a significant group within the broader homeless population. In the context of the HOME Advice Program 'at risk' means there is a risk of becoming homeless. Families include couples with no children, couples with children and single adults with children.

Many families are vulnerable to losing their accommodation because of poverty. In these households, the main income earner is either outside of the labour market or long-term unemployed. Other households face the risk of homelessness because of an unexpected financial crisis that results in mounting debt. There is a significant difference here between couples and single parents. Single parent households are particularly vulnerable to the impact of unexpected financial crises because they have only one income, whereas dealing with issues is a little easier when they can be shared. Two people together not only have the potential for two incomes but also a wider social and family support network to draw on, so their vulnerability or risk is lower.

In reality, many families experiencing a housing crisis may also have a history of family violence issues. Although family breakdown does not necessarily involve extreme violence, it is highly emotional, involves difficult conflict and is a stressful experience for those involved. In cases of housing crisis brought on by a deteriorating financial position, vulnerability is tipped towards homelessness usually by precipitating life events. Arguably, these families make up a large constituency of 'need' for the HOME Advice Program

One measure of 'need' is the number of families seeking help from SAAP (NDCA SAAP data). This is a measure of 'expressed need' from families who actually become homeless during the year. A broader measure of need is the number of families who experience homelessness, many of whom do not seek help from SAAP during the year (Counting the Homeless, 2001) A yet broader population is the number of vulnerable families at risk of becoming homeless (estimated using some assumptions on the basis of the affordability of rental housing).

1.1 Homelessness in Australia – The Current Situation

The assessment of need undertaken for this report used two sources of data – firstly working from rental data on families and secondly using information on homeless families. The first source of data is the ABS census data on families in rental accommodation and the at-risk indicator derived from rental data is called the rental indicator (RIND). In 2001, the Homeless Census counted the number of homeless individuals (adults and children) by ABS statistical division and statistical sub-division based on the 2001 ABS census data. Although the number of homeless families cannot be derived in any simple way, there is some reliable national level information on the proportion of families in different sectors. A national estimate of the number of homeless families at a point in time can therefore be attempted.

The number of homeless families is an estimate because household data is not as adequately available for all sectors of the homeless population. Few families – couples or single parents with children – spend time sleeping out. In rural areas families in a primary homelessness situation are most likely to be residing in an improvised dwelling and this may be their permanent or semi-permanent way of life. Likewise it is difficult to establish the proportion of families in boarding houses.

The number of families in SAAP can be established over the year and at a point in time. This is about 35 per cent of the total population of homeless families (Counting the Homeless, 2001). Families staying with friends can also be enumerated and is about 5 per cent. The time families spend homeless has been estimated at 6–7 months (ABS, Counting The Homeless 2001). Over the year the number of homeless families will be somewhat higher than the point-in-time estimate but also there will be some double counting. The conservative assumption would be that a point-in-time estimate is the same as the annual number but in reality it is likely to be higher as families move in and out of homelessness. Table 2 presents the results of the estimations of at risk families – the HIND indicator being the estimated number of homeless families by state and territory, while the RIND indicator is the same estimate using ABS data on families in private rental, analysed using some conservative assumptions about 'risk' (see appendix 1).

Table 2: Profile of at-risk family indicator by state & territory, point-in-time figures

State	RIND	HIND
NSW	5,485	1,893
VIC	3,016	2,165
QLD	2,866	1,397
SA	1,567	851
WA	1,666	991
TAS	549	183
ACT	428	175
NT	235	186
Australia	**15,812**	**7,841**

The two estimates by different methods suggest conservative figures of a point-in-time population of between 7,800 and 15,800 families at risk of becoming homelessness in Australia. The more complex calculations which have produced these 'point-in-time' estimates are presented in more detail in appendix 1. It is also possible to make an estimate by geographical region. What needs to be considered is the fact that the homeless population has a high turnover rate as people become homeless and cease to be homeless. Moreover, the turnover of clients, including families passing through SAAP, suggests that the point-in-time figure and annual figures are not equal. The 'at-risk' population over a year could be twice the point-in-time estimate (between 15,000 and 30,000) but there is no simple way of estimating this multiplier. Service provision capacity needs to consider both point-in-time and annual figures of need.

Supported Accommodation Assistance Program Data

In 2004–5, the SAAP NDCA Annual Report gave an annual client number of 100,400 adults along with 56,800 accompanying children. In terms of annual client support periods, 32.6 per cent were provided to families mostly with accompanying children, 24 per cent were provided to young people, both males and females under 25 years, while 42 per cent of the support periods were for single people 25 years of age and older. The proportion of homeless families is probably somewhat higher than 32 per cent because in becoming homeless some families split up with a parent presenting to SAAP services as an individual, although the extent to which this happens cannot currently be determined (NDCA, 2005).

1.2 Government Programs

The Australian Government provides a range of programs and services that aim to alleviate or prevent homelessness. These include the various initiatives that specifically target the homeless or 'at risk' population as well as other related programs such as the Commonwealth Financial Counselling Program (for low income earners) and the Stronger Families and Communities Strategy (which has a broader focus on families, particularly those with young children).

Other Australian Government Initiatives such as the National Illicit Drug Strategy, the National Mental Health Strategy, the Women's Safety Agenda (incorporating Partnerships Against Domestic Violence) and the National Community Crime Prevention Program are also measures that relate directly or indirectly to efforts that target homelessness and homeless populations.

The National Homelessness Strategy

The Australian Government's broader response to homelessness is primarily coordinated through the National Homelessness Strategy (NHS), which outlines a framework for designing programs and policy responses that focus on the prevention and amelioration of homelessness. Its overall aim has been to foster a more strategic, national approach to homelessness that is informed by good practice in the field, innovative service models and evidenced based research. Specifically the four key objectives of the NHS are to:

- Provide a strategic framework that will improve collaboration and linkages between existing programs and services, to improve outcomes for clients and reduce the incidence of homelessness;
- Identify best practice models, which can be promoted and replicated, that will enhance existing homelessness policies and programs;
- Build the capacity of the community sector to improve linkages and networks;
- Raise awareness of the issue of homelessness throughout all areas and levels of government and in the community.

There are a range of initiatives funded under the NHS program. These include: the NHS Demonstration Projects, designed to trial innovation in preventing, reducing and/or responding to homelessness in identified priority areas.

The NHS links with other Australian Government Department programs and portfolios, that target disadvantage and also address homelessness, including SAAP, JPET, the Reconnect program and the HOME Advice Program. The oldest and largest of these is the Supported Accommodation Assistance Program (SAAP), operated in partnership with state/territory governments. SAAP was introduced in 1985 and provides accommodation and support to people who are homeless.

The Job Placement, Employment and Training Program (JPET) was introduced in 1992 to provide support and assistance to young people aged 15–19 who are at risk of long-term homelessness, unemployment and poverty, through addressing both systemic and individual barriers for young people to employment and training.

Reconnect, launched in 1998, is a national early intervention program designed to improve the level of engagement of homeless young people or those at risk of homelessness, with family, work, education, training and the community.

Introduced in 2002, the HOME Advice Program (then known as the Family Homelessness Prevention Pilot Program) was conceived as early intervention for families at risk of homelessness. The initiative drew on the experience of Reconnect as well the common success factors indicated in some of the newer homelessness programs. These included:

- A clear focus on early intervention;
- The capacity to work across a broad range of issues, not just those relating directly to housing;

- The capacity to work with the whole family unit, recognising that strengthening the family would contribute to improved outcomes for individuals and their families;
- The capacity to work with clients over an extended period.

Other Related Australian Government Programs

The Australian Government also funds a range of financial counselling and support services. These include the Indigenous Family Income Management Project, the Commonwealth Financial Counselling Program and the Emergency Relief Program.

The Indigenous Family Income Management Project (FIM) operates in three Cape York communities in Northern Queensland (Aurukun, Coen and Mossman Gorge). Initiated in 2002 the project has focused on improving living standards and family functioning by helping Indigenous families to budget and save. The project was designed by Indigenous people to help build financial literacy and implement budgets, stabilise family functioning, improve living standards and reduce household and individual debt in a culturally sensitive and practical way.

FIM is run by local people in each location and overseen by a working group comprising representatives from each community, Australian Government agencies, Westpac and Cape York Partnerships. Westpac employees work alongside local financial management workers for one month every quarter. Local facilitators and resource workers in each site assist families and individuals to negotiate budget and savings agreements, set up direct deductions from accounts and provide bill-paying and purchasing assistance.

The Commonwealth Financial Counselling Program (CFCP) has been in operation since 1990. The CFCP is particularly focused on low income groups and funds incorporated non-profit community-based organisations and local government community service organisations to provide free financial counselling services to people who are experiencing personal financial difficulties due to unemployment, sickness, credit over-commitment and family breakdown.

The Emergency Relief Program (ER) has been in operation since the late 1970s. Under the ER Program, the Australian Government funds a range of community and charitable organisations to provide emergency assistance to people in financial crisis. The objective of the program is to assist people in financial crisis to deal with their immediate crisis situation in a way that maintains the dignity of the individual and encourages self-reliance. Assistance from ER providers to clients is generally in the form of: a purchase voucher of a fixed value; a part-payment of an outstanding account; material assistance such as bedding, furniture or household goods; and food.

These Australian Government programs and initiatives form the basis of the Australian Government's national response to homelessness and operate along a continuum of care from prevention and early intervention through to crisis intervention and postvention.

Figure 1: Continuum Responses to Homelessness

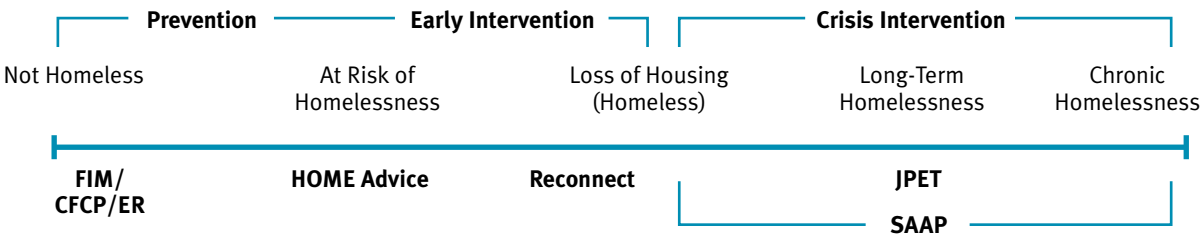

Figure 1 represents homelessness as a process and in terms of programs, a continuum of responses.

> Whole of Government Participation and Leadership ...will reinforce the importance of whole of government work, increase its profile within the department and recognise that it is a key issue across the Australian Public Service... We will coordinate, provide and support leadership in relation to our Whole of Government responsibilities: Indigenous affairs, women, youth, and community recovery (FaCSIA Strategic Framework 2006–09).

While progress has been made over the last 10–15 years on a continuum of services, a lot more work needs to be done to achieve well-coordinated 'whole of government' approaches that are both cross-sectoral as well as cross-jurisdictional.

1.3 Current Social Policy Context

Major public policy debates are underway on the long-term effects of environmental change, energy and water policy as well as on issues of social and economic infrastructure. The social impacts on rural and regional Australia have already been significant, but even beyond the current drought, there will continue to be a significant set of 'rural and regional' issues.

Over the past decade the Australian economy has seen strong economic growth, with record employment growth and low rates of unemployment. The number of people who are long-term employed has declined. By contrast, the affordability of housing has declined and recent media attention has spotlighted a national rental crisis. As a problem with potentially huge and long-term funding implications, this is likely to impact on homelessness over future years. Moreover, during the next decade, an increasing number of people currently in the labour force (the so-called baby boomers) will move into retirement. Some recent changes in taxation and superannuation are a response to the prospect of an increasingly ageing population. These demographic changes will have economic consequences. Managing these issues well in society and for the economy will be a challenge for government under conditions of major social and economic change over the next two to three decades.

The problems faced by Indigenous Australians remain a major concern requiring major investments but there is considerable debate on how best to facilitate and implement the required changes (see Outcome 1 below). Also, there remains a large group of Australian men, women and children who experience considerable disadvantage in the current environment including vulnerable people at risk of homelessness and those who actually experience homelessness. The lives of many of these people are characterised by multiple and complex issues – prior involvement in state care, low levels of education, low vocational skills, dysfunctional or unstable family relationships, family violence, mental health issues or other disabilities, as well as low incomes, poor labour market experience and problems accessing the increasingly tight housing market.

For some their problems begin early in life, often including state care, and thereafter they experience ongoing and long-term issues. The appropriate policy response is not simply increased income but a more complex policy mix of supports leading to sustainable independent living for many individuals and families (see Outcome 2 below). Homelessness can be time-limited for most people, but the length of time is determined by the assistance they get, or it can be prevented by appropriate early intervention. However, long-term support and a safety net will be required for a minority of people, who cannot realistically aspire to a fully independent livelihood and lifestyle.

The priorities for the Australian Government are summarised in the Portfolio Budget Statements for FaCSIA, which identify the desired results, impacts or consequences for the Australian community.

Outcome 1: Greater self-reliance and economic, social and community engagement for Indigenous Australians — services and assistance that promote greater self-reliance and engagement for Indigenous families and communities through: shared responsibility; practical support; and innovative 'whole of government' policy.

Outcome 2: Seniors, people with disabilities, carers, youth and women are supported, recognised and encouraged to participate in the community — services and assistance that help people to: participate actively in community and economic life; access a responsive and sustainable safety net; and develop their capabilities.

Outcome 3: Families and children have choices and opportunities — services and assistance that: help children have the best possible start in life; promote healthy family relationships; help families adapt to changing economic and social circumstances and take an active part in the community; and assist families with the costs of children.

Outcome 4: Strong and resilient communities — services and assistance that: help homeless people and low income households to gain affordable and appropriate housing; promote community partnerships; and encourage participation in the local community by individuals, families, business and government.

Also, it has been recognised that programs and strategies that focus on early intervention and prevention have the greatest potential to achieve the desired outcomes for many social issues. Early intervention programs such as Reconnect, as well as the HOME Advice Program, are exemplars of this approach.

Lastly, there is understanding how strong communities can provide lots of support to families through relationships and social interactions that provide social support and build social capital. The Australian Government's measures such as the Stronger Families and Communities Strategy as well as a range of regional initiatives have been conceived to progress towards Outcome 4.

Also, the FaCSIA Strategic Framework provides another point of reference for policy prioritisation. The Strategic Framework for 2006–2009 includes seven overarching strategic themes:

- Maximising economic and social participation through business, community and other partnerships;
- Focusing on early intervention, especially for children and families;
- Assisting those who are most disadvantaged;
- Achieving better outcomes for Indigenous Australians;
- Responding to intergenerational change;
- Balancing rights and responsibilities in the design and delivery of government assistance;
- Providing and supporting 'whole of government' leadership.

The HOME Advice Program is a strengths-based, family-centred early intervention program using flexible, holistic approaches, based on the needs and priorities of the family. HOME Advice supports families in the areas of housing and financial assistance, advocacy, relationships, family health and wellbeing, participation and early intervention with no limits on the level or duration of the support. As such, the program is a model exemplar of a program that contributes to all four FaCSIA strategic outcomes.

1.4 History of HOME Advice Program

The HOME Advice Program began in 2001 with the Australian Government committing approximately $5 million over three years for a new 'Family Homelessness Prevention Pilot' (FHPP). The program was an initiative of the National Homelessness Strategy and signified the first national early intervention effort specifically directed to family homelessness. A particularly innovative component of the new initiative was the partnership model between community agency pilot sites and local Centrelink Offices. This model articulated that the community service provider, along with their participating Centrelink Office would trial localised approaches to identify and assist families at risk of becoming homeless.

The aim of the FHPP was prevention – to increase families' capacity to avoid homelessness as well as build capacity in the local service system to respond more effectively to the needs of at-risk families. This was to be achieved through a bifurcated approach – working directly with at risk families, to help to stabilise their situation, while also working on broader systemic issues through collaborative partnerships with other providers and advocating local strategies to enhance the local community's capacity to respond to family homelessness.

Important aspects of the FHPP early intervention model included: a clear 'early intervention' focus on families at risk of homelessness (particularly those with young children); the use of flexible client-centred intervention strategies that promoted collaborative partnerships between government and non-government agencies; and the use of action research to investigate and trial innovation.

The FHPP commenced in late 2002 at eight pilot sites, one in each state and territory. The site in South Australia was deployed to work specifically with Indigenous families. The FHPP program became fully operational by July 2003.

Evaluation of the FHPP

In 2002, RPR Consulting were contracted to evaluate the FHPP, in particular the impact of the program on families supported through the different sites. An interim evaluation report was published in September 2003, and a further allocation in the 2004 Australian Government budget continued the program, re-badged as the 'HOME Advice Program', through to 2008. The final evaluation report on the pilot was released in February 2005.

The FHPP evaluation found there were early indicators of the success of the pilot model and that most families supported through the program had met the early intervention criteria:

> The evaluation found that the majority of families reached by the pilot had not yet become homeless, but were nonetheless at significant risk of homelessness. The profile of families assisted by FHPP indicates that the pilot successfully reached family groups that have been previously identified as vulnerable to homelessness (RPR, 2005).

Key findings of the final report on the pilot were:

- A noted improvement in the housing and financial circumstances of families assisted through the FHPP including a greater capacity for them to sustain their housing.
- Some gains in employment and education participation.
- Success in reaching and engaging Indigenous families with improvements similar to that found for non-Indigenous families.
- Benefits in the range of approaches used by the pilot sites including: identifying and engaging families not yet homeless; providing longer-term support that involved participation of other agencies; and use of brokerage dollars to address individual needs.

The eight sites form the core agencies of the HOME Advice Program from 2004 to 2008 are:

- Wodlitinattoai – Indigenous families only (South Australia)
- Family Focus (Victoria)
- Habitat (New South Wales)
- Families Across Beenleigh (Queensland)
- Anglicare Stabilising Homes (Western Australia)
- HOME Advice Program (Northern Territory)
- Family Matters (Tasmania)
- Home Base (Australian Capital Territory)

The program is positioned under the National Homelessness Strategy (NHS) and managed by FaCSIA. In the 2004–05 Budget, the Australian Government committed $10.4 million over four years to the HOME Advice Program, effectively extending and consolidating the successful FHPP.

2 Profile of Families Using Home Advice Program

2.1 HOME Advice Program Families

Altogether, the HOME Advice Program and the FHPP has assisted 2,190 families including 3,177 adults and 4,584 children. From 1 July 2004 to 30 June 2007 the HOME Advice Program has assisted 1,636 families including 2,303 adults and 3,438 children. These figures include families who passed through the program and where case support was closed as well 'open' cases being supported on 30 June 2007. About six out of 10 families supported under the HOME Advice Program were single parent families and more commonly the single parent was female. About three out of 10 families (29%) were couples with children. A typical profile of HOME Advice Program families is detailed in Table 3 (below).

Table 3: Typical characteristics of at-risk families, 2005–07

Characteristic	Typicality (Per cent)
Family structure	58 sole parent families (52% female headed households; 6% male headed households)
Indigenous	27 of families
Ethnic background	14 of families were from culturally and linguistically diverse back grounds
Children	91 of families have children (the majority with 1 to 2 children)
Income	78 are on some type of Centrelink benefit
Education	65 have Year 10 level or less
Labour force status	81 are not employed and 59% of all families are not in the labour force
Housing	51 in private rental, 33% in public rental
Homelessness	79 have never been homeless before

While families entering the HOME Advice Program are more likely to be female headed sole parent families with at least two children, there is also a significant minority of male headed sole parent families that the program has engaged (6%). The information on family structure sometimes changes from the time a family approaches the program to the point where they leave and then there is the more detailed information on the adults and children on the client form. There may be a minor issue about the precise accuracy of information on 'family' provided when a family first comes into the program. The information quoted in this chapter is based on what has been judged to be the more reliable and detailed data. The majority of HOME Advice families are on some

type of Centrelink benefit with many not in the labour force. While most families are living in rental housing (either private or public) and have never before been homeless there is a small, but important group of families coming to the program that have mortgages.

Aboriginal and Torres Strait Islander families were specifically targeted in the South Australian pilot and just over half (or 57%) of client families presenting to the agency in the Northern Territory were Indigenous families. A significant proportion of client families in the current program are therefore Indigenous. There are many common points but some differences apart from cultural differences. The variables in the HOME Advice Program client data collection do not measure cultural practices or cultural differences. Indigenous and non-Indigenous families share many similar demographics.

Table 4 (below) shows the characteristics of Indigenous and non-Indigenous families entering the HOME Advice Program. Non-Indigenous families seeking support are more likely to live in private rental, whereas Indigenous families are more likely to be in some form of public housing. Indigenous families are also more likely to be on some type of Centrelink benefit (84% compared with 75% for non-Indigenous families) and are more mobile (40% had three or more moves within two years compared with 22% for non-Indigenous families). Both groups present most commonly as female headed family households. The low level of education attainment is another common factor.

Table 4: Typical characteristics of non-Indigenous and Indigenous at risk families

Characteristic	Typicality	
	Non-Indigenous	Indigenous
Family structure	60% are sole parent families	57% are sole parent families
Parent(s)	53% are female headed households	51% are female headed households
Income	75% receive a Centrelink benefit	84% receive a Centrelink benefit
Education	69% have Year 10 level or less	72% have Year 10 level or less
Housing	58% – private rental; 27% – public rental	29% – private rental; 51% – public rental
Mobility in last 2 years	22% have moved 3 times or more	40% have moved 3 times or more
Homelessness	80% had never been homeless before	77% had never been homeless before

2.2 Types of Issues

In general, many of the families seeking help from the HOME Advice Program come with a complexity of various issues and needs. Most (83%) had one or more problems with their living situation, which included debts affecting family life, limited employment opportunities and issues of access to services and work. Families often had poor living skills (74%) which included poor social networking and poor social skills along with problems of budgeting as well as low literacy levels. In nearly two thirds of client cases (61%), family violence and/or abuse were implicated in the families' history and experience at some stage. Illness and disability includes mental illness as well as physical impairment. About 36 per cent of families with needs cited under 'disability and illness' were dealing with mental health issues. However in 45 per cent of these cases the mental health issues were being managed well. The most common issues that contribute to case complexity are shown in Table 5. The issues below are presented as the proportion of families who have this issue affecting the management of their case.

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Table 5: Most common factors contributing to case complexity, 2005–07

Factor	Per cent (%)
1. Sought emergency financial assistance in the past 6 months	51
2. Few social support networks	50
3. Debt impairing family / social functioning	51
4. Family conflict	41
5. History of family violence	40
6. Poor budgeting skills	44
7. Limited employment opportunities	40
8. Mental illness indicated	36
9. No reasonable transportation to attend work	19
10. AVO/restraining/intervention order in place	16

N.B. The percentages Table 5 presents client cases reporting the issue affecting the management of the case as a proportion of all cases in 2005–07.

Factors 1, 3, 6 and 7 relate to finances, while factors 4, 5 and 10 are related to family violence. Number 9 is about the difficultly of public transport in terms of costs and access, particularly in areas that are extremely isolated. The composite case study of 'Janice' later in this chapter exemplifies nearly all of the above.

Table 6 displays the seven categories which group the 46 items describing 'issues that have affected the management of the case' and compares the situation of Indigenous and non-Indigenous families.

Table 6: Complexity of client cases by category, 2005–07

Category	HOME Advice Program families		
	Indigenous (%)	Non-Indigenous (%)	All (%)
Living situation	79	84	83
Living skills	77	72	74
Family conflict, violence and abuse	66	59	61
Legal issues	37	32	33
Mental illness issues	26	34	32
Addictive behaviour	35	20	24
Child protection issues	19	18	18

N.B. The item on mental illness issues has been extracted from 'illness and disability on the basis that mental illness is known to be linked to homelessness.

The two notable differences are that for 34 per cent of non-Indigenous families, mental illness is indicated as an issue under 'illness and disability' compared with 26 per cent for Indigenous families. Addictive behavioural issues were more prevalent for Indigenous families (35%) than for non-Indigenous families (20%). There was no difference on child protection issues, and in the other categories any differences were relatively small.

Measuring the multiplicity of needs/issues is a difficult task. The different issues are unlikely to be weighted equally, although on the other hand, an empirical basis for weighting them unequally does not exist. A family with five issues to address still has to deal with them all. The assumption made here, as in the previous evaluation of the FHPP, is that complexity is indicated by the number of issues. The more issues to deal with, the more complex is the case.

Family Violence

Having a history of family violence affected the management of cases for 67 per cent of families. This was highest in Western Australia (85%) and Queensland (81%) followed by New South Wales (75%). Only 16 per cent of families coming into the program were still experiencing some form of family violence and in the majority of cases these families were either referred onto specialist services for case management or the program worked closely with a family violence service if the family was accepted into the program.

Table 7: Family violence issues implicated by state/territory, 2005–07

Issue	ACT %	NSW %	NT %	QLD %	SA %	TAS %	VIC %	WA %	Total %
History of family violence	59	75	67	81	50	61	59	85	67
Experiencing family violence	14	5	19	19	14	26	18	15	16
Family violence suspected	5	10	10	19	0	4	18	5	8

In 29 per cent of cases where a family had moved house in the previous two years, family violence was given as a reason. The highest was in New South Wales (63%), followed by Western Australia (50%). Family violence was the fourth major reason for a family having to move house after housing affordability, relationship breakdown and lifestyle choice.

Mental Health Issues

In Question 46 of the case form 'Issues that have affected the management of the case', mental illness is addressed in three items – 'diagnosed mental illness – managed well', 'diagnosed mental illness – not managed well' and 'suspected mental illness – not acknowledged/confirmed'. These categories are not three different issues but three mutually exclusive categories that together indicate mental illness as an issue in up to one third (36%) of families. While there is a little uncertainty about this total, we can be sure that mental health issues are present in at least one quarter (25%) of families.

Case Complexity – Indigenous vs non-Indigenous families

Popular media images and general public perceptions might hypothetically suggest that Indigenous families would present with more complex issues. However, as the following table shows, this is not necessarily so. There is no significant difference in case complexity in terms of the number of issues that Indigenous and non-Indigenous families present with. However, there are some important cultural differences to be considered when working with Indigenous families and communities. In particular these are about how Indigenous communities and families function and a range of cultural practices that relate to kinship and obligation. As well, there are the extreme features of poverty in rural and remote areas which are experienced almost exclusively by Indigenous communities, particularly in Northern Australia.

Using basically the same methodology as the previous evaluation, we have defined complexity slightly differently because of the aggregation of the mental health items. Low complexity is defined as one to two factors, medium complexity as three to five factors and high complexity has six or more issues. Table 8 (below) compares Indigenous families with non-Indigenous families.

Table 8: Case complexity, Indigenous and non-Indigenous families, 2005–07

Complexity	Non-Indigenous N=372 %	Indigenous N=134 %	All Families N=506 %
Low (1–2 issues)	30	28	29
Medium (3–5 issues)	55	52	54
High (6+ issues)	15	20	17
Total	**100**	**100**	**100**

Overall, the HOME Advice Program deals with a wide range of issues and typically, families are dealing with a multiplicity of issues at the same time. The evaluation gathered case studies across this range. The following account of 'Marcie' is a composite case study constructed with the factors found typically in a 'low needs' case. Low complex cases are no less at risk of homelessness but usually come with fewer issues.

'Marcie' – a typical low complexity case

Marcie was referred to the HOME Advice Program through a Centrelink social worker. Marcie initially came into Centrelink with concerns about the new requirements for single mothers to look for work. She felt overwhelmed with her current situation and was very anxious about having to look for a job as well as manage her housing situation. Marcie is a single mother with two young children aged eight and 13 years. She recently separated from her partner who is father to the youngest child only, the other one being from her first marriage, which ended due to family violence. She lives in a private rental three bedroom house which is now too costly for her to maintain and she had fallen two months behind in the rent. The week prior to coming to the HOME Advice Program she was issued with an eviction notice from the real estate agent and she now has just over two weeks to move out of the house.

The family's financial situation beyond rent arrears was difficult. Marcie also had fallen behind in her car payments and used her rent money to prevent re-possession. She needed her car to transport her children to different schools and attend a part time course she had enrolled in at the local TAFE College. She was also having problems paying the utility bills and while she had received some assistance previously with the local emergency relief agency her most pressing concern at the time of referral to the program was putting food on the table.

In addition, Marcie also had a rather large Centrelink debt of nearly $8,000 which had accrued because Centrelink had not received the appropriate court orders over care of the child from her previous marriage. She had been issued with several notices for repayment and was distressed by the pressure of these demands on her.

At the other end, there are high need and complex cases. The composite case of 'Janice' is one which exemplifies 'high complexity'.

'Janice' – a typical high complexity case

Janice is a sole parent in her mid thirties with five children aged between 5 to 16 years. She lives in a public housing property that she secured through a priority housing application some eight months previously, after she escaped a family violence situation. She has had periodic episodes of homelessness and family violence throughout her adolescent and adult life and child protection services recently removed her two youngest children from her care during her last period of homelessness.

Janice was referred to the HOME Advice Program through the state housing authority as she had fallen some five weeks behind in rent. She also had significant debts with her phone company and utilities providers who were threatening to cut off essential services. Janice also had a personal loan for $20,000 which she and her previous partner had partly used to purchase a car, now lying unused and in disrepair in the street after a car accident that occurred during a family dispute.

Janice has a history of mental health issues and drug addiction and was diagnosed in 2004 with bipolar disorder. When she first came to the HOME Advice Program she was having trouble attending her appointments at the community mental health service and had come into conflict with the clinic staff. Janice's situation of conflict with service providers was a recurring issue:

Her GP refused to see her anymore because of her violent outbursts – the parenting support program she had been involved with as a result of children's services intervention was going well until she had a run-in with another couple in the program – the psychiatric clinic also cut her off because she was consistently threatening staff and other patients. She was also evicted from the women's refuge for the same behaviour. Even one of the schools the kids went to took out an intervention order on the family…

When Janice came onto the program she was afraid to stay at her public housing property as her ex-partner knew where she lived and although he was on a family violence restraint order, he had threatened to harm her and the children.

At one point he broke into the house and destroyed all the furniture – beds, sofa, kitchen table – everything. The kids freaked…they just didn't feel safe.

The three oldest children living with Janice were having trouble at school and frequently refused to attend. Her 16 year-old daughter was facing charges of drug use and credit card fraud and the two boys, aged 10 and 12, had already been kept back a year due to 'unsatisfactory progress' in their school work. Although family violence had abated significantly since that earlier period, the effects on the children were still being acted out and were an active issue for the family.

There are many issues running in this case, but it is fairly typical of the high and complex needs cases that HOME Advice Program agencies work with. Janice still has a lot to deal with but she has not become homeless. Family violence is no longer a major concern for her, and she is getting treatment for her bipolar disorder. The Centrelink HOME Advice social worker assisted to resolve her debts and she has had help with a budget strategy and been able to apply some discipline to her financial affairs. This has involved regular counselling support focused on problem solving and practical life skills. The problems with the children have not become worse but have still to be worked through. The conflicts with other service providers have substantially lessened.

Whether a case is low or high complexity is an assessment of the multiplicity and intensity of the issues involved and does not suggest a lower or higher risk of homelessness. All families coming into the HOME Advice Program faced the prospect of homelessness.

Working with a family such as Janice and her children involved dealing with a complex mix of issues, taking up a longer period of case-work than for a family with a relatively lower level of case complexity. Some 51 per cent of high complexity cases required support for 25 weeks and more compared to 19 per cent of low complexity cases. Janice typifies the former while Marcie typifies the latter. The important point is that the HOME Advice Program intervention can achieve a high level of success across the range of case complexity. The program is just as likely to get positive results for families that involve low complexity (89% of outcomes) as for families with highly complex sets of issues (also 89% of outcomes) provided the support can be conducted on a needs basis. This is a major strength of the HOME Advice model.

However, as a general point, it can be said that the risk of homelessness for couples with children is less than for single parent families because of their ability to generate a dual income and there are generally more extended possibilities for social support on either parent's side. Also there is greater potential for resilience through mutual support and cooperation. Most of the HOME Advice Program families were facing a deteriorating financial situation.

2.3 Indigenous Families

Although the Northern Territory program was not an Indigenous-specific site, about half the case load of families supported by the program were Indigenous. Along with the dedicated Indigenous service in South Australia these two sites supported a major proportion of Indigenous families accessing the HOME Advice Program. Table 9 (below) compares the proportion of Indigenous client families to non-Indigenous client families in the Northern Territory, South Australia and then other states combined.

The total proportion of Indigenous client families in the HOME Advice Program across all states and territories is 27 per cent. However, because the South Australian site is Indigenous-specific (i.e. 100% of clients are Indigenous) and the Northern Territory also has a high level of Indigenous clients (57%) the overall weighting of Indigenous client families accessing the HOME Advice Program is to some extent greater than it would otherwise be in a much larger national social program with a larger proportion of mainstream services.

Table 9: Proportion of Indigenous client families: NT, SA and other states

Indigenous Family	NT (%)	SA (%)	Other (%)	All (%)
Yes	57	100	13	27
No	43	0	87	73
Total	**100**	**100**	**100**	**100**

In order to achieve a more accurate estimate of overall expressed demand for the HOME Advice Program from Indigenous families, the Northern Territory and South Australian sites need to be partitioned analytically in doing the calculations. For example, across the six other program sites a total of 13 per cent of client families were Indigenous. By comparison, in SAAP, Indigenous clients are 17.1 per cent of all clients, whereas Indigenous Australians are only about two per cent of the population (NDCA, 2005–06). This is a more realistic estimate of the likely expressed demand for a larger program. The exact figure will depend on the scale of the program and the extent to which service provision targets Indigenous communities. However, for mainstream services in areas with a significant Indigenous population, the expressed demand would be greater (e.g. in Darwin, at least 50% of clients accessing the service would be Indigenous). Finally, in South Australia, where dedicated family work was done with Indigenous families and with the Indigenous community the number of adults and children was somewhat under-estimated on client data forms because as well as the parent(s) and their children, the support workers also worked with extended family members during case-work. In some cases this can account for an extra 20 to 25 family members.

One element of Indigenous culture that impacts on the complexity of cases is the unique nature of extended family and community members travelling long distances to visit other family and community members. The death of a community member is one of the most common reasons. Indigenous community gatherings usually mean that visiting relatives are cared for by family members in the area. The host family are culturally obliged to provide accommodation, food and money for their visitors throughout their stay, which can sometimes last a number of months, resulting in over-crowding and stress. Visiting relatives may become disruptive if alcohol consumption becomes an issue, leading to neighbourhood feuding, violent incidents and complaints from other residents in the area. It is not unusual for a family to have moved four or more times in the past two years and this is often a result of having these obligations imposed on them, which then pushes the family into homelessness. These cultural obligations and kinship ties are a common cultural factor for most Indigenous communities and cannot be ignored nor their impact easily minimised.

In the Northern Territory site, this is known as 'humbug' which is an Indigenous slang term to describe disrespectful visitors who manage to harass, exploit and cause a nuisance to their host relatives. Drinking by visiting relatives causes problems and sometimes families 'walk out of their home and leave the drinkers there because they can't handle it anymore'.

High levels of unemployment, and the mobility of family members to various locations where there are extended family members means that financial crises are more likely to happen at some future time when again a household is beset by a large number of visiting relatives. These factors are driven by deeply felt cultural imperatives and it would be unrealistic to expect changed behaviour to overturn these kinds of cultural practices. The practice or service delivery issue is how families can be assisted to deal better with issues arising from visiting kin. A support system available to these families in the community needs to be in place when such crises recur.

2.4 Culturally and Linguistically Diverse Families

HOME Advice Program families born outside of Australia, account for about 14 per cent of all HOME Advice client families. All program sites, with the exception of Victoria, recorded small numbers of families from non-English speaking countries during the 2005–06 year.

For the Victorian agency in Dandenong – a Melbourne outer suburb with a high ethnic population – more than 50 per cent of families assisted in 2005–06 were from non-English speaking backgrounds. On a national level, this Victorian figure represents 42 per cent of all HOME Advice families from non-English speaking backgrounds.

Culturally and linguistically diverse (CALD) families come from many different countries including: Afghanistan, Albania, Chile, Cook Islands, Croatia, Eritrea, Fiji, Philippines, Egypt, Greece, Hungary, Iraq, Italy, Indonesia, Lebanon, India, Mauritius, Morocco, Samoa, Serbia, Sudan, Pakistan, Poland, Portugal, Romania, Russia, Turkey, Uganda and Vietnam.

About eight per cent of CALD families in the HOME Advice Program either could not speak English well or could not speak English at all. For these families, an important part of the HOME Advice Program intervention involved access to interpreter services either by phone or in person. The cost of interpreters is high for a site that supports a large number of CALD families. Access to the Australian Government funded Telephone Interpreting Services (TIS) is not provided free of charge and so HOME Advice Program brokerage dollars or other agency funds have been used to fund the use of these services.

2.5 Summary

- From 1 July 2004 to 30 June 2007, the HOME Advice Program has assisted 1,636 families including 2,303 adults and 3,438 children.
- The estimation of need (i.e. the number of families at risk of becoming homeless) can be made by several different but complementary methods – 7,841 families which is the estimated number of families which are homeless at any time (based on SAAP data), 15,812 which is an estimate of the number of at risk renters at a point in time (based on ABS data) and up to 30,000 being an estimate of the number of families who may be at risk at some point during any year.
- Some 58 per cent of families supported by the HOME Advice Program were single parent families. Most were female-headed households (52%) with typically one to two children while six per cent were male-headed single parent households.
- Nine out of ten families were Centrelink clients, most adult members being either unemployed or not in the labour force.
- The major presenting issues were financial (51%), issues with budgeting (44%), followed by few social support networks (50%), family conflict (41%) and a history of family violence (40%).
- The program works with families across various issues; complexity varies from families who have a lot of issues (17%), to families with a medium (3–5) number of issues (53%) and families with few (1–2) issues (30%).
- Under the current HOME Advice Program 27 per cent of the families assisted were Indigenous. In a broader expanded HOME Advice Program, it is likely that about 13 – 17 per cent of client families will be Indigenous, but higher in the Northern Territory or in locations with a significant Indigenous community nearby.
- Australia-wide, a relatively small number of client families were from a culturally and linguistically diverse background – 14 per cent if born in a country other than Australia or eight per cent where lack of English language proficiency was an issue. Intercultural issues will be very important in certain locations such as Dandenong in Victoria where the CALD population is high, but will also be encountered elsewhere.

3 Program Design and Service Model

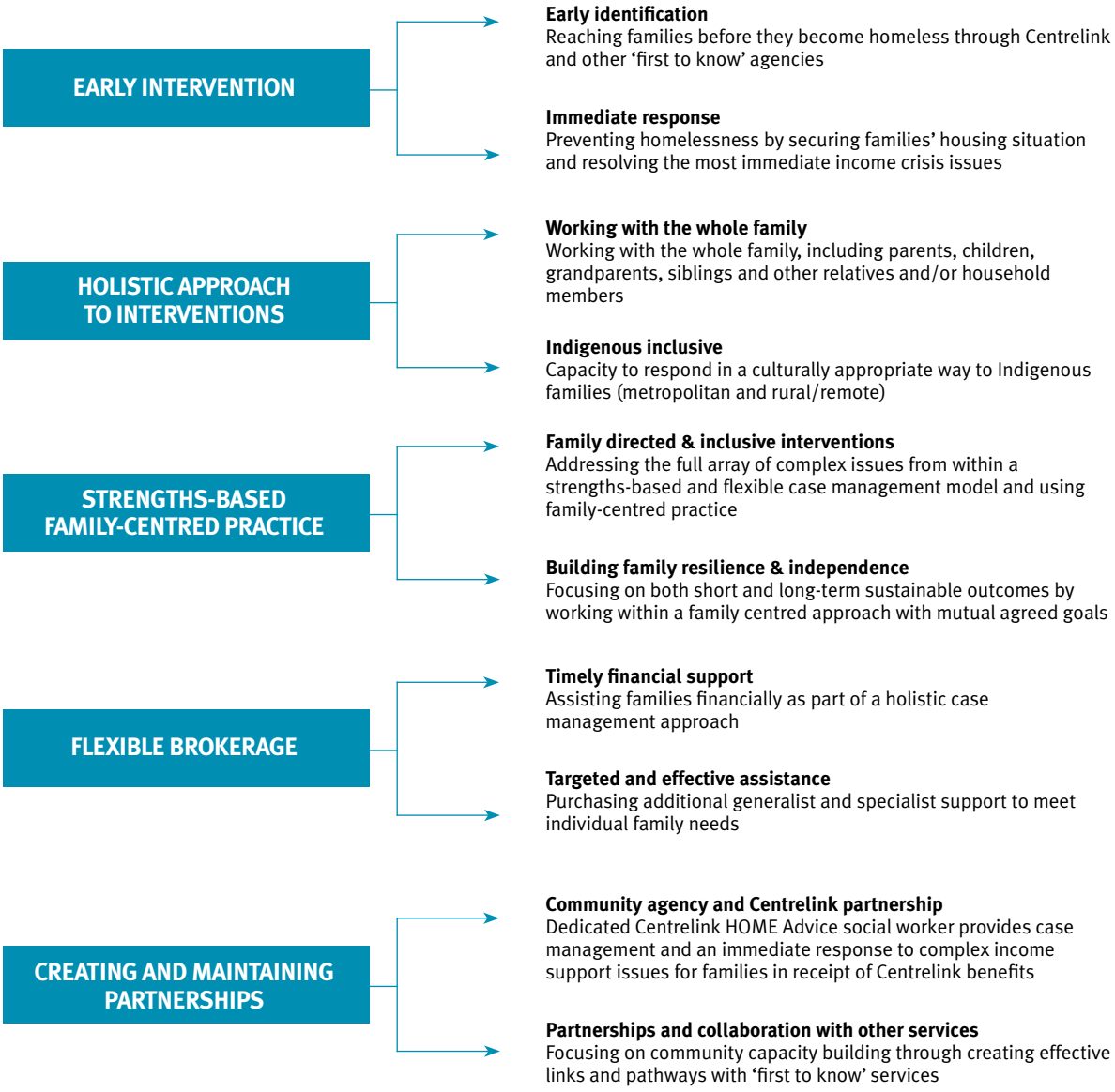
3.1 The HOME Advice Program Model

There are five core components that make up the HOME Advice Program model. These are: a clearly defined focus on early intervention; a holistic approach to intervention; 'strengths-based' family-centred practice; the use of flexible brokerage funds; and creating and maintaining partnerships. Figure 2 briefly outlines these components.

Early intervention involves identifying and reaching families before they become homeless and assisting them to avert homelessness through sustainable changes in their situation and circumstances. The purpose here is to prevent homelessness by securing a family's current housing situation and resolving the most immediate income crisis issues. These two tasks form the basis of the early intervention component of the HOME Advice Program model. Key tasks include:

- Early identification of at-risk families through Centrelink and other 'first to know' agencies;
- Capacity building and community education on early intervention and family risk factors;
- Promotion of appropriate referrals from key organisations and agencies (such as housing authorities, real estate agents, housing programs etc);
- Robust gate-keeping practice on eligibility criteria;
- Averting evictions and maintaining tenancies through stabilising the housing situation via advocacy (to private landlords, real estate agents and housing authorities) and use of brokerage dollars;
- Addressing and stabilising financial crisis through advocacy to creditors, private landlords, real estate agents and housing authorities;
- Centrelink HOME Advice Program social worker's fast resolution and advocacy in relation to the income support issues and other Centrelink service provision.

Figure 2: HOME Advice Program Model



Holistic approach to interventions means working with all family members including, children, grandparents, aunts, uncles, adult siblings and other extended family and/or household members. Working holistically also involves a dedicated capacity to respond appropriately to Indigenous family homelessness within an early intervention focus. Key tasks include:

- Case planning and case management with the whole family;
- Working across all levels of government;
- Working with community (Indigenous);
- Home visiting and outreach practice;
- Support and intervention for families in the private rental market, in public housing or social housing and families with mortgages;
- Community capacity building and education;
- Support to maintain or develop employment opportunities.

Strengths-based, family-centred practice is focused on working along the full continuum of issues that families may have and for however long such support and assistance is needed. This includes families who come with one or two problems that are fairly easy to resolve through to families who present with multiple and complex needs. A strengths-based approach also acknowledges and builds on family resilience and independence using community capacity building strategies and a case management approach that highlights family strengths and resilience. Key tasks here include:

- Short and long-term case management and support;
- Working together with families towards achieving mutually agreed goals, support and assistance;
- Coordinated case planning across complementary services and specialist supports;
- Advocacy and support with public housing authorities, Centrelink and private sector business (private landlords, real estate agents, utility companies and private sector creditors such as home loan and credit card companies etc)

Flexible brokerage incorporates the provision of financial assistance to client families where other community and government resources are not available or simply do not exist and when timely financial assistance will provide a sustainable outcome. Working together with families to achieve mutually agreed goals promotes family independence through the principle of providing a 'hand-up', not a 'hand-out'. Brokerage dollars are also used to purchase additional and specialist supports and services to meet the unique needs of individual families. Some of the key tasks include, but are not limited to the following:

- Assistance to meet rent or mortgage arrears through an injection of an initial payment to avert the threat of eviction, followed by the development of a practical budget which incorporates regular arrears repayments;
- Meeting arrears for debts to utility companies to avert 'cut-off's' and negotiating further repayments for client families if needed;
- Negotiating realistic and practical re-payment arrangements with private sector credit providers or for other debts incurred, such as medical costs;
- Assistance with house moving expenses and urgent home repairs/maintenance;
- Assistance to support children and young people to remain at school or to participate in community recreational and personal development activities;
- Assistance for parents to access specialist supports and services such as parenting programs or counselling services or to return to school or the labour market;
- Community Development/education/agency run parenting courses, health education workshops and self-esteem building. This is particularly relevant for the dedicated Indigenous HOME Advice site where brokerage is used as part of a holistic community based response.

Creating and maintaining partnerships ensures that the HOME Advice Program does not function in isolation from other services or sectors. The partnership between the community agency providers and Centrelink HOME Advice social workers is the central partnership of HOME Advice and is an important component in achieving the early intervention focus of the program. In addition, each site develops collaborative networks and relationships with a range of 'first to know' agencies including: public housing authorities; Aboriginal health and housing services; generalist housing services; CALD services and information centres; and schools, as well as private providers such as local real estate agents. Specialist services are also an important part of the program's collaborative efforts and include alcohol and drug services, mental health, family violence, children's services, disability services, emergency relief agencies, rental assistance programs and financial counselling services. Key tasks here involve:

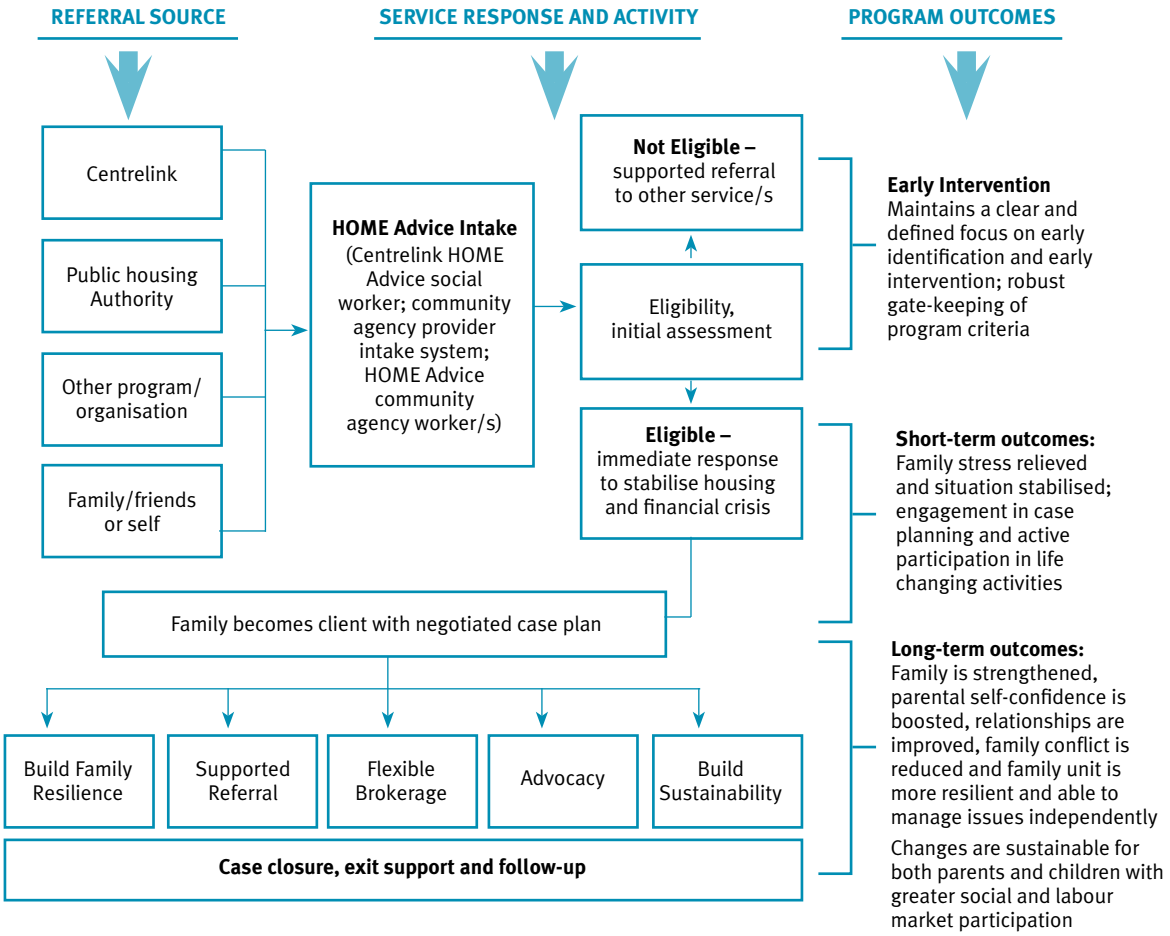
- Working in partnership with the dedicated Centrelink HOME Advice social worker, frequently through co-location within the community agency provider;

- Creating MOUs, referral pathways and other collaborative arrangements with 'first to know' agencies and organisations;
- Participating in local community capacity building initiatives and activities and promoting early intervention to potential referring agencies.

3.2 Pathways and Service Response

The HOME Advice Program service response is based on getting to families before they become homeless. This is achieved through creating and maintaining efficient links and referral pathways with key 'first to know' agencies. Figure 3 (below) illustrates the main referral pathways, service response and predicted program outcomes.

Figure 3: HOME Advice Referral, Service Response and Outcomes Flow Chart



The HOME Advice service response follows a clear program logic that is designed to efficiently address the immediate housing and financial crisis in order to prevent further deterioration of the family's situation and avert the slide into homelessness. Once this has been achieved, the next step is to help realise sustainable outcomes by supporting families to address the individual and systemic factors that placed them at risk in the first place. This approach to early intervention consists of four key steps.

First, it is necessary to receive 'timely referrals' from sources that are in a position to identify appropriate families. 'Timely' in this context means in time to prevent the family becoming homeless. Approximately 25 per cent of HOME Advice families have been referred to the program via the local Centrelink Customer Service Centre as well as the use of the Centrelink profiling tool in some circumstances. Mostly, this is through the reception staff, Customer Service Advisors, Customer Services Officers and Centrelink Specialists alerting the dedicated Centrelink HOME Advice Program social worker when they identify a family whose financial situation is deteriorating and housing tenure is under threat. However, many families are also referred to the program by public housing authorities, emergency relief agencies, other housing services and by family, friends or through self-referral.

Second, HOME Advice workers must assess the 'at risk' status of an incoming referral. If the family have already become homeless they are referred to supported accommodation or other services that deal with homeless people. The key criterion is that referral into the program must occur *before* a family has become homeless but when they are at obvious risk of losing their housing. This can range from a family who has just two days before they are without accommodation to a few weeks or a number of months. The important factor here is that the referral must not come in too late or when the possibility of negotiating a 'stay' has been exhausted. In many cases, once a landlord becomes aware of the involvement of the HOME Advice Program, they are more likely to be willing to negotiate further time for the family or allow them to stay in the home if, for example, an arrears re-payment plan is developed and maintained.

Third, the priority of the program is to relieve the immediate crisis situation, which often means a focus on tasks that will prevent any further drift towards homelessness. The Centrelink HOME Advice social worker plays an important role in an efficient and fast resolution of Centrelink issues for client families. Another important resource is the use of brokerage funds to assist families in immediate practical ways and to provide additional generalist and specialist support to meet individual family needs. The outcomes of this phase are the relief of family stress in the short term, and engagement in the case-work support process.

Finally, the program works with families using a strengths-based case management practice framework. This recognises that all individuals and families will have 'strengths' as well as 'weaknesses' in their capacity to deal with life problems. Change is brought about by drawing on a family's strengths rather than focusing on what they are not doing or can't do. The HOME Advice Program model follows a holistic approach to support by working with whatever issues are involved in the complexity of the family's situation. Support and assistance provided to families in the program might involve:

- Learning how to budget;
- Referral to financial counselling/advice services;
- Providing direct counselling and parenting support as well as referral to specialist services;
- Advocating on behalf of client families and negotiating with private landlords, real estate agents and housing authorities to maintain tenancies;
- Assisting client families to apply for and negotiate their public housing tenancies;
- A supported referral to drug and alcohol and/or mental health services;
- Addressing health issues, life skills and community connectedness.

The outcomes from support are greater parental self-confidence, better relationships and a stronger sense of family unity with greater resilience and coping skills leading to sustainable independent livelihood with a low risk of homelessness recurring.

3.3 Indigenous Program Design

The Wodlitinattoai Program in Salisbury, South Australia was solely dedicated to assist Indigenous families. While there were other sites, such as the Northern Territory with a high level of service usage by Indigenous clients, the Wodlitinattoai Program had a clear focus to develop an Indigenous-specific early intervention practice framework and to test the HOME Advice Program model in an Indigenous cultural context. The South Australian service was based at Centacare SA, a large mainstream agency offering a range of programs and services to individuals, families and children. Broadly translated, Wodlitinattoai means 'so as not to be without a home'.

During the second year of the pilot, the Wodlitinattoai team identified and documented a set of protocols and standards that defined the relationship between the provider agency and the Indigenous HOME Advice service. These highlighted the need for confidentiality; respect for individuals and culture; a commitment to learning about and taking guidance from the Indigenous community; and acknowledgement of Indigenous lands. In addition to these protocols, the team also proposed a set of principles to guide Centacare in their approach to providing culturally appropriate services. These included:

- Ensuring Indigenous programs and services develop and maintain links with existing initiatives within the Indigenous community;
- Using Indigenous resources, recruiting Indigenous staff and building on the strengths within the community;
- Affirming culture and supporting individual Indigenous identity;
- Endorsing community leadership and supporting cultural authority;
- Ensuring that program goals are structured to positively improve Indigenous peoples circumstances, are underpinned by quality principles and appropriately resourced;
- Operating within Indigenous domains and ensuring that programs are designed to work in ways that are acceptable to the community;
- Focusing on family and community wellbeing, rather than the individual and ensuring that approaches are holistic and inclusive.

(Wodlitinattoai, 2006 Adapted from Mihi Ratima, 2000)

Service Approach

Wodlitinattoai promotes the notion that Indigenous homelessness is often both caused and hidden by family and kinship obligations, rather than being prevented by these cultural factors. Whilst acknowledging the ongoing impact of historical grief and loss is an important principle of the service, this background understanding has been embedded in an approach that emphasises the strengths of the community around land, language, family and spiritual connections and the caring and sharing of Indigenous cultural knowledge. The practice principles that underpin this approach include:

- Acknowledging that families can be angry, depressed, isolated and frustrated and this has meant that other services may have already classified the family as 'aggressive and/or abusive';
- In order to work effectively with these families, workers must 'see past the anger' and differentiate the family from the problems they are experiencing;
- Engage with families both during crisis and times of need as well as during times of community gatherings and celebration;
- Providing supported referral, accompanying and encouraging families to take charge of their own lives and engage positively with their communities and services;

- Acknowledging the compounded historical past hurts that continue to affect families and communities and commit to working within longer support periods to achieve long-term sustainable outcomes;
- Building and maintaining relationships with other agencies and organisations and providing education to services, particularly in respect to working with high need and at risk families.

These practice principles form the foundation of the Wodlitinattoai approach and are framed by an understanding of how to work effectively with families at risk of becoming homeless in an Indigenous context.

3.4 Summary

- The HOME Advice Program is a robust early intervention model for assisting families at risk of homelessness. The five core components of the model are: early intervention; a holistic intervention; a strengths-based family-centred approach; flexible use of brokerage funds; and important ongoing partnership arrangements.
- The target group are families where homelessness is a prospect in the near future, if their situation is not improved;
- The HOME Advice Program supports families with multiple issues and for as long and as intensely as required by the family's specific needs in order to build resilience and a greater capacity to deal with adversity and future crises;
- Brokerage funds are used flexibly and as part of a case plan to address a wide range of issues such as: assistance to meet rent or mortgage arrears; debts to utility companies to avert 'cut-off's'; negotiating credit re-payment arrangements; assistance with house moving expenses or urgent home repairs/maintenance; support for children to remain at school; and urgent medical bills/expenses.

4 HOME Advice in Practice

The Centrelink-FaCSIA-community agency partnership is an important innovative feature of the HOME Advice Program model. The original rationale focused on Centrelink as a 'first-to–know' agency and while this proposition remains true in part, an important finding in this evaluation is that it is the early intervention by the Centrelink HOME Advice social worker that makes the crucial difference. An effective partnership arrangement as well as a close working relationship between the Centrelink HOME Advice social worker and the community agency workers, are therefore both necessary conditions for overall program effectiveness.

4.1 The Role of the Centrelink HOME Advice Social Worker

At all sites the time fraction for the dedicated Centrelink HOME Advice social worker position is about 0.6 EFT, or a three day per week position. In many cases, the Centrelink HOME Advice social worker was in full-time employment and worked as a generalist Centrelink social worker for the remaining two days of their position.

The Centrelink HOME Advice social workers brought a comprehensive knowledge of Centrelink processes and complexities involved with income support to the program. Subsequently, the Centrelink HOME Advice social workers were able to:

- Coordinate a fast response to client issues with other Centrelink staff and facilitate priority intervention in relation to income support assessments, participation requirements, debt reviews and the appeals system;
- Assess and negotiate client situations;
- Check and assist with Centrelink client debt situations;
- Where appropriate, ensure all client's circumstances are taken into account when making decisions in complex and sensitive cases involving vulnerable families;
- Facilitate priority intervention within the early intervention 'window of opportunity' to alleviate immediate housing stress;
- Build stronger Centrelink relationships with NGOs and provide timely information in relation to Centrelink customer service provision (e.g. keeping the NGO updated with the latest Centrelink policy and regulations and the effects these may have on HOME Advice families);
- Ensure that the vulnerability of HOME Advice families is taken into account at all times;
- Provide fast and comprehensive advice to clients in complex situations;

- Provide sound assessment and case-work skills to the HOME Advice Program;
- Maintain strong networks within the organisation and community;
- Promote the HOME Advice Program within Centrelink and the broader community, providing information and raising and maintaining an awareness of the program.

The fast response and the specialised work of the Centrelink HOME Advice social workers provide an essential component of the HOME Advice Program model by addressing and resolving client families' Centrelink issues, particularly in terms of income support entitlements and debts. This intervention is vital in the earliest stage of work with a client family. The case story of 'Emily', a 35 year-old single parent, illustrates how achieving priority case support via the Centrelink HOME Advice social worker is an important success factor.

'Emily'

Emily came to the HOME Advice Program when she was referred from a Centrelink Customer Service Officer to the Centrelink HOME Advice social worker earlier that morning. Emily has four children – two daughters aged ten and 12 from her first marriage and two sons aged six and three from her recent relationship which had ended some six months earlier.

When Emily first met with the Centrelink HOME Advice social worker she was extremely distressed about her situation – she was having trouble meeting the rent and had fallen three months behind in payments, she did not have enough money to purchase groceries, her telephone had been cut off due to non-payment and she had debt collecting agencies calling her daily to recover past debts accrued by her former partner. She also had a large Centrelink debt for $7,000 because her ex-partner had not lodged his tax returns for the previous two years and she was unable to provide Centrelink with the proper child support documentation. There was also involvement with the family court over custodial issues relating to her two youngest children and Emily had taken out an intervention order on her ex-partner for past family violence.

The Centrelink HOME Advice social worker first concentrated on resolving Emily's immediate income support and Centrelink debt issues while the HOME Advice community agency worker spoke with Emily's landlord, who had issued an eviction notice two days earlier. The Centrelink HOME Advice social worker followed up on the details of Emily's income support payments and after checking Emily's eligibility discovered that she was not getting her full entitlement and also not in receipt of rent assistance.

By mid afternoon on the day after Emily came to Centrelink, the Centrelink HOME Advice social worker had conducted an assessment, reviewed and resolved Emily's benefits resulting in further entitlements being granted and had done some preliminary work on re-assessing the Centrelink debt. Also, the HOME Advice community agency worker had successfully contacted Emily's landlord who had agreed to withdraw the eviction notice pending an agreement on the repayment of rent arrears.

The Centrelink HOME Advice social worker and the HOME Advice community agency worker met with Emily the following day at her home and together they worked out a rent arrears repayment plan. The HOME Advice Program would pay half of Emily's rent arrears in a lump sum to the landlord and because of the extra entitlements that Emily would now receive, a practical repayment plan was devised that would leave her enough disposable income for living expenses. The landlord was again contacted and he readily agreed to the proposed plan. Emily and the workers then discussed and identified Emily's other outstanding debts including her telephone bill and the specific debts that were accrued by her former partner.

While on this home visit, the Centrelink HOME Advice social worker talked further with Emily about her children and how the program could best provide support and assistance. Emily disclosed that she had a long history of depression and was concerned about the impact on the children of her recent separation. There was also some further discussion about the family violence that had taken place in the relationship with her former partner and the subsequent effects this had had on both Emily as well as the children. Emily's two older daughters were having difficulties with their school work and had recently been suspended from school twice for aggressive behaviour. In response, the agency worker organised to accompany Emily the following week to meet with the assistant principal and student welfare officer to discuss how the school could best support the two girls. The workers then talked with Emily about receiving further counselling support and linking the two younger children in with a specialist children's program provided by a local domestic violence service. The same service could also provide extra support to Emily on her pending family court issues.

Over the next two days the Centrelink HOME Advice social worker also supported and assisted Emily to collect and collate the necessary documentation she needed to submit to Centrelink in order for the Centrelink debt to be re-assessed. With this support, Emily was able to gather all the information that was needed and based on this evidence, the Centrelink HOME Advice social worker successfully advocated on Emily's behalf, and as a result, the large Centrelink debt was waived.

Emily was a client of the HOME Advice Program for a further nine months, during which time the program workers supported her to re-engage with study at a TAFE college while also helping her to re-establish her relationship with her estranged sister. Emily had now fully paid her rent arrears and was maintaining her rent payments regularly. She continued to receive ongoing counselling (now provided by a local counselling service that had an income assessed fee structure) and she found this to be a very helpful support. Emily's two older daughters improved in their academic achievement at school and were participating in a range of regular extracurricular activities (these fees were waived by the school). Although the family court matters remained unresolved, the domestic violence service continued to support Emily around these issues. Emily's two young sons attended a specialist children's program for two months which resulted in Emily linking in with a parenting support group for families with young children.

Emily's composite case illustrates many of the features of early intervention, where the work of the Centrelink HOME Advice social worker is an important factor in achieving successful outcomes.

Centrelink Debt

The issue of Centrelink debt is relatively common. The ability of a dedicated Centrelink HOME Advice social worker to resolve the often complex issues of Centrelink debt and entitlements quickly and efficiently is important for early intervention in preventing homelessness for at risk families. The window for early intervention is time-limited and fast assistance is a fundamental imperative. In some cases, debt has been accrued due to issues with documentation (such as unsubmitted tax returns or lack of documentation) or disputes about child residency or care arrangements or an overpayment. In some circumstances the debt can become quite large.

The Centrelink HOME Advice social worker has the capacity to immediately access the information and processes necessary to resolve or address complex income support related problems. Community agency workers strongly valued this component of the program and view it as an important resource that achieves immediate results for client families which otherwise would not have been possible through routine processing. Some Centrelink HOME Advice social workers, who were based on-site at the community agency, were equipped with a laptop PC which provided the social worker with secure on-site access to clients' Centrelink information, thereby facilitating a speedier intervention.

For 81 per cent of client families, dealing with Centrelink entitlement issues was a specified case goal and in these cases, this case goal was fully met 93 per cent of the time and partially met 6.3 per cent of the time. This result stands out as the highest level of met case goals of all the case goals for which data was collected on the client form.

Capacity Building within Centrelink

The partnership between Centrelink and the community agency providers also facilitated a range of capacity-building strategies in local Centrelink offices on the issue of families at risk of homelessness. For example, in the Victorian site the Centrelink HOME Advice social worker also managed the 'homelessness portfolio' of the Centrelink office. During the annual 'Homelessness Week' events, the Centrelink HOME Advice social worker would organise large office displays, send emails to staff profiling HOME Advice family case studies and talk with individual Centrelink staff as well as the other generalist social workers about the HOME Advice Program and issues for families that are at risk of homelessness.

This kind of commitment to capacity building within Centrelink is an important task of the Centrelink HOME Advice social worker and evidently resulted in an increased number of Centrelink referrals to the program (e.g. referrals from Centrelink to the Victorian site consistently accounted for more than half of the site's referrals).

4.2 The Role of the Community Agency HOME Advice Workers

Each program site employed approximately 2.0 EFT HOME Advice workers which, in most sites, included a HOME Advice Coordinator with a slightly reduced case load. In two sites, the coordinator position was built into the community agency's management structure via a 'Program Manager' position that also oversaw the operation of a number of other agency programs and services in addition to the HOME Advice Program.

The various sites often referred to unique features of their situation and felt that what they were doing was probably different from other sites. While the community contexts varied and the history of establishing each agency had some unique features, the overall day-to-day practice was remarkably similar. Support and assistance provided to families by the HOME Advice community agency workers generally involved:

- budgeting;
- referral to financial counselling/advice services;
- direct counselling and parenting support as well as referral to specialist services;
- advocating on behalf of client families and negotiating with private landlords, real estate agents and housing authorities to avert evictions and maintain tenancies;
- assisting client families to apply for public housing;
- the provision of brokerage money on a needs basis, mainly to assist with rental arrears, the payment of utilities, moving/transport costs and food.

The 'low complexity' case study of "Marcie", a single mother with two children (introduced in Chapter 2), describes some of the work performed by the HOME Advice community agency workers as well as again showing the typical role of the Centrelink HOME Advice social worker.

Marcie

While Marcie's situation was difficult, it was largely financial. The first step in the process of assistance was to provide immediate relief for the most urgent issue:

...we paid the local purchase order for $100 worth of groceries at the local supermarket and that was what I would consider our first quick 'win'...this is a useful strategy in initially engaging clients to show that we will respond to their situation in very practical ways.

Next, Marcie's real estate agent was contacted to negotiate a 'stay' of eviction, with the agency providing some brokerage funds to back up a payment arrangement for rent arrears and to buy enough time for Marcie to consider her future housing options and choices:

Once the estate agent knew we were on board and they understood how we could support and assist Marcie they were willing to negotiate. We organised to pay half the rent arrears through brokerage and Marcie entered into an agreement to pay extra each week to repay the rest.

Brokerage was also used to pay the outstanding utility bills and the local emergency relief agency was contacted. While Marcie had received some support from them previously it was minimal. Through advocating on Marcie's behalf the HOME Advice Program workers secured a commitment from the agency to contribute one week's rent plus weekly food vouchers for a four week period. The HOME Advice Program Centrelink social worker followed up by investigating Marcie's Centrelink debt and was eventually able to resolve the issues surrounding the debt. In this case the circumstances allowed for the debt to be waived.

Once Marcie's immediate needs were addressed and her most pressing fears allayed, the HOME Advice Program worker began work on a short-term case plan to address budget and housing issues. Through this process it became clear that Marcie's current rental property would be too costly for her to maintain on her own in the longer term. An added difficulty was that Marcie was named on the TICA (Tenancy Information Centre Australia) rent defaulters list (a result of her previous family violence situation) which would make gaining access to future private rental housing more difficult. The fact that she was a single parent with two children carried some disadvantages when trying to access the private rental market.

We filled out the forms for Marcie to apply for public housing through the emergency criteria, but this may not come through for 3–6 months or maybe even longer. We discovered that Marcie was not getting her full entitlement to rent assistance through her Centrelink payment so this helped a little in the plan to maintain her housing for the short term.

Marcie was linked in with a local agency that provided financial and other practical assistance for families with school-aged children to pay school related expenses such as uniforms, books, excursion costs and fees for extracurricular activities. The local community health centre agreed to provide counselling for Marcie to support her with relationship issues, a past history of drug use and childhood abuse. She also took up an offer to participate in a local parenting program because she was having some problems with the two children.

Six months into the support period, Marcie and her children have recently relocated to a smaller private rental property which was closer to the primary school her youngest child attends. She remained on the public housing wait list, but was more able to maintain her rental housing in the meantime. She walked her younger child to school each day while her 13 year-old caught the school bus. She was no longer in rent arrears and while she still had a debt for her car, she successfully maintained the agreement with the finance company which was negotiated earlier in her support period. She resumed her TAFE course which will eventually provide her with a qualification to work in marketing.

Marcie was not able to manage her financial issues without assistance, but when this was provided her position improved and positive changes were made such as getting back to her TAFE studies. The case can be regarded as 'low complexity' because Marcie did not face additional stresses such as mental health issues, substance use or complex family court/custodial matters.

In a second case example, 'Steve', a single father of two faced a series of events that contributed to a deteriorating financial situation leading towards becoming homeless:

Basically I was pretty down. I ended up going bankrupt, I lost my job, and my grandmother died. My car broke down and I couldn't get back to work…I was facing eviction…

Steve came to the HOME Advice Program through Centrelink, where he had been identified as an 'at-risk' family and was referred to the Centrelink HOME Advice social worker.

I was introduced to the worker ([the HOME Advice community agency worker) and she talked with the real estate agent and the Centrelink worker helped out with my payments. Just took a lot of pressure off me…she supported me and the kids where she could, and might sometimes help out with food vouchers. The windscreen was broken on my car and they replaced that. I needed a car to get work…

Like most families entering the program Steve's housing situation was rapidly deteriorating; he faced eviction from his home and was unable to pay bills for essential services or buy food. However, these were only the presenting issues. Other family and personal issues frequently will emerge as client families engage with the HOME Advice Program workers. Such issues will often require ongoing work for a much longer period of time. For Steve, this included previous involvement with the state child protection service and there was also a history of drug use and severe depression. These kinds of issues contribute to a family's overall vulnerability and the high and complex nature of the family's situation is likely to lead to crisis and ultimately homelessness, if not addressed.

One site described a fairly typical case, involving an Indigenous family:

We have a single mother with five children, public housing. The children are school refusers and there is criminal activity with the eldest – he has recently been removed from home because of his behaviour. No debt with (the public housing authority) or the rental, but the issues with the rental are the noise and nuisance around the children and the neighbourhood being disrupted by the children, a significant number of complaints…

In this case, an eviction notice had been issued and the family referred to the program. Once the HOME Advice Program workers had engaged with the family and negotiated with the public housing authority to delay eviction, other issues began to emerge:

The mother has gone to a local mental health service and had treatment and she is on medication. She was hospitalised for drug use and has reduced her drug use significantly. She has engaged really well with us, and we will work with her on parenting strategies and to maintain contact with the services we put in place for the children.

At all sites, HOME Advice workers undertake home visits at various times during case-work. This was noted to be particularly helpful during the early stages of working with a family and when conducting an initial assessment. The first contact with a family would typically last for a number of hours. Visiting a family in their familiar environment was seen as an important window of opportunity to actively engage with the family while addressing immediate concerns, such as taking care of the impending financial and housing crisis in a very practical way.

During the consultations, workers described the family crisis situation many times and commented that getting to families before their circumstances deteriorated into impending homelessness was difficult – particularly when families themselves only begin to seek assistance as a last resort:

> *People generally like to feel that they are in control and don't want to give that control over or admit they are not in control. There is a bit of denial, and sense of embarrassment and inadequacy. If you have to go to somebody for help it means they are inadequate in some way. I think that is a barrier. (HOME Advice Program worker)*

However, workers had a clear position on 'early intervention' for families heading towards eviction and homelessness as opposed to supported accommodation required by families already homeless.

> *Basically, if they have some grasp on accommodation and there is time to do support work to help them maintain that accommodation, then we would see that as quite appropriate (HOME Advice Program worker)*

With very few exceptions, families who had already lost their accommodation and become homeless were referred to the nearest appropriate SAAP service.

4.3 Working with Indigenous Families

As discussed in Chapter 3, the dedicated Indigenous service in South Australia further developed the HOME Advice Program model to encompass the range and complexity of issues specific to Indigenous families at risk of homelessness. For many Indigenous communities, kinship obligations place a significant burden on families, which contributes to financial and housing stress. Here, the HOME Advice Program workers' main aim is to assist the family to build a capacity for practical strategies to deal with these family situations. In some cases, this may mean the workers take on the role of informing visiting relatives that they must leave because of housing authority regulations. In other cases, workers will support the family to encourage visitors to contribute to costs or curb disruptive behaviour.

Workers noted that first contact is an important stage in engaging families and securing their trust. At the South Australian site, the Indigenous community was noted as 'tightly knit' and an individual's last name identifies kinship connections, family ties/relatives and traditional land origins. Careful attention was paid to a range of cultural issues such as which kin group Indigenous families come from, and the state of family and community relationships.

The impact of such a tightly knit community has both positive as well as some challenging aspects for Indigenous HOME Advice Program workers. For example, the last name identifier can make maintaining client confidentiality difficult and often requires a heightened sense of vigilance from workers. Workers are also well known within the community and while this has proved to be advantageous in most respects, the workers implemented specific practice strategies to avert the challenges that this situation occasionally posed.

The focus of support is deliberately placed on promoting families to be self-managed. At times workers are in a position where expectations of them by client families are unrealistic and untenable, simply due to their family ties and community connections. For example, extended family members will sometimes withdraw from a family's situation as soon as a service or program becomes involved, often with the expectation that the workers will fill their role of supporting the family. The following composite case study of "Elizabeth" illustrates in some detail how the HOME Advice Program can effectively work with Indigenous families:

'Elizabeth'

Elizabeth came to the HOME Advice Program after hearing about it from correctional services following a visit to Bill, her partner of 14 years, who is serving the last weeks of a three month sentence for assault. Elizabeth has six children ranging in ages from five to 14 years; however, the four youngest were removed from her care by children's services a short time before she came into the program.

Elizabeth and Bill were living in an Aboriginal managed housing property but they have had ongoing problems with rent payments and were three months in arrears. The property is in a state of disrepair, in need of maintenance and some fundamental repairs – most of the damage had been caused while relatives were visiting at different times over the years.

Elizabeth has a long history of abuse and family violence – she was subject to ongoing violent outbursts from her father and uncles when she was young and her current partner has had multiple charges laid against him for assault against Elizabeth as well as the children and other extended family members. The HOME Advice workers suspect that Elizabeth may have suffered an acquired brain injury (ABI) as a result from one particular incident a few years earlier, although this has yet to be confirmed through an appropriate diagnosis.

The family has also come under pressure to meet kinship obligations and at the time of the initial assessment had more than 18 relatives staying in the three bedroom house, who had travelled from rural areas to attend a funeral of a community elder. As a result neighbourhood disputes and complaints had escalated, brought on by excessive drinking and violent behaviour of her visiting family members. Formal complaints about noise and nuisance along with a significant arrears debt had resulted in an investigation by the managing authority into the issues and a subsequent eviction notice issued.

Drinking and substance use during times of high stress is a consistent pattern for both Elizabeth and her partner. These episodes usually end in some sort of violence and police attendance. The two older children also have problems with alcohol and drug use which has (along with living in an overcrowded home and experiencing long-term family violence) contributed to problems with attending and achieving at school.

The HOME Advice Program workers conducted a comprehensive assessment which involved a number of home visits to Elizabeth and the two children. Contact was made with the housing authority and arrangements put in place for rent arrears repayments as well as the withdrawal of the eviction notice. Brokerage was used to pay half the arrears of rent as well as to pay an outstanding electricity bill.

The Centrelink HOME Advice social worker participated in the assessment with the community agency workers, which is an important phase for engaging the trust of the family, and discussed with Elizabeth that she should be on a more appropriate benefit and how her Centrelink entitlements payment cycle could be adjusted to suit her major expenses.

The HOME Advice Program team also brought in and worked closely with a number of specialist services including an Aboriginal alcohol and drug service, a family violence service, and the local Aboriginal health service.

A core component of the work with Elizabeth and her family was providing ongoing counselling around issues of grief and loss, both in a historical sense as well as in the present context. Acknowledging and dealing with issues of inherited grief and loss was seen as an important strategy for Elizabeth who had never been encouraged to recognise how these 'invisible' losses of culture, land, language, family and a sense of 'belonging' continued to impact on her daily life. These deeply felt issues were even further exacerbated for Elizabeth and her extended family network when her four youngest children were removed from her care.

At this point, it was also important for the HOME Advice Program workers to encourage and help maintain the involvement of Elizabeth's family and relatives, being careful to not to 'replace' them, but to facilitate and support their participation. This often involved many more home visits, meetings with the community elders and case-work with other family members, including two cousins, Elizabeth's sister and her five children, an uncle and her partners' brother and mother. All up the HOME Advice Program workers were actively working with and supporting 12 other family members in addition to Elizabeth, her children and partner. This work with a broader extended family was characteristic of the work done in the Indigenous-specific South Australian site and at the broadest level involved community development since extended family links so closely into the community.

The HOME Advice Program workers also assisted to facilitate communication between children's services and Elizabeth so that the family had active and meaningful input into the welfare of Elizabeth's four youngest children. As part of this strategy Elizabeth participated in a local parenting program specifically targeting the Indigenous community and which was co-developed and facilitated by the HOME Advice Program and a specialist Aboriginal family support agency.

Six months into the support period Elizabeth has achieved some significant goals. Her housing situation has been stabilised and with the new Centrelink payment cycle in place her rent continues to be up to date. While there are still some family violence issues within the relationship, the use of alcohol by both parents has significantly reduced and this has impacted positively on the two eldest children who are attending school more regularly. Elizabeth has also had much progress in managing her stress and anger levels and attributes this to her work on dealing with past hurt and loss issues. The wider family network plays an active role in Elizabeth's life, frequently providing support and assistance for her when visiting relatives call on kinship obligations.

4.4 Co-location

The guidelines to the pilot phase of the program encouraged each site to develop the partnership model in innovative ways that would be responsive to the needs of their respective communities. Co-locating the Centrelink HOME Advice social worker on site within the community agency was trialled in a range of ways by most sites. In some, co-location involved the Centrelink HOME Advice social worker on site for the full complement of three days per week, while in other sites the worker would work from the community agency one or perhaps two days per week but otherwise work from the Centrelink office.

Both community agency workers and Centrelink HOME Advice social workers where co-location was trialled stated that the arrangement facilitated a positive approach to building the team and creating trust between the workers. The 'team' environment also aided the partnership to delineate more clearly the roles between the Centrelink HOME Advice social worker and the community agency workers. The sites where co-location occurred were clear on the tasks and responsibilities that each worker was to achieve, although these arrangements differed slightly at each site.

The community agency-Centrelink arrangements varied somewhat in terms of how the Centrelink HOME Advice social worker worked. Co-location was a commonly adopted option but even where co-location was not the formal arrangement, there was significant consultation and interaction between the community agency workers and the Centrelink HOME Advice social worker. This is one issue where it may be best to allow the local stakeholders to determine by agreement the best working arrangement for the Centrelink HOME Advice social worker.

4.5 Referrals

Referrals into the HOME Advice Program come from a wide range of community agencies (42.0%), family or their friends (32.6%) and thirdly from Centrelink (24.5%). Centrelink accounts for about one quarter of referrals, which includes some 6 per cent from the use of the profiling tool and 20 per cent through the Centrelink HOME Advice social workers. Table 10 shows the source of referrals into the HOME Advice Program for the period 2005–07.

Table 10: Source of referral, HOME Advice Program, 2005–07

Referral Source	Count	Per cent (%)
Self	165	32.6
Family/friends	30	5.9
Centrelink (profiling)	24	4.7
Centrelink worker referral	100	19.8
Early childhood services	5	1
Family support services	22	4.3
School/other educational institution	2	0.4
Material aid/emergency relief	4	0.8
Counselling service	18	3.6
Child protection agency	4	0.8
Job network	2	0.4
Mental health services	6	1.2
Other health services	17	3.4
Legal unit(courts/police/detention centre etc)	0	.0
Real estate agent/agency	12	2.4
Community housing/state housing authority	56	11.1
Other	43	8.5
Total	**506**	**100.0**

During the earlier FHPP, the profile of referrals was Centrelink (31%), self/family/friends (25%) and other community agencies (15%). The change in referral profile can be explained – over time, the HOME Advice agency has become more widely known amongst other community agencies that have slowly increased their referrals to the HOME Advice Program. The Centrelink profiling tool was an indicator derived from various Centrelink database items that has been used experimentally as a means of identifying at-risk families. However, the profiling tool seems to have limited practical value (only 4.7% of referrals). Depending on which level of the tool is applied, it either generates a very large number of potentially at-risk families or a smaller but still large number of potential clients. However, the later data could be used to flag certain clients for additional questions or for a mail-out of HOME Advice Program information.

The FHPP final evaluation report suggested that the patterns of referrals were due to 'differences (that) reflect the way the partnership between Centrelink and the community providers worked at the local level'. There were some notable differences in referral patterns across the state/territory program sites. Table 11 (below) compares the main sources of referrals across all sites for the period 2005–07 year.

Table 11: Source of referrals: Comparison across state sites, 2005–07

Referral Source	NSW (%)	VIC (%)	QLD (%)	SA (%)	WA (%)	Tas (%)	ACT (%)	NT (%)
Self/Family/ friends	33.4	27.0	30.8	26.2	44.7	45.6	52.1	34.8
Centrelink	33.4	48.6	51.3	45.2	13.5	3.0	11.5	15.3
Other agencies	33.2	24.4	17.9	28.6	41.8	51.4	36.4	49.9
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**

One notable difference is that Tasmania received few referrals directly from Centrelink (3%) followed by the ACT (11.5%), Western Australia (13.5%) and the Northern Territory (15.3%). Victoria and South Australia on the other hand, had closer to half their referrals from Centrelink. In Victoria, South Australia and Queensland, the Centrelink HOME Advice social workers were particularly active in securing referrals, although there were other differences between these agencies. In New South Wales, about one third of referrals come through Centrelink. The variation between sites suggests that Centrelink referrals potentially could be increased somewhat above the 25 per cent national average.

The proportion of referrals coming from the range of other agencies gives some measure of the connectedness of the HOME Advice Program agencies with their local service system. South Australia is the exception but then it is a specialist agency for Indigenous families and its nexus needs to be with the Indigenous community. In Queensland, the dearth of community and housing services in Beenleigh is probably reflected in their low level of referrals from other agencies while they also had a higher than average rate of self-referrals.

Overall, Centrelink has the potential to be a major first-to-know agency, however, this depends largely on whether:

- Centrelink staff can routinely elicit information from the presenting client about their deteriorating financial position and the prospect of them losing their housing and becoming homeless;
- Centrelink staff are able to identify families at risk of homelessness when conducting Centrelink business with customers;
- Centrelink customers are willing to discuss their personal financial and housing issues with Centrelink staff.

Generally, the Centrelink Customer Service Centres involved with the HOME Advice Program were highly committed as were the Centrelink National Support staff responsible for Centrelink's contributions to the HOME Advice Program partnership. Some Centrelink Customer Service Centres that were involved in the HOME Advice Program had prior experience with innovative partnership initiatives. The commitment of a particular Centrelink Customer Service Centre is greatly influenced by the Centrelink HOME Advice social workers and their social work supervisors. Philosophically, Centrelink is highly committed to achieving strong outcomes for at-risk individuals and families. Implementation on a broader scale would require additional attention to a range of issues such as awareness at the Centrelink office of the HOME Advice Program and its early intervention processes, ensuring a fast intervention by the Centrelink HOME Advice social worker to assist the family with Centrelink related issues and building an internal capacity for making HOME Advice Program referrals through the local Centrelink office.

4.6 Brokerage

Brokerage funds enabled the program sites to assist client families financially and to provide additional generalist and specialist support to meet individual family needs. Brokerage was also used to support community development and community capacity-building initiatives for client families of the program. In one site for example a percentage of brokerage dollars was set aside and dedicated to funding regular family events and community capacity building parent groups. In another site, community development activities that would increase a client family's connection with the local community were initially identified through the action research process and, if considered worth pursuing, funded through a dedicated component of HOME Advice Program brokerage dollars.

In terms of meeting individual families' needs, all sites expressed a strong disposition that use of brokerage dollars was to be considered carefully and in practice these funds were conservatively administered. Table 12 shows the actual expenditure of brokerage funds for both the FHPP and HOME Advice Program.

Table 12:FHPP and HOME Advice brokerage expended per client family

Expenditure	FHPP (%)	HOME Advice (%)
None spent	27	26
$100 and less	13	9
$101 – 700	27	50
$701 +	17	15
Total	**100**	**100**

The wide range of expended brokerage suggests that flexibility, which was referred to by all sites, is being carefully and conservatively practised. Over the life of the HOME Advice Program the average brokerage per case (where it was required) was $454.00 with a maximum expenditure for a single case being $2,396. No brokerage funds were given in 26 per cent of cases.

Brokerage funds were allocated by each community agency provider within its total program budget. For example, brokerage ranged from $17,600 in one agency with a total program budget of $159,750 to $5,709 in another program site. Flexibility in the use of brokerage funds is a key aspect of the holistic service provision model however some agencies have argued that the annual amount of brokerage funds should be notionally set at a standard amount for each agency.

Brokerage funds were sometimes used for community development and community capacity-building activities. For example, in two sites, some brokerage funds were used to develop and/or maintain initiatives on a regular basis – the first was for the development of ongoing parenting groups while the second site developed a poster to promote self-referral in a range of both first-to-know and other family-related agencies. Yet another site created a resource manual specifically for client families, which detailed a range of community services and supports (including emergency relief organisations), their program criteria, contact details and hours of operation. This community capacity-building was about improving access to local service systems and improving the support available to families from various services.

Where funds were expended to assist a client family it was usually on the basis that the agency will help as long as the client families contribute in some way:

> *…when they come in for their initial assessment, they might have heard from somebody up the road, that you will come and help… but we make it clear that it is part of a plan and that we work together on meeting needs, rather than you get a handout.*

The following composite case study of a young couple with two children demonstrates how brokerage is typically used in the program:

'John and Leanne'

John and Leanne are a young couple with a five year-old son, three year-old daughter and 'one on the way'. Leanne is seven months pregnant and the family had just recently acquired private rental accommodation after moving out of the city because of the increasing high cost of living in the inner suburban area. Their five year-old son had been diagnosed with a genetic disorder that was passed from mother to the male child only and as a result the child suffers an intellectual disability. As well, their three year-old daughter had a type of fragile bone syndrome which made her highly susceptible to fractures. Both children require intermittent medical and hospital care, much of which is not subsidised by government programs.

Leanne and John were referred to the HOME Advice Program through the local Centrelink Customer Service Centre. Leanne was on the parenting allowance and while John had a casual part-time job supplemented by a Newstart allowance, he was looking for full-time work. However, his capacity to work was somewhat diminished by the stress over their housing instability, Leanne's pregnancy and the constant health needs of their children.

While John and Leanne had only been in their rental house for a short time, they had already slipped into arrears and received an eviction notice and a breach of tenancy notice from the real estate agent. The cost of the move, John's unstable employment situation and high medical costs meant that they were unable to settle the other accumulating debts. To make matters worse, John's boss would often 'forget' to pay him and because it was his only job, John was reluctant to complain.

The HOME Advice community agency worker contacted John and Leanne's real estate agent to negotiate a rental arrears payment plan and avert the eviction. Although reluctant at first, the real estate agent finally agreed to withdraw the intention to evict if half the full amount of rental arrears were paid in a lump sum with the balance to be paid off via regular payments of $50 per week. Brokerage was used to pay the initial lump sum and also contributed (with some additional assistance from a material aid agency) to the electricity and water bills. John and Leanne had already paid most of the medical expenses because they considered these a priority, but there were still a few smaller bills outstanding. These were also covered with brokerage funds.

HOME Advice community agency workers then focused on John and Leanne's short-term financial situation, discussed a range of household management strategies that would reduce their expenses where possible and together created a workable and practical budget for the family. While the budget would be extremely tight, particularly with the extra payments per week for rent arrears, it was workable when taken together with the committed support from the local emergency relief agency that would provide food vouches and free bus/transport tickets for eight weeks. Meanwhile, the Centrelink HOME Advice social worker explored John and Leanne's eligibility for additional financial support such as the Carer's Payment for the children as well as the possibility for John to be granted an exemption from intensive job seeking. Support was also organised for John to report his fluctuating income and therefore ensure regular adjustments to his Newstart payments.

Preparation for the forthcoming birth of Leanne's baby was a stressful issue for both parents. In particular, John and Leanne were concerned about the new baby's health and the possibility that it would be a boy (which implicated the family genetic disorder). With the support of the HOME Advice community agency worker and some brokerage funds, John and Leanne made an appointment for an ultra-sound to determine their new baby's gender so that they could be more prepared.

In addition to addressing John and Leanne's immediate and short-term needs the HOME Advice community agency workers mapped out a case plan that would concentrate on their longer-term goals and build their capacity to sustain their living and social situation.

John and Leanne were linked with a parent support group for families with children with a disability, which also offered some financial assistance so that they could buy new toys for the children. In addition to this, the support group provided John and Leanne with a 'revival' pack consisting of a couple of movie tickets and two meal vouchers at a local restaurant. Respite care for the children was also organised on a regular basis so that John and Leanne could spend some time together as a couple.

Brokerage funds in the HOME Advice Program are being used in the context of case management whereby families are engaged in a process of improving their own situation and circumstances. Brokerage is expended where it will make an important difference and best facilitate case support – and is not perceived or used by families as another form of emergency relief.

4.7 Strategic Alliances

An important component of practice for the HOME Advice Program workers was establishing key strategic alliances to support early intervention. In some cases, this involved creating new relationships with businesses and organisations such as banks, building societies, home loan financiers, real estate agents, public housing authorities, schools and pre-schools, TAFE colleges, play groups, parenting support groups, legal organisations and CALD community groups. Specialist services were also sought out for strategic alliances including:

- Alcohol and drug services;
- Financial counselling programs;
- Emergency relief agencies and programs;
- Rental assistance programs;
- Interpreter services;
- Disability support services;
- Family violence services;

- Indigenous health and housing organisations;
- Children's services;
- Mental health services;
- Employment agencies.

These strategic alliances paved a two-way street. First, they facilitated access to a broad range of community and public resources that the HOME Advice Program workers could link with client families to help resolve their individual needs. Second, the development of these relationships promoted the HOME Advice Program as the key 'first-to-know' agency without which there would be nowhere to refer a family to before they became homeless.

The focus of the HOME Advice Program model on the development of collaborative partnerships within local communities ensured that the program did not operate in isolation from other services and supports. Rather the HOME Advice Program has effectively 'filled the gap' that exists for families who are at significant risk, but not yet homeless.

4.8 Summary

- Early identification of 'risk' is at the core of early intervention but it is only effective if a timely intervention can be achieved. Families who identify or are identified as 'at risk' need to receive support and assistance quickly if the opportunity for early intervention is not to be lost.
- For many families, their situation was characterised by an accumulating level of debt, combined with a low family income and proportionately high housing costs. In many cases, the prospect of homelessness was triggered by a precipitating event, such as moving house, family violence, the loss of a job, loss of Centrelink income support, eviction proceedings, the breakdown of a relationship and/or sickness or injury to family income earners.
- After community agencies (42%) and self-referrals (32.6%), Centrelink was the third most common source of referrals (24.5%). At some sites this was higher – South Australia (45.2%), Victoria (48.6%) and Queensland (51.3%).
- Two rapid response interventions were fundamental: first, the community agency workers negotiate to avert eviction or to gain time for the family to relocate appropriately; second, the Centrelink HOME Advice social worker typically fast tracks resolution and/or amelioration of Centrelink debt and works on any issues of Centrelink entitlements as required.
- The availability of brokerage funds on a needs basis to assist families during case support was a significant success factor. Brokerage was used in three out of four cases, where an average of $454 per family was expended.
- A commitment to the partnership arrangements and a close working relationship between the Centrelink HOME Advice social worker and the community agency HOME Advice workers were fundamental factors in the success of the program. Co-location of the Centrelink HOME Advice social worker at the community agency was adopted in some sites.
- Strategic alliances with local services were important to ensure that case management operated effectively as well as efficiently. In a few sites, some contact with estate agents was initiated to improve early referral for private renters.

5 Program Management

The program in its pilot phase from July 2002 to the end of June 2004 was known as the Family Homelessness Prevention Pilot program (FHPP), and from then it was continued as the HOME Advice Program operating through the same eight state and territory sites. The program in the form of the FHPP was established during 2001 and 2002, after consultations with state and territory governments, Centrelink, the Australian Federation of Homelessness Organisations and several non-government service providers.

5.1 Key Dates and Time Lines

Management of the program was the responsibility of the Housing Policy Support branch in FaCSIA (previously FACS) while supervision and deployment of the Centrelink HOME Advice social work staff was undertaken through Centrelink. Important milestones in the formative stage were:

- July 2002 – seven community providers were contracted, except for the Indigenous-specific site in Salisbury (SA) which was delayed due, firstly, to the need for a wide consultation to gain support within the Indigenous community and secondly, additional time to identify a suitable agency and recruit Indigenous staff;
- July to September 2002 – FHPP program support through Morgan Disney and Associates and evaluation of the program by RPR Consultants was contracted;
- October 2002 to February 2003 – the pilot data collection and client survey was trialled;
- Late 2002 to early 2003 – action research training was given to agency staff;
- The HOME Advice Program commenced at the beginning of the 2004–05 financial year to 30 June 2008;
- Oct 2004 – evaluation team for HOME Advice contracted.

5.2 Central Management by National FaCSIA Office

An issue for social programs is to what extent there is central coordination, leadership and drive or a dispersed local decision-making model where accountability for outcomes and outputs is maintained but the funded agency is locally responsible for how the outcomes are achieved. Within the requirements of accountability for public funding, the balance between central and local decision-making and determination generally depends on whether a program or project represents innovation or a well-established model of service provision or practice. The implementation of a significant innovation tends to require a greater degree of central leadership and support (Huberman & Miles, 1984).

Early intervention for at-risk families was a significant innovation when launched as the FHPP and remains a model that will require significant support and facilitation to be developed into a broader national program.

5.3 Program Support to Sites

In the pilot phase, Morgan Disney and Associates were contracted to provide program support through site visits, telephone consultations and action research training. This included:

- provision of action research training at each site and follow-up support for site action research;
- ongoing advice and support to the sites to develop the service delivery model and to facilitate partnership arrangements between Centrelink and the community provider;
- advice and support to the sites on issues of concern and practical assistance to sites for the development of project plans or evaluation frameworks.

For the HOME Advice Program, support was delivered by members of the FaCSIA team from National Office assisted and supported by senior Centrelink National Office staff. Visits were carried out as planned and considered important opportunities to inform program administrators about implementation issues, as well as opportunities for feedback on issues from agency staff. The interaction also provided some scope for problem solving of partnership, program and system level issues.

Table 13: Site visits over HOME Advice Program triennium

	2004–05	2005–06	2006–07
July			
August			
September			
October		SA	
November	Qld	ACT	
December	ACT	NSW	
January			Vic, Tas
February	NSW, Vic, Tas	Vic, Tas	
March			
April	ACT	WA	ACT
May		Qld	NSW, SA, WA
June	SA, NT, Qld	NT	NT, Qld

As well as visits, there have been regular teleconferences between the sites and the central FaCSIA and Centrelink team. On all accounts these have been regarded as a 'very useful' way of discussing issues and maintaining good communication between the government agencies and the sites.

5.4 National Workshops

During the pilot phase Morgan Disney, assisted by RPR Consulting, conducted four national workshops and the two Indigenous-specific workshops. RPR Consulting helped in the design and delivery of these workshops as part of the national evaluation process.

The national workshops involved Centrelink and FaCSIA staff, including state and national program managers, and community service providers from all of the sites. The first workshop (September 2002) set up a framework for the program; the second (March 2003) discussed the emerging service delivery models, included some training in client data collection and survey, a session on action research and issues arising in the sites, and lastly a session on partnerships; the third workshop (October 2003) focused on good practice issues; and the fourth workshop (April 2004) looked at building local capacity and collaborative partnerships.

The two Indigenous-focused workshops involved Salisbury as an Indigenous-specific site with Mandurah (WA) and Darwin (NT) as sites at which Indigenous families were a high proportion of their client group. These workshops aimed to foster good practice for working effectively in Indigenous communities.

Four workshops have been held during the HOME Advice Program. The first (November 2004) focused on action research and how this tool might be used for service development; the second workshop in May 2005 concentrated on a more developed program logic and refined service provider accountability, as well as examining Centrelink issues in more depth; the third workshop (April 2006) discussed the national evaluation and looked at the updated program guidelines, program logic model and the new reporting templates; and lastly, the fourth workshop (March 2007) reflected on the strengths and achievements of the program while looking at some of the issues for its further development.

All stakeholders have commented that the national workshops have provided forums for sharing knowledge and collaborating to achieve a nationally coherent model of early intervention.

5.5 Program Development and Action Research

Agencies received the same training as was provided in the Reconnect Program and they were encouraged to undertake action research in both the FHPP and HOME Advice Program. The Action Research component of the program was embedded into the six monthly reporting cycle of the program. However, as a general observation there has not been sufficient attention to this component. On the ground, there has been some work done – some agencies undertook small-scale research exercises but the documentation of this work has been scant.

The best example where action research took on a larger significance is the follow-up survey. Action research, organisational development, quality assurance and action learning all have similar cyclical and iterative practices for action, review and reflection and improvement. Given the static position of the last funded round of the program this has not been a major problem but in undertaking any program expansion, a developmental approach will be important and the documentation of 'action learning' as part of a program body of knowledge will be important for building capacity, improving service quality and undertaking professional development of staff.

Action research has been an innovative aspect of both Reconnect and the FHPP as pilot programs and helped to create a culture of exploration and innovation. When pilot programs are further developed into expanded social programs such as HOME Advice, 'action research', which carries somewhat misleading connotations for some people, could be reframed as a process of systematic service and practice development – maintaining what is essential and useful while jettisoning the 'research' terminology. Our suggestion would be to implement this component as part of a quality improvement and development requirement.

5.6 FaCSIA – Centrelink Partnership

At the community level, the relationship in practice between the Centrelink National Support office and local Centrelink HOME Advice social workers and the HOME Advice community provider has generally been good at personal, professional and cross-agency levels. However, in terms of this partnership in practice on a much larger scale, the issues and problems that were encountered from time to time and particularly in two of the eight sites, are hugely instructive of the kinds of problems that might recur during the implementation of an expanded program. There will need to be a strategy and appropriate structures and processes to handle problems that might arise between Centrelink Customer Service Centres and staff at the community agencies. Possibly local FaCSIA staff would need to be more involved in site visiting since an expanded program may not provide for site visits to every agency in the way this has been done for the FHPP and HOME Advice Program.

Early intervention is time sensitive. If intervention cannot happen quickly and effectively then the loss of housing and therefore the slide into homelessness can take place within a few weeks. Early intervention will fail if there is a significant wait time and/or if financial issues cannot be sorted out effectively. Many times the Centrelink system is implicated in some way in the client family's financial crisis, sometimes as part of the problem but otherwise an important contributor to arrangements that alleviate the situation. The Centrelink HOME Advice

Program social worker plays a crucial role by addressing these issues. Immediate support for early intervention needs to be sustained overall and systemically this is achieved by having dedicated Centrelink HOME Advice Program social workers in the HOME Advice Program. This is one of the main reasons for the importance of the Centrelink partnership. A close working relationship between the Centrelink HOME Advice Program social worker and the agency staff is an essential component of the program. In Centrelink, a good understanding of early intervention and the requirements and sensitivities of HOME Advice families is also needed by the senior supervisory staff.

5.7 Data Management

A focus on outcomes requires an appropriate and adequate regime for measuring client outcomes. Managing and processing client data for a national program of services is a complex operation requiring specialist expertise. A good client collection was developed by RPR for the FHPP. The national SAAP data collection is the most developed model for efficiently and effectively managing a large scale data collection, the dissemination of information about the program and its clients as part of the overall development of knowledge in this field. The SAAP alpha-code has been adopted by several social programs, including Reconnect. Looking to the future all programs directly supporting or assisting homeless people should follow common standards and be inter-connectable at the data analysis level.

In the first year of the HOME Advice Program, the client data collection was handled in-house, however, this was problematic and in 2005 the evaluation team took over handling data entry as well as analysis. Timeliness still remained an issue. An expanded national program will require an electronic data collection for client data, client satisfaction data and special collections that might be required from time to time. The Australian Institute of Health and Welfare's development of SMART 6 software for collecting SAAP data electronically is an advanced exemplar of client/case management software that could be tailored relatively easily for any social program. To guarantee high quality data will require a dedicated operation such as provided by the AIHW or a private sector provider of data services.

It is particularly important to assess and record detailed information of the profile of client needs and issues. One reason is that since remaining in independent accommodation is a core outcome there needs to be a valid measure of 'at-riskness' so that the target group entering the program can be adequately monitored. As an 'early intervention' program HOME Advice works with families heading for homelessness, not simply with all low income families. The RPR pre- and post- assessment tool for measuring changes in client dispositions, attitudes, capacities and behaviours as a result of the HOME Advice Program provide a good basis for developing an enhanced client data collection instrument. In this respect, the Centrelink partnership may also provide an important platform for such data. Likewise, the follow-up survey piloted in Victoria and then adopted nationally could become an established component of the program information framework.

The website used in this evaluation demonstrates in a relatively simple way how a site can be used for communication including dynamic discussion. The site, designed as a way of supporting the national evaluation, provided downloadable documents, notices, and forums for different stakeholders. However, this type of site could easily be developed to include electronic program reporting or on-line surveys of program agencies as well as an ongoing medium and portal for communication.

Finally, a larger program using electronic data collection will require some training of agency staff in order to ensure a high level of data quality.

5.8 Policy Issues

The following are policy issues that have arisen during the FHPP and HOME Advice Programs. These are issues outside the policies and organisation of HOME Advice that involve other departments or bodies.

Real estate agents

When renters enter into arrears with real estate agents, there is a clear process of warning letters that is followed prior to eviction. Many families leave before going through the full formal process.

Some HOME Advice agencies have developed good relations with local real estate agencies and there is an informal referral from the agent to the agency when a family becomes at risk of losing their housing. However, in other cases, there are not such close relations and agents have negative attitudes towards 'problem tenants'. Some 94 per cent of HOME Advice families were in rental accommodation, about half (51%) in the private rental market. If a more formal referral process could be developed with estate agents, an earlier identification might be achieved which would strengthen early intervention. Policy development along these lines would require negotiations with the real estate industry, and some amendments to the tenancy contract to incorporate informed consent so that a referral could be made when triggered. Although some comments have described real estate agents as part of the problem, given that they take actions to initiate evictions, they are potentially part of the solution also.

Post-SAAP support

The analysis of families supported through the HOME Advice Program showed that most were facing homelessness for the first time, however, there was a group who had been through the homelessness service system previously. Several sites mentioned that this latter group was more difficult to engage with the program, involved somewhat more complex issues and was less likely to achieve a positive outcome. That said, it should be noted that 78 per cent of these families achieved housing stability compared with 89 per cent of families who had never been homeless – a high level of achieved outcome. If outreach support were available for individuals and families leaving SAAP to move into independent accommodation on a needs basis and for an extended time period, this could conceivably reduce the likelihood of people recycling through the homelessness service system. Some agencies attempt this kind of postvention follow-up support, but there are relatively little resources in SAAP for this kind of long-term, holistic work. In an important sense this 'recovery' support for families after SAAP is, in practice terms, similar to the early intervention support provided through HOME Advice, but it would be best provided by workers and agencies which already have an established relationship with the family. Arguably this represents an issue or service gap that should be further investigated.

Centrepay through Centrelink

Real estate agents generally commented that Centrepay is a good idea in principle but many object to the $1.01 surcharge on each transaction and note that it involves too much additional administration. Centrelink has had some discussions about the Centrepay system with the Real Estate Institute of Australia but the uptake of Centrepay is still an issue. One suggestion is a monthly transaction, which would reduce administration time and costs. Another option would be to waive the surcharge on transactions.

Affordable housing

Affordable housing has in recent months received attention in the media highlighting the high rents that families and individuals are increasingly finding difficult to sustain. HOME Advice families face problems of housing affordability. When rental housing becomes less affordable then more families will be at risk of homelessness and increasingly vulnerable. Once a family has defaulted they are usually placed on the 'Tenancy Information Centre of Australia' (TICA) list of high-risk renters. It is relatively easy to get listed but more difficult to have a record expunged from the database. Indigenous families have reported discrimination from real estate agents and private landlords – only 25 per cent of Indigenous families were in private rental properties compared with 59 per cent of non-Indigenous families. The development of demand side responses to housing affordability and homelessness through rent assistance offered flexibility but were premised on a viable private rental sector that

can provide sufficient low end rental properties for low income people. This assumption is being increasingly questioned and arguments proposed to rejuvenate the supply side in terms of public and community housing or public-private ventures to build affordable housing. The investments required are large and increased provision cannot quickly be created.

Rent assistance

Rent assistance is available to families in private but not public rental housing, although based on income, there is a built-in subsidy for public housing tenants. For families paying off mortgages there is no such assistance. Families in roughly the same situation who are at risk of becoming homeless, in one case by being evicted from a privately rented dwelling, the other from their own home, have different eligibility for financial assistance. Eight per cent of HOME Advice families (excluding Indigenous client families for whom only one per cent own their own home) were paying off mortgages.

5.9 Summary on Program Management

- The principal program management issues to be evaluated were:
  - whether the management of the HOME Advice Program was effective;
  - whether the FaCSIA-Centrelink partnership was appropriate and effective; and
  - whether the program sites were supported effectively.
- The HOME Advice Program has been managed effectively. Despite changes in personnel over the past three years, the commitment to field visits has been maintained and the national workshops have been upheld by all stakeholders as very useful for sharing knowledge and experiences as well as giving the innovative program a sense of direction.
- Given that the program was continuing in its development, the level of support was generally appropriate and effective. The FaCSIA – Centrelink partnership should be continued, perhaps on a somewhat different rationale, as an important contributor to the high level outcomes. The original rationale of Centrelink as the first-to-know agency is not as important as the priority intervention of the Centrelink HOME Advice Program social workers to assist client families with Centrelink related issues.
- An expanded program will require new structures and processes to manage a program roll-out and sufficient training and support will need to be provided to deal with issues likely to surface in a much larger program by comparison to a small program of eight well developed sites.

6 Program Effectiveness

The core objective of the HOME Advice Program is to reach families at risk of becoming homeless and provide early intervention/prevention support in order that the trajectory towards homelessness does not continue and a family retains their housing. The core measure of effectiveness is housing stability and whether it is sustainable.

6.1 Eligibility

Eligibility for the HOME Advice Program excluded families who had already become homeless. The operational rule was to refer such families to the nearest appropriate SAAP service. Agencies adhered to this position – 97 per cent of client families were living in a house, townhouse, flat, unit or apartment when they approached the program for assistance. If a family subsequently became homeless while in the program they were usually assisted to regain their accommodation but there was also the option of a referral to SAAP. Most families (82%) were in some form of rental accommodation (i.e. private or community housing/public housing).

6.2 Housing Stability Outcomes

Housing stability is a crucial component and measure of program effectiveness. The outcome indicators of 'housing stability' provided information on families at the exit point from the program and included the following categories:

- 'improved housing' – where a family in inadequate housing when they came on the program had been assisted into adequate housing;
- 'no change' (adequate housing) – where families continued to rent their housing and where there was no change at their exit point from the program;
- 'no change' (inadequate housing) where their inadequate housing had not changed during the time they were supported.
- 'worsened housing' – where a family in adequate housing at the point they came onto the program were living in inadequate housing at the end of support.

Lastly, there were a small number of cases (13) – 'not stated' – where the changed circumstances could not be established generally because they had disengaged from the program or where this information was not available at the close of the case file.

Table 14: Maintenance of housing stability, 2005

Housing stability	Per cent (%) (N=266)
Improved housing	7
No change (adequate housing)	79
No change (inadequate housing)	6
Worsened housing	6
Not stated	5
Total	**100**

Table 14 (above) shows the overall position for client families passing through the program – 86 per cent of families remain in adequate housing or improve their housing situation. This profile has been analysed for the 2005 annual period which was broadly the same period used for the follow-up survey in 2006.

6.3 Measuring Effectiveness

The core measure of a positive outcome consistent with the program objectives is maintaining adequate housing or an improved housing situation (i.e. homelessness is averted). While there was some variation between the states there was a generally high level of achievement of the program objectives; Australian Capital Territory – 98 per cent; New South Wales – 88 per cent; Northern Territory – 82 per cent; Queensland – 66 per cent; South Australia – 92 per cent; Tasmania – 86 per cent; Victoria – 94 per cent; Western Australia – 86 per cent. The lower outcome in Queensland appears to be due to families boarding with other families and friends (i.e. inadequate housing for the purpose of this analysis) and where this situation of overcrowding did not change over the course of the support period for most of these families. Despite the analytical judgement that such overcrowding situations were inadequate, this accommodation was stabilised and therefore homelessness avoided.

There is no significant difference in the outcomes for Indigenous families compared with non-Indigenous families. The South Australian agency was Indigenous-specific (achieving 92%) and the Northern Territory where about half of the client families were Indigenous achieved 82 per cent.

During the consultations with agencies the issue came up of families who had been previously homeless and used SAAP as well as other welfare services. One suggestion was that in many such cases 'generally the ones who aren't that successful are the ones who have had a bit of a history who have been homeless before'. The feedback from workers on this point is that some families have had a 'long-term history of transience' and perhaps because they have been around the welfare support system before are 'difficult to engage'.

One way of examining the effect this might have on overall program outcomes is to compare families who had 'experienced homelessness in the last two years' with those who had not. Table 15 (below) shows the maintenance of housing stability between client families who had experienced homelessness in the previous two years and those who had not.

Table 15: Maintenance of housing stability by previous homelessness status

Housing stability	Homeless before (%)	Not homeless before (%)
Improved housing	16	5
No change (adequate housing)	62	84
No change (inadequate housing)	11	5
Worsened housing	4	2
Not stated	7	3
Total	**100**	**100**

The positive outcome position ('improved housing' or 'no change – adequate housing') for families who have a history of homelessness is lower than for families which have never experienced homelessness (78% compared with 89%). During the consultations, workers spoke of some families with a history of homelessness and the welfare system. With these families achieving high-level outcomes was more difficult and in most cases required increased worker hours and resources. Nevertheless, in both instances the rate at which the program outcomes were achieved is very high.

The point of debate here is about early intervention and postvention if supported accommodation in some form is the main response for people once homeless. The HOME Advice Program agencies have strictly applied the program criteria and with very few exceptions worked with families who were housed but at risk of becoming homeless, regardless of their prior experiences. In many respects, the kind of support practices and issues when working with families after homelessness are very similar to what needs to be done with early intervention.

A key question for any program assisting homeless people or preventing homelessness for at risk individuals/families is 'how sustainable are the outcomes at the end of a support period?' Following up former clients six or 12 months after their support period finished is the way to determine the extent of sustainability. This is difficult to do because of the high level of mobility of many former clients of homelessness services. If a large number cannot be reached, does this mean that they have become homeless again? As yet there has not been any successful large-scale follow-up of former SAAP clients to determine the sustainability of positive SAAP outcomes for its homeless clients. Some agencies have done follow-up of their own clients with varying results.

6.4 Follow-up Survey

The second stage in the main outcomes analysis against program objectives is to examine sustainability. The results from the follow-up survey conducted as part of this evaluation provide a good measure of the level of sustainability on the outcomes for families who have exited the program (see appendix 5–7).

The follow-up survey was originally conceived and trialled by the Family Focus Program in Dandenong. It was adopted as a program-wide initiative by the evaluation team as an important data collection tool for all sites after the promising results from the Dandenong pilot. The key questions were whether the families had ever experienced homelessness since leaving the program, where they were living when contacted, and whether their circumstances had improved, remained the same or worsened since they were on the program. Follow-up was done either by the agency case-workers familiar with the client family or a worker put on for this task. Information was obtained on most families but some were not contacted successfully.

Table 16 examines whether clients have ever experienced a period of homelessness after support through the HOME Advice Program. The question is how sustainable are positive housing outcomes six to twelve months on.

Table 16: Families who experienced a period of homeless since leaving the program

Homeless Status Since Leaving The Program	All HOME Agencies (N=265) %	Agencies excl. NT & SA (N= 173) %	NT & SA (Indigenous) (N=92) %
Never homeless	51	72	11
Experienced homelessness	25	10	53
No Information	24	18	36
Total	**100**	**100**	**100**

Considering the position across the entire program (column one), about one quarter of families were not contactable ('no information'), about half never experienced homelessness, while another quarter experienced homelessness at some point after support. In the next column the position is examined excluding the agencies in South Australia and the Northern Territory purely for analytical purposes.

Column three shows the position of clients in the Northern Territory and South Australia where most of the programs Indigenous clients were supported. About one third of clients in these two sites could not be contacted

for the follow-up survey. More than half (53%) experienced a period of homelessness after support at some point within the next 12 months. South Australia is a dedicated Indigenous service while about 50 per cent of the client families in the Northern Territory are also Indigenous. Indigenous families are known to be more mobile than non-Indigenous families as they move about for family and other reasons. Relatively few follow-up surveys had been completed in South Australia while in the Northern Territory, 58 per cent of families were not contactable, and 73 per cent of the families who could be contacted had experienced some transience and homelessness. Clearly, there is a significant difference between non-Indigenous and Indigenous families in this context. Indigenous families are much more likely to experience homelessness again.

The second column shows that 72 per cent of families, other than those in South Australia and the Northern Territory never experienced homelessness, while one in ten experienced a period of homelessness. Nearly one in five (18%) were not contactable.

If it is assumed that families not contacted have simply moved but are otherwise similar to the families contacted then the sustainability of adequate housing following support from the HOME Advice Program would be 88 per cent with 12 per cent experiencing homelessness. If all the non-contactable families are assumed to have experienced homelessness, then the incidence of homelessness would rise to 28 per cent. Either way this is a high level of housing sustainability.

The reported homelessness may have been a short time between rental accommodation and not necessarily indicate a serious worsening of the family's situation. Table 17 examines the living situation of the families when contacted. Some 93 per cent of families who never experienced homelessness since leaving the program continued living in rental accommodation although some had changed address. However, of the families, who reported that they had experienced a period of homelessness, 61 per cent were back in private or public rental by the time contact was made.

Table 17: Follow-up survey: client families living situation

Living Situation	No Info (N=47) %	Never Homeless (N=127) %	Homelessness (N=75) %
No Info	100	7	8
Private rental	-	54	32
Public housing	-	39	29
Homeless	-	0	30
Total	**100**	**100**	**100**

Even where families have experienced a period of homelessness in the 12 months or so after they left the program, in many cases the period was brief and the family quickly re-established independent living arrangements. For example, one woman with children was evicted late in 2005 and had to live for a time with relatives (hence technically homeless at that point). She then moved into private rental and her rent is up to date. She did not need to seek assistance from a SAAP agency.

While many families have a totally positive post-HOME Advice Program experience: 'engaged and happy…life improved…program helpful…self-employed', some families were still 'struggling to make ends meet'. However, for a significant proportion of these families (in 72% to 88% of cases), their housing remained stable and they never became homeless for even a short period of time following their support with the program.

The level of program effectiveness achieved in the HOME Advice Program is higher than that of the youth homelessness pilot program in the lead-up to the Australian Government's decision to launch a national Reconnect Program. The sustainability of the supported families in the HOME Advice Program is a very strong finding but unfortunately, it cannot be compared with other homelessness programs where large-scale follow-up of clients has not been attempted.

6.5 Financial Circumstances

A major aspect of the support work with at-risk families in the HOME Advice Program is assisting the family to stabilise and improve their deteriorating financial position. The most common sequence amongst client families is that they have sought emergency financial aid before, followed by few social supports and then their financial situation has deteriorated further.

Table 18: Prevalence and achievement of financial case plan goals, 2005–07

Case Plan Goal	Goal in place (%)	Fully Met (%)	Partially Met (%)	Not Met (%)
Resolve immediate financial crisis	87	53.3	39.9	6.8
Payment of arrears	75	40.3	51.2	8.5
Centrelink entitlements	81	93.1	6.3	0.6
Budgeting and debt reduction plan	80	40.3	47.9	11.7
Improved financial skills	51	23	62	15

The prevalence of goals is an indicator of whether a particular item was explicitly being dealt with during case management support. The financial issues are significant for many families and appear high on the case goals list. Where accessing full Centrelink entitlements was a goal this was fully achieved in 93 per cent of cases and partially achieved in 6.3 per cent of cases. This is one of the key contributions of the Centrelink HOME Advice social workers. The case of Marcie, a typical low complexity composite case, as described in Chapter three, gives an example of how a significant Centrelink debt can accrue because of issues with the supporting documentation. The Centrelink HOME Advice social workers involvement addressed this expeditiously. People using Centrelink typically complain about wait times and that complex issues can take a long time to sort out through the desk and generalist social workers.

For HOME Advice Program families an immediate financial crisis was fully resolved in 53 per cent of cases and partially resolved in 40 per cent of cases. A goal for arrears to be repaid was fully met in 40 per cent of cases and partially met in 51 per cent of cases. Some aspects of financial stress can be sorted out quickly and substantially. It takes longer for families to undertake further training, gain employment or learn new skills in managing household budgets to improve their financial situation. Where this goal was relevant in the case-work, some 85 per cent of client families made progress (goals fully met – 23% and goals partially met – 62% of cases). However, a low level of family income may also mean that financial management remains an ongoing effort and thus a continuing issue.

Financial crisis and accumulating debt along with other issues is typically the pattern for families entering the HOME Advice Program. Table 19 (below) shows the difference between the debts of families and their position at the end of support. Some leave with no debt – debt reduced to zero; others have improved their situation – debt reduced; for some debt has remained the same and for a small number debt has increased. About one quarter of families have no information recorded against debt before and after support, however, they have other issues that place them at risk of homelessness.

Table 19: Change in level of reported debt, 2005–07

Change	Change in Level of Debt (%)
Reduced to zero	10
Reduced	55
Remained the same	33
Increased	2
Total	**100**

A small number of families are worse off (2%), one in 10 have achieved full relief of their debt problem (10% – debt reduced to zero), more than half have reduced debt (55%) and close to one third (33%) have stabilised their debt position. There are a small number of families who have mortgages and they are more likely to report no change in their debt position but none said their debt had worsened. Clearly what can be achieved in terms of debt reduction will in large part depend on the size and nature of the debts. Overall, these results suggest a significant improvement for most families. Table 20 examines debt reduction in terms of case complexity in 2005.

Table 20: Case complexity and change in debt position, 2005

Debt Position	Case Complexity		
	Low (N=154) %	Medium (N=139) %	High (N=21) %
Reduced to zero	23	22	14
Reduced	42	45	67
Same	33	30	19
Increased	2	3	0
Total	**100**	**100**	**100**

NB: Table excludes 112 cases where no debt was recorded on client record

Case complexity does not appear to bear on the changed debt situation (i.e. low and medium complexity cases). Although a higher proportion of the cases with seven or more issues had debt relief, the total number of cases is much smaller and the difference is more likely to be an artefact of the smaller 'N' size.

6.6 Changes in Employment and Education

A major proportion of the client families were not in the labour force, which can be explained in terms of single parents with children. Table 21 shows the labour market position of families upon entering the HOME Advice Program and at the end of support.

Table 21: Changes in labour force status (%), before and after support, 2005–07

	Before Support (N = 711) %	After Support (N = 680) %
Employed Full-time	3.8	7.5
Employed Part-time	15.2	21.3
Unemployed/ looking for work	21.9	21.5
Not in the labour force	59.1	49.7
Total	**100**	**100**

NB: Table N is less than the total number of database records due to missing data.

Some 19 per cent of adults registered as the 'main' client were employed when they approached the HOME Advice Program, a further 22 per cent were unemployed, looking for work, while 59 per cent were not in the labour force. Most HOME Advice Program clients were educated to Year 10 or less. Lower levels of education reduce their capacity to participate in the labour market and their low income position makes them particularly vulnerable to becoming homeless. Almost 10 per cent of clients had gained either part- or full-time employment. This is a significant labour market outcome for the families receiving support.

The large number of families who were not able to participate in the labour force (59% at start of support) accounts for the fact that 37 per cent of cases had goals about 'achieving stable employment'. For those who had a case goal of trying to gain stable employment, 27 per cent fully met this goal while a further 36 per cent partially met the goal. One third (37%) did not meet this goal. Table 22 compares Indigenous and non-Indigenous families.

Table 22: Changes in labour force status by Indigenous/non-Indigenous families (%)

Change in Labour-Force Status	Indigenous (N=120) (%)	Non-Indigenous (N=297) (%)
Negative change	2	1
Remained the same	83	77
Positive change	16	22
Total	**100**	**100**

NB: Negative change is measured as the movement from 'employed to unemployed'; from 'employed to not in the labour force'; & from 'unemployed to not in the labour force'

Positive change is measured as the movement from 'not in the labour force' to 'unemployed'; and from 'unemployed to employed'

Table N is less than the total number of database records due to missing data

Non-Indigenous families are more likely than Indigenous families to have a positive change in labour force status however, some 16 per cent of Indigenous families have also improved their position.

Moving from not being employed to either full-time or part-time employment can be regarded as an important positive change for a family. Several factors might bear on these changes. It might be thought that in cases where people are dealing with multiple issues (high complexity) it is more difficult to assist them into the labour force and conversely, someone with less to deal with might be better able to take up labour market opportunities. Table 23 shows Change in Labour Force Status by Case Complexity.

Table 23: Change in labour force status of families by case complexity (%)

Change in Labour-Force Status	Case Complexity		
	Low (N=207) (%)	Medium (N=177) (%)	High (N=329) (%)
Negative change	1	2	4
Remained the same	80	76	76
Positive change	19	22	21
Total	**100**	**100**	**100**

NB: Negative change is measured as the movement from employed to unemployed; from employed to not in the labour force; and from unemployed to not in the labour force.

Positive change is measured as the movement from not in the labour force to not employed; and from not employed to employed.

Table N is less than the total number of database records due to missing data.

There is no statistically significant relationship between case complexity and changes in labour market status. Someone's participation in the labour force does not seem to depend on the number of issues they are otherwise dealing with, although this finding is somewhat counter-intuitive. Another point of interpretation would be that structural factors and education and skills are more important than family and individual issues here. A second factor to consider would be where a number of agencies are involved in the case, with each providing certain services to support the family members. In this case there is a positive relationship. If more agencies are involved a positive change in the families' labour market status is more likely. However, overall this is still a minority (14.8%) of the client families.

Table 24: Change in labour force status by number of agencies involved in case (%)

Change in Labour-Force Status	Number of Other Agencies Involved in Case (%)				
	0–1 (N=62)	2 (N=79)	3 (N=61)	4 (N=83)	5+ (N=132)
Negative change	2	0	2	0	2
Remained the same	88	83	71	81	71
Positive change	8	15	28	19	27
Total	**100**	**100**	**100**	**100**	**100**

NB: Negative change is measured as the movement from employed to unemployed; from employed to not in the labour force; and from unemployed to not in the labour force.

Positive change is measured as the movement from not in the labour force to unemployed; and from not employed to employed either F/T or P/T.

Table N may be less than the total number in the dataset due to missing data.

6.7 Outcomes for Children

The HOME Advice Program worked with a total of 3,438 children in client families over the life of the program. In 2005–07, there were approximately 31 per cent pre-school children, 50 per cent primary age children and 19 per cent high school aged young people. One in five had been subject to a past child protection notification. Of the school age children, 63 per cent have attended the same school, 32 per cent attended two schools while 5 per cent had attended three or more schools. Changing schools is consistent with the high level of mobility of many families in private rental, who changed addresses in the previous two years (one to two moves – 41% and three or more moves – 29%). Such mobility has impacts on children by disrupting their social networks and creating stress and uncertainty:

> It is thought that as a family relocates to a new community, a child's behaviour can become problematic due to the breakdown in the social network, such as the extended family, friends and neighbours, who have helped to regulate the child's behaviour. ... Some evidence suggests that young people who move frequently or have relocated recently are more likely to have problems in school, exhibit difficult behaviour and abuse substances as a result of weakened parental supervisory capacity and disciplinary practices and child emotional attachments to family, school, church and community. ... The total number of moves had a larger effect on childhood problems. Compared with non-movers, children who reported three or more moves were more likely to engage in problem behaviour (DeWit, D., Offord, D. and K. Braun, 1998).

However, following the HOME Advice program intervention, 62 per cent of families supported by the HOME Advice program had not moved in the twelve months after program support.

Much of the assistance provided to the adult member(s) of a family indirectly assisted parents with their children. However, some specific areas of support for children were:

- building contact between children and parent, either between a parent and their children in care or children with their non-custodial parent;
- access to respite child-care for families (which were most commonly a single mother with several children);
- obtaining access to child support payments;
- participating in parenting programs.

Table 25: Prevalence and achievement of goals for support to children in families (%)

Case plan goal	Goal in Place (%)	Fully Met (%)	Partially Met (%)	Not Met (%)
Building contact b/w children and parents	31	28	59	13
Access to respite child care	17	51	29	20
Access to child support payments	24	48	30	23
Participating in parenting programs	30	22	37	41

Substantial progress was achieved in assisting contact between children and parents, gaining respite care for families and access to child support payments for custodial parents. The latter can be difficult if one of the parents is avoiding child support payment responsibilities. Getting parents to participate in parenting programs where this was set as a case goal evidently proved more difficult. It is not clear why this should be the case, however, the providers of parenting programs often complain that the parents they think would potentially benefit the most from the program are the least inclined to participate. Multiple levels of intervention in a community seem to be required to overcome this difficulty (Sanders et al., 2003).

One practical change that might be expected for children during the time the families are supported in the HOME Advice Program is increased school attendance. Table 26 shows school attendance for all children, Indigenous and non-Indigenous children.

Table 26: Regular school attendance before and after support by Indigenous status

	All school-aged children (%)		Children from Indigenous families (%)		Children from non-Indigenous families (%)	
	Before support N=566	After support N=540	Before support N=139	After support N=131	Before support N=427	After support N=409
Yes	91.5	95.9	85.6	90.8	93.4	97.6
No	8.5	4.1	14.4	9.2	6.6	2.4
Total	**100**	**100**	**100**	**100**	**100**	**100**

NB: Differences are significant at p <.05

Attending school is important for a range of reasons, in particular, for short-term socialisation, and education and skills development to allow participation in the work force as well as longer-term life outcomes. Most of the children in HOME Advice families were attending school at the beginning of the support period. However, some improvement in regular school attendance was achieved for both Indigenous and non-Indigenous families.

6.8 Community Engagement

The importance of social support networks has been established in the literature. Bassuk and Rosenberg (1988) in a study of family homelessness suggest that 'homeless mothers may have been more vulnerable to the current housing shortage because they lacked support in time of need'. In another study, factors that increased a family's social or community supports and resources are protective, support networks are important, and the extent of a family's economic and social capital is also associated with homelessness (Sanders et al., 2003).

The achievement of community participation was part of the case plans for two thirds of families, and fully achieved in between one quarter to one third of cases depending on the goal. Table 27 shows the results for the community participation goals.

Table 27: Prevalence and achievement of goals for community participation (%)

Case plan goal	Goal in place (%)	Fully Met (%)	Partially Met (%)	Not Met (%)
Developing & enhancing support networks	65	26	65	9
Engagement with community organisations	67	34	58	8

Most families made some progress on these goals, however, it should be noted that links and involvement within the broader community take time. The before and after support assessment may underestimate the achievement of community participation since this may take somewhat longer to develop than the period of time many families are receiving support.

A US study of families at two points in time – when recently homeless and five years after compared with consistently housed families – suggests that it is not so much the extent of social support networks as their ability or willingness to assist with housing and the location and accessibility of social support networks which appears to be important for positive outcomes (Toohey et. al., 2004; also Goodman, 1991).

In the early data collected for the FHPP, questions were asked about what kind of support was available in a family's neighbourhood. The instrument used questions developed by Onyx and Bullen (1997) for measuring social capital. Table 28 compares before and after support.

Table 28: FHPP Client survey: 'Know anyone in the neighbourhood well enough to...

Know anyone in the neighbourhood well enough to ...	Before support (%)	After support (%)
– have your child minded in an emergency	41.8	46.8
– have your child minded regularly*	10.1	24.0
– borrow $10 until you can go to the bank	34.2	40.5
– borrow $50 until you can pay them back	11.4	15.2
– borrow something other than money	48.1	54.4
– help you move house	22.8	27.9
– help out if you're ill	26.6	32.9
– talk with you when you're feeling down	32.9	41.8
– act as a personal reference for you	29.1	30.4

Note: * denotes significant increase at $p < 0.05$

On all items, there was an increase in the support that might be expected from people in a social support network. Although only one item – 'have your child minded regularly' – was statistically significant, this may well have been due to the small number of cases and the fact that about half client families have had contact with the program for less than three months.

6.9 Resilience

In general terms, when doing case-work with at risk families, goals related to housing stability and financial circumstances were more fully achieved than goals about family relationships and personal skills. If a family's resilience and coping has improved, then the high level of housing stability and material improvement in the family's circumstances needs to be sustainable. This was the case and the results from the follow-up survey suggest that after leaving the program between 72 and 88 per cent of families maintained their improved position six to 12 months after exit and were coping better than when they entered the program. Of the 10 per cent of families who did experience a period of homelessness, most of these families (61%) managed to

recover private or public rental housing without going through a SAAP service. In an example, one woman felt more secure financially and safe from the violence perpetrated by her spouse, but importantly she demonstrated a change in her outlook on her situation:

> She defiantly worked hard on the unresolved relationship issues with the estranged husband and she decided that there is no way to continue living married, so she has decided to file for a divorce. She has become a more assertive parent with the kids – once I think she spent time on her own issues and seeking counselling and getting treatments, especially from the therapist … she has learnt a lot about herself and she has gained a lot of insight around herself and really boosted her confidence.

This woman who lacked confidence to enter the labour market eventually started to look for work. As the agency worker observed: 'Once she spent time working with her own issues and taking care of herself, she suddenly changed in herself'. This example illustrates how involvement in the program has resulted in a high level of achieved resilience.

The results from the follow-up survey suggest that families achieved improved resilience in dealing with their issues. Resilience refers to qualities of the person (and family) to cope better with adversity and stress. An earlier attempt to measure resilience in the FHPP evaluation is supportive of this inference. In the earlier evaluation survey, a Family Hardiness Index (FHI) was used to measure resilience to stressors (McCubbin et al., 1991) and a Mastery Scale (MS) was used to measure the extent to which respondents felt they controlled their own life course. An example of mastery is a person who has 'got to a point now where she can actually change things, and start to make the move towards changing everything'.

The FHI ranges from 0 (not hardy) to 60 (hardy). For the sample of survey respondents, the average score was 35.9 before support and 39.3 after support. The MS has a theoretical range from 7 (fatalistic) to 35 (own control). The average score was 21.8 before support and 22.6 after support.

Table 29: Changes in Family Hardiness and Mastery: FHPP survey respondents

				Paired t-test		
	Before Support	After Support	Average change	t-value	DF	P<
Family Hardiness Index						
Mean	35.9	39.3	3.5	3.54	73	0.001
Median	36.5	39.0				
Standard Deviation	8.5	8.9				
Mastery Scale						
Mean	21.8	22.6	0.8	2.62	78	0.05
Median	22.0	22.0				
Standard Deviation	3.2	2.5				

Table 29 (above) compares the measures of Family Hardiness and Mastery before and after support and on both measures the changes were statistically significant.

Further analysis showed that these differences did not seem related to: Indigenous status (there was no statistically significant difference in the improvement experienced by Indigenous and non-Indigenous families); whether a family member had previously been homeless; whether a family member had been a SAAP client; case complexity; intensity of support or duration of support. Overall, the support provided by the program made a difference in building resilience, and this earlier work suggested that this was particularly true for families who had completed most of their case goals. Staying with the program and working through the identified issues appeared to be important.

6.10 Factors Affecting Program Outcomes

The core outcome for HOME Advice is maintaining at risk families in their housing, avoiding homelessness while building resilience and coping skills so that the family can sustain their changed situation. A statistical technique known as regression analysis was used to find out which of the many factors involved in the model were critical (see Appendix 8).

The first result was that the use of brokerage during case support was a significant factor in achieving housing stability or the prevention of homelessness. The availability of brokerage on a needs basis is important, and this tends to apply in the earlier stage of case support. The second result was that program workers achieve success using the HOME Advice Program model, but in that context, the completion of case goals relies on having the time to work as much as necessary in assisting and supporting the family (ie. intensity of support) and this is a significant success factor. Arbitrary restrictions on 'intensity of support' would be counter-productive.

6.11 Overall Change for Client Families

Change for client families can be assessed in terms of measurable outcomes such as housing stability or employment and financial circumstances. Overall, workers made an assessment about the overall change in a family's situation – 'improved substantially', 'improved somewhat', 'remained the same', 'worsened somewhat' and 'worsened substantially'. Table 30 shows the overall assessment of outcomes for client families in the HOME Advice Program made by the case-workers.

Table 30: Overall change for family, HOME Advice Program

Overall change in the family's situation at the end of the support period	2005 N = 155 (%)	2006 N = 267 (%)	2005–2007 N = 492 (%)
Improved substantially	39	44	43
Improved somewhat	45	43	43
Remained the same	22	9	11
Worsened somewhat	2	3	2
Worsened substantially	1	1	1
Total	**100**	**100**	**100**

N.B. Closed cases by calendar years 2005 and 2006 all closed cases collected 2005–2007.

In 2005, the HOME Advice worker's assessment was that 84 per cent of families had improved their situation as a result of the support from HOME Advice (39% substantially and 45% somewhat). In 2006, it was recorded that 87 per cent of families had improved circumstances and more substantially than in the previous year (44% from 39%). In 2005, for some 22 per cent their situation had not changed but a year later this was nine per cent of client families. When families did their own assessment of their situation in 2004 under the FHPP, 74 per cent reported changed circumstances which they largely attributed to the program, 21 per cent said that little change was due to the program, while five per cent felt no change was really due to the program. Similarly, FHPP client families reported substantial change due to FHPP – 85 per cent reported they were better able to manage finances and pay bills; 81 per cent were more positive about the future; 82 per cent were more interested in life generally; 96 per cent knew where they could get help if needed; 77 per cent felt more confident; 81 per cent said they dealt with their problems better; and 76 per cent said there was less conflict in their family.

The high level of measured objective outcomes (as cited earlier in this chapter) is consistent with congruency between the subjective assessment of change made by the HOME Advice workers as well as the client families.

6.12 Summary

- The core outcome for HOME Advice Program is 86 per cent maintain their housing over the support period.
- At least 72 per cent (and possibly as high as 88%) of families maintain their housing and do not experience homelessness at any stage over approximately twelve months since leaving the program, thus demonstrating that the program outcome is sustainable.
- For families who reported experiencing a period homelessness after the HOME Advice Program, six out of ten (61%) had re-established rental accommodation by the time contact was made.
- While program outcomes for Indigenous families measured at the point of leaving the program are the same, at least half of the Indigenous families experience a period of homelessness in the 12 months after HOME Advice.
- Financial issues are important factors in the vulnerability of most families and this is reflected in the financial case goals which were largely dealt with during support – importantly, three quarters of families had problems with Centrelink entitlements or debt and this was fully resolved in 93 per cent of cases by the Centrelink HOME Advice social worker and only not resolved at all in a tiny number of cases.
- In most families, the adult(s) were unemployed or not in the labour force upon entering the program. Many families did not adopt the goal of entering the labour force because of small children, however in 37 per cent of cases employment goals were set and met fully in 27 per cent of cases. The complexity of a family's issues does not seem significant but the number of agencies involved does make a difference.
- Children in client families had often changed schools more than once in the previous two years and 56 per cent of the families had current or previous involvement with child protection. HOME Advice provided a range of useful practical supports to families and assisted to improve school attendance.
- Commonly families were isolated and in two thirds of families 'community participation' was actively addressed and full or partial success achieved in 91 to 92 per cent of cases.
- Measures of resilience showed a significant improvement due to HOME Advice support regardless of whether clients were Indigenous or not, or had been homeless before or not and the improvement was independent of the intensity and duration of support.
- The main practice variable that contributes to successful case goal achievement is 'intensity of support' – how much actual case-work is done during the time the family is with the HOME Advice Program.
- The main practice variable that contributes to the achievement of positive housing stability is the provision of 'brokerage' funds in the context of the case-work support being done.
- In 2005, 84 per cent client families were assessed to have improved due to HOME Advice and this had risen to 87 per cent in 2006.

7 Program Efficiency

7.1 Finite Resources, Infinite Demands

A social program (or health treatment) may be highly effective but too expensive. The issues of long-term cost benefit, cost effectiveness and cost efficiency for the HOME Advice Program are important considerations. From a government standpoint, public accountability at some point requires an analysis of costs. The need for accountability derives from the 'infinite' demand on government resources for programs and services that aim to prevent or ameliorate homelessness and the finite level of available resources.

In terms of homelessness programs, there are practical challenges in the measurement of cost effectiveness/ efficiency and doing a cost-benefit analysis is considerably more difficult.

Several Australian reports (HREOC, 1989 [the Burdekin Report]; Carter,1990; Dixon, 1993) have commented on the economic consequence of inaction on youth homelessness, however, the cost data used has not been well developed and only one detailed analysis has been attempted.

In the US, a study on street homelessness by doctors at the University of California, San Diego and the San Diego Police Department tracked 15 chronically homeless people over an 18 month period, and found that government spending was an average of $US200,000 per person on treatment, law enforcement, jail and court costs, and hospital visits. Despite this considerable expenditure of money over the 18–month period, 15 of the 18 subjects were in the same if not worse condition than before (Mangano, 2007).

In the cost analysis of family homelessness in Australia, our analysis draws heavily on the seminal work by Dr Paul Flatau who has undertaken an AHURI study of the cost effectiveness of early intervention for families at risk of homelessness in Western Australia. The report is due for publication by the Australian Housing and Urban Research Institute later in 2007. However, Dr Flatau has shared some of his information and calculations as well as his analytical insight with this project and presented a paper on his findings at the National Social Policy Research Conference.

The aim of this chapter is to develop a robust economic evaluation and costing relevant to the early intervention focus of the HOME Advice Program. The accurate measurement of costs and outcomes involves some significant methodological challenges, which are outlined in more detail in Appendices 3 and 4.

7.2 Measuring costs and benefits

The Australian Housing and Urban Research Institute (AHURI) report Counting the Costs of Homelessness identified 13 studies in the US, UK and Canada that had attempted to value the costs and benefits of homelessness interventions in monetary terms. None of these studies were comprehensive in terms of the length of time used to collect data.

Such studies have tended to focus on the preparation of a single statement of costs and benefits which is difficult if not impossible to calculate due to the intangible nature of many of the benefits that result from a successful intervention and the diverse nature of the homeless population. The fact is that one size does not fit all because the reasons why some people become homeless and the background of homeless individuals varies widely, hence the benefits accruing also will necessarily differ.

Definitions

There are three important methodologies: cost-benefit analysis, cost efficiency analysis and cost effectiveness analysis.

Cost Effectiveness Analysis attempts to analyse which practices and policies reduce the incidence of homelessness in order to identify which program is optimal. This usually entails identifying desired outcomes and comparing strategies that affect these outcomes. For example, effective early intervention for families at risk of homelessness would mean that families may then avoid the use of services that would otherwise be needed if no intervention was provided (such as entering SAAP services or the public housing system).

A Cost Efficiency Analysis involves an analysis of the HOME Advice Program delivery costs and service usage costs between each site as well as across the entire program. The objective of this analysis is to enable measurement over time to determine how many client families avoid homelessness. Quantifiable outcomes could include a single dimensional measure, such as the cost per case or the ratio of administrative cost to program cost to enable a comparison of costs between sites.

Traditional Cost-Benefit Analysis (CBA) attempts to quantify costs and benefits associated with a program in dollar terms over a period, often in terms of life-time costs and benefits. Generally, where the costed benefits of a program exceed program costs this is an argument that a program should proceed.

Cost effectiveness and cost efficiency

Ideally, a traditional cost-benefit analysis of a homeless prevention program would involve a control group of "at risk" families who do not enter the program and a comparative analysis of what happens to them relative to those within the study group who do receive support from the program. Needless to say there are some ethical considerations in this methodology, as well as major practical difficulties, particularly when dealing with families and young children. The evaluation of the HOME Advice Program did not attempt comparison with a control group. If the HOME Advice Program is successful in preventing families from becoming homeless then the costs associated with homelessness are avoided. In general, homelessness prevention programs are difficult to evaluate because they are successful by definition when homelessness does not happen in the future. The issue then becomes how to measure costs which are not incurred? Thus with cost-benefit analysis, estimates of cost savings need to be made to produce a meaningful result.

The cost analysis in this chapter has a focus on cost effectiveness and cost efficiency with some analysis of cost-benefit. For all cost analysis – cost benefit, cost efficiency or cost effectiveness – an accurate estimate of program costs and outcomes is foundational. A confounding factor in the calculation of cost for homeless programs is that the homeless service system bears the costs of the failure of other systems. If these other systems are under resourced and fail, then costs are subsequently passed on to the homeless service system.

There are two categories of costs that are incurred in the HOME Advice Program, namely:

- The cost of program administration;
- Client costs for program delivery and service usage.

Program delivery and service usage costs include:

- Costs of case-workers providing support to clients;
- Program budgeting;
- Financial aid (brokerage funds) to clients;
- Costs associated with resolving Centrelink issues;
- Costs associated with providing housing assistance.

In terms of service usage, each client family case involves differing amounts of resources with sometimes lengthy periods of support. However, it is useful to determine an average cost per case figure to enable an assessment of cost efficiency. All HOME Advice Program sites provided information on the key cost drivers of the program including staff hours, (together with staff salaries inclusive of costs), travel and brokerage costs.

Total program costs = total client cost + total program administration costs

Total client costs = number of clients * average cost per client

Average cost per client = (average hours per client * case-worker wage rates (including on-costs)) + (vehicle cost per km * kms per client visit) + (average brokerage cost + other costs per client).

Table 31 provides initial costs from the HOME Advice Program for the 2005–06 financial year. Cost per client ranged from a high of $3,436 to a low of $1,323. The mean cost of the program per client was $2,030. Including the Centrelink contribution, costs are $5,061 to $2,078 with a mean cost of $3,079 per client. The biggest single cost across all sites was the 'direct service delivery staff costs' with an average value of $97,079 which accounts for about 58 per cent of total expenditure (excluding Centrelink costs), followed by 'other operational costs' of $17,882 (11% of total expenditure) and 'administrative staffing costs' of $17,035 (10% of total expenditure). Centrelink costs averaged out across all sites at $85,875 which was about 34 per cent of the total cost of the program.

A first point of comparison is to compare these figures with the cost per client of the Supported Housing Assistance Program (SHAP) in Western Australia. SHAP is in some ways similar to the HOME Advice Program however, there are some important differences. SHAP is directed to public housing tenants whereas HOME Advice clients come predominately from private rental. Another difference is that the landlord for SHAP clients is the WA Department of Housing and Works, which also funds the community agencies under SHAP. By contrast, HOME Advice Program families come from a mix of 'landlord' ownership – private rental, social housing, public housing, Indigenous housing and there is a small group of families with mortgages. The support work done in the HOME Advice Program is also more flexible, holistic and longer-term than that provided under the SHAP program. SHAP services are provided by non-government agencies funded by the WA Department of Housing and Works. Participation in the program is on a voluntary basis. Services include assistance with improving housekeeping skills, budgeting, and dealing with domestic violence, child abuse, drug and alcohol problems and mental illness.

Nonetheless, SHAP in Western Australia is an early intervention program targeted to public housing tenants at risk of eviction to maintain their tenancy. Dr Paul Flatau calculated in the effectiveness of homelessness prevention and assistance programs project (2007) an average cost per client for SHAP services of $3,300, and on average, $3,247 (98%) was government funded. Staff related costs were on average $2,095 per client.

The second point of comparison is the cost per family in the HOME Advice Program compared with what it would cost if early intervention failed and the family became homeless and subsequently a client of SAAP. The publicly reported SAAP cost per client is $3,130 (Report on Government Services 2007). The calculation provided by Flatau which is based on Western Australian crisis/short-term SAAP services is $1,548 for a single person support period and $4,551 per family support period. On this basis, the cost of supporting a family was three times that for a single person. The cost figures will also vary by state because of the different profiles of service types. The average unit cost for SAAP of $3,130 is based on national data which will be lower for single clients and somewhat higher for families. There is no published data on this at the present time.

A further caveat is that the SAAP unit cost is based only on SAAP support funds and does not take into account the cost of the 'bricks and mortar' accommodation provided by SAAP. It is difficult to estimate this additional loading. One estimate using the Crisis Accommodation Program (CAP) funds would add $1,000 to $1,500 if about one third of annual CAP funds were divided by the number of families using SAAP over a year. However, if the building unit cost component were similar to a public housing dwelling, the unit cost per family could be conservatively estimated to be an additional $3,000 to $4,000 per client family. Service providers suggest higher figures but point out that much of this is funded from community sources other than SAAP or CAP. Thus the $3,130 unit cost is a known lower range unit cost, more realistically likely to be similar to the Western Australian cost per family of $4,551, but if the building component were considered and costed, then the cost per family could be as high as $8,500. At this stage there is no published body of work on unit costs in SAAP to check the above estimates against actual cost data. However, on any conceivable basis the average cost per family in SAAP is clearly higher than the cost of either the SHAP program or the HOME Advice Program.

Table 31: HOME Advice Program Average Cost per Client ($), 2005–06 financial year

Income	NSW	WA	VIC	QLD	ACT	NT	SA	TAS	Total	Mean
Program Funds	160,401	159,750	160,301	159,750	159,750	159,954	159,750	159,750		159,926
Other income – Carried Forward Funds	10,506	45,542	2,629		3,100	35,797		8,952	106,526	13,316
Total Income	170,907	205,292	162,930	159,750	162,850	195,751	159,750	168,702		173,242
Expenditure										
Direct Service delivery staffing costs	89,750	79,287	95,260	97,879	114,225	79,117	124,695	96,350	776,563	97,070
Administrative staffing costs	14,060	21,067	12,000	14,593	15,990	31,890	3,768	22,911	136,279	17,035
Other service delivery expenditure	10,039	35,328	4,407	4,518	6,659	3,875	1,205	320	66,351	8,294
Travel expenses	$9,67	1,842	4,555	510	1,700	3,499	2,057	1,588	25,422	3,178
Other operational costs	23,55	28,391	11,280	7,561	5,315	33,081	23,088	10,786	143,059	17,882
Property Costs	6,825	539	7,060	7,988	3,581	15,862	3,299	11,148	56,302	7,038
Brokerage Funds	9,601	5,709	21,688	26,971	15,370	24,196	2,208	20,027	125,770	15,721
Total Expenditure	163,503	172,163	156,250	160,021	162,840	191,519	160,320	163,130		166,218
No. of Clients										
Casual	49	152	61	81	42	49	41	60	533	67
Non-Casual	56	71	87	41	107	84	47	79	570	71
Total	104	223	147	122	149	132	88	139	1103	138
Cost per client casual = non-casual	1,572	774	1,063	1,317	1,093	1,451	1,832	1,174	1,206	1,206
Funds spent on casual clients	21,326	22,456	20,380	20,872	21,240	24,981	20,911	21,278	173,445	21,681
Funds spent on non-casual clients	142,177	149,707	135,870	139,148	141,600	166,539	139,409	141,852		144,538
Cost per client casual	440	148	337	258	506	515	516	355		325
Cost per client non-casual	2,562	2,124	1,571	3,436	1,323	1,994	2,966	1,796		2,030
Centrelink Costs *	85,875	85,875	85,875	85,875	85,875	85,875	85,875	85,875	687,000	85,875
Cost per client casual incl. Centrelink	614	267	534	380	794	736	692	543		493
Cost per client non-casual incl. Centrelink	3,577	3,833	2,491	5,061	2,078	2,851	3,975	2,749		3,079
Ave Cost per client including Centrelink	2,195	1,397	1,686	1,940	1,716	2,074	2,455	1,797	1,829	1,829

* The Centrelink cost per agency is a notional allocation, not an actual expenditure

Table 32 below compares costs of the HOME Advice Program with the SHAP cost of $3,247. It also provides the SAAP cost of families ($4,551) who enter homelessness and SAAP.

Table 32: Cost per client HOME Advice Program, SHAP and SAAP

Program	Unit Cost
HOME Advice Program	$3,079/family
SHAP	$3,300/family
SAAP cost/client [ROGS indicator]	$3,130/client

Economic impact of homelessness prevention

A broader assessment of cost effectiveness needs to consider not only the costs of programs directly providing services to homeless individuals or families, but also the indirect costs to the community.

There are many indirect consequences that might be expected to follow as the result of an effective homelessness prevention program. If the program achieves improved mental health, financial stability and employment, the use of emergence medical services and criminal justice services is likely to fall, resulting in lower health and criminal justice outlay by government. Further, if a housing support program results in long-term reduction in the homeless population, as the HOME Advice Program aims to do, then, the cost of providing high cost emergency crisis accommodation should also reduce over time. The reduced costs of these services have been found to significantly offset the cost of housing provision (Culhane et al., 2002 and The Corporation for Supportive Housing, 2004). These indirect impacts, frequently referred to as 'cost-offsets', should be costed and included in any analysis of the cost effectiveness of homelessness programs. Cost-offsets are calculated as the reduction in the cost of service delivery discounted to capture an estimate of the ongoing impact of future service usage. If the service usage is not expected to change then the annual cost is multiplied by the expected remaining life of the person.

This evaluation draws on early work by Pinkney and Ewing who examined the cost-benefit issues for youth homelessness using assumptions about what might be the consequences for homeless youth compared to the broader youth population. Although they focused on youth homelessness, more than 50,000 children and young people are supported in SAAP services each year. The second source of information comes from Dr Paul Flatau who has done important empirical and analytical work on the 'Effectiveness and cost-effectiveness of homelessness prevention and assistance programs' due to published later in 2007. The group in this Western Australian study were families in public housing facing eviction and homelessness. So far, the main areas in which cost-offsets have been estimated are health and crime and justices/legal systems.

Homelessness has been linked to poor health in Australia (Burdekin Inquiry 1989 p.236) and Jordan (1995 p.34). In the UK, the Royal College of Physicians (RCP) (1994 p. 61) for a whole range of conditions, while in the US, studies have found that homeless people spend longer periods in hospital than the general population (Salit et al., 1998; Eberle et al. 2001; Culhane et al., 2002).

The present value of total health deterioration costs of children in families expected to become homeless is $98,000,000 and criminal justice costs is $52,000,000; a total of $150,000,000 (Pinkney & Ewing, 1997). The cost of the deterioration in adult health is estimated to be $50,000,000. In total the cost offsets relating to health and criminal justice using this methodology are $200,000,000.

Flatau (2007) suggests a similar result but different figures. The higher frequency of hospital visits reported by at risk families compared with the population adds $8,464 per year for SHAP clients to the government cost of health services. The total health and criminal justice offsets are $10,643 and $2,541 respectively. The total lifetime estimated cost offsets would be $332, 315 per family or some $4.7 billion totalled across the population. If the effect were only 10 years or so, the estimated cost offset would be $1 billion. The cost offsets are large amounts hidden from direct government budgeting on homelessness programs which are an accumulating liability for the economy and the community.

7.3 Summary

- Cost per client family for the HOME Advice Program ranged from a high of $5,061 to a low of $2,078 and average of $3,079
- The HOME Advice Program average cost per client family of $3,079 is lower than the average cost of supporting families in SAAP. As given in the Report on Government Services 2007, the average cost per client in SAAP is $3,130, but the cost per client will be lower than this average for singles and higher for families. Western Australian estimates for SAAP calculated by Flatau (2007) were $1,548 per individual support period and $4,551 per family support period. However, these SAAP cost figures are based on support and operational costs and do not include a cost component for buildings. The total potential cost offsets from providing assistance to families at risk of becoming homeless is substantially greater than the cost of support to the homeless family in SAAP.
- The unit cost of supporting HOME Advice families of $3,079 compares favourably with the Western Australian early intervention program SHAP (similar to but more limited than HOME Advice), which has a unit cost of $3,300.
- Providing assistance to prevent homelessness has a range of benefits for clients and for society. The alternative to an early intervention program is that a significant percentage of families at risk of homelessness become homeless and may become clients of SAAP. There is a very large productivity loss to the economy of adults who slip into homelessness together with an impact on the educational achievement of children in homeless families with a resulting impact on long-term or lifetime earnings. These are long-term impacts but their extremely large values cannot be overlooked.
- Survey results from the SHAP Program show that the cost of health and justice services is greater for clients of the HOME Advice Program than the population in general and the total potential cost offsets from providing assistance to families at risk of becoming homeless is substantially greater than the cost of support. The cost of government outlays on health and justice services is also likely to be greater for clients at risk of becoming homeless is $13,184 annually per person (from survey of SHAP clients) giving an estimated average life outcome of $330,000 per person.
- From an estimated 23,000 people in homeless families this produces a present value of all health and justice cost offsets of $7,500,000,000 using the methodology employed by Flatau (2007) and $200,000,000 using Pinkney and Ewing's (1997) less precise method.
- Quantifiable benefits (in addition to cost offsets) of the program largely relate to keeping children at school to achieve better life outcomes and keeping parents in work. The cost of educational disadvantage of children in families at risk of homelessness is $550,000,000..
- The cost per client of HOME Advice Program is lower than that of SAAP. Cost offsets (the quantity of costed benefit depends on the assumptions made) on any set of assumptions could ultimately achieve a large compensatory cost saving to the community over the long-term. However, this potential impact will depend on how much early intervention is provided and then on structural factors such as the affordability of housing and the state of the labour market for family members that have been supported under the HOME Advice Program.

8 Program Strengths

8.1 Early Intervention

The HOME Advice Program was designed to provide early intervention support to families at risk of becoming homeless. A major success factor was the robust gate-keeping practice of all sites to exclusively target families before they become homeless. Even in regional sites where SAAP and other homelessness services were few and far between on the ground, the early intervention focus of the program was clearly maintained.

All sites commented that in the first few years of the FHPP pilot they engaged in a lot of capacity building to educate SAAP and other homelessness and community agencies about early intervention. A potential threat to any early intervention approach is that demand for housing and related homelessness support services will overcome the preventative focus and lead to the service becoming a pseudo-SAAP provider.

The community education aspect of the program extended to the critical 'first to know' agencies such as Centrelink, public housing authorities and real estate agents with a clear message about providing timely referrals to the program as early as possible once a family had been identified as 'at risk'. These early efforts resulted in an improvement in the appropriateness of referrals and over time, more referrals from a range of community agencies. During the consultations, outside programs, services and 'first to know' agencies, commented on the benefit of being able to refer at-risk families and the need for more HOME Advice services.

The outcomes of HOME Advice intervention for families is a strong finding of effectiveness and sustainability with an average of between 72 per cent and 88 per cent of families maintaining their housing some six to 12 months after leaving the program. The capacity of the program to reach families before they slide into homelessness and to address the immediate threat to their housing tenure and financial situation in a timely and efficient manner, is the core of 'early intervention'. Without these two activities, the early intervention focus, and the ability to achieve such strong outcomes, would be diminished.

8.2 Holistic Approach

Working holistically with all members of a family, from children to parents, de-facto partners, grandparents, extended family as well as with other household members is a unique strength of the HOME Advice Program. The holistic approach involves case management with the whole family, which means that appropriate assistance and services that are best placed to support families are clearly identified, fully utilised and coordinated through the HOME Advice Program.

Another aspect that has contributed to the strength of the program is the capacity to work with families from culturally diverse communities and families who come from a range of housing situations. This includes families that are in the private rental market, in social housing programs, in public housing or families that have a mortgage.

Working holistically also involves a dedicated capacity to respond effectively to Indigenous family homelessness within an early intervention focus – a policy area that is considerably underdeveloped and poorly researched. The success of the dedicated Indigenous HOME Advice Program in South Australia is therefore of particular significance, but raises some questions about what might be required to support a sustainable outcome for Indigenous families over the long-term.

8.3 Strengths-Based Interventions

Strengths-based, family-centred practice is based on the premise that families change and learn through an appreciation of their strengths and aspirations (CECFW, 2005) as the foundation of constructive social case-work. Focusing on a family's strengths rather than their deficits is an important element of this approach and draws on a family's resilience and efforts in coping and surviving in an often hostile economic and social environment (Hayes, 2004).

There are four key success factors for working within a family-centred practice framework:

- A genuine commitment to working with the whole family;
- A conceptual framework which allows for the understanding of the ecological contexts of children, families and communities, in the wider society;
- A recognition of the skills in engaging families, nurturing their hopes and aspirations for their children, building on their strengths;
- A focus on inter-agency, inter-professional cooperation (Scott cited in Hayes, 2004)

The HOME Advice Program works along the full continuum of issues that families may have and for however long such support and assistance is needed. This includes families who come with one or two problems that are relatively easy to resolve through to families who present with multiple and complex needs. The important aspect here is that a strengths-based approach is used to acknowledge and build on family resilience and independence using community capacity-building strategies and a case management approach that highlights family strengths and resilience.

The results from the HOME Advice Program follow-up survey showed that families were more resilient in dealing with their issues. Resilience refers to qualities of individual family members, as well as the family as a whole, to cope better with adversity and stress. Most families assisted by the program had not only maintained their improved situation but were also coping better than when they first came to the program.

8.4 Centrelink and Community Agency Partnership

Achieving effective early intervention for 'at risk' families within the program is linked with the innovative partnership efforts that supported the joint venture between local Centrelink Customer Service Centres and the HOME Advice community agency providers.

The work of the Centrelink HOME Advice social worker varied in each site. For example, in one site the Centrelink HOME Advice social worker acted as the key entry point to the program facilitating the full intake and assessment process for the HOME Advice team. In other sites the models of program delivery included the Centrelink HOME Advice social worker taking a small case load or exclusively managing the casual client cases. The common theme in all sites, however, was that the Centrelink HOME Advice social workers generally participated in the life and work of the agency. The result of this partnership was a seamless continuum of service delivery, which was specifically focused on achieving an immediate early intervention response to client families of the program. The co-location of the Centrelink social workers in the community agencies worked well and contributed to an effective collaborative team.

There are three major factors that contributed significantly to the success of the partnership between Centrelink and the community agency providers. First, the Centrelink HOME Advice social worker worked closely with the agency. This facilitated the community agency workers and the Centrelink HOME Advice social worker working as a team rather than as separate services. The Centrelink HOME Advice social worker subsequently became an accepted member of the HOME Advice Program team participating in the broader activities of the program (such as case management, action research, group work and home visits etc).

Second, there was a clear understanding among the workers of their respective roles and responsibilities within the partnership and this was supported by senior managers in both the community agencies and Centrelink. The range of skills and expertise in the HOME Advice Program teams often provided a multi-disciplinary approach to service delivery. While all Centrelink HOME Advice staff were qualified social workers, the community agency workers, many of whom are social workers, brought the skills, knowledge, expertise and experience of other disciplines such as community development, psychology, youth work and welfare work.

Finally, a commitment to collaborative work practices and a clear understanding of homelessness and early intervention by both workers and senior management provided a strong practice framework for implementing the model and 'testing' various strategies, approaches and innovative ideas.

8.5 HOME Advice Program as a Best Practice Example

The term 'best practice' is frequently used interchangeably with 'good practice' but both terms refer to the same notion – practice based on sound independent research and evidence and that has been trialled and proven to achieve the desired outcomes. While some good practice models are well established and widely used, other models are still being 'tested' in practice but are based on solid theoretical frameworks. For example, the best practice principles of working with families include family inclusiveness, family driven decision-making, a holistic approach of working across multiple issues and a focus on family strengths and resilience rather than their deficits. These are well-accepted principles that are widely implemented in specific models of service delivery and are even enshrined in public policy (i.e. the Australian Government's 'Stronger Families and Communities Strategy'). Harm minimisation in the alcohol and drug field is another example of how best practice can have a significant impact on a broader policy and practice level. The concept of 'early intervention' has been extensively researched and argued about in the policy debates. Quite a lot is known about doing early intervention with homeless youth but less on other groups in the homeless population.

However, in other areas, some well-developed principles have emerged but have not yet become 'knowledge' in the form of widely accepted and well-established tested practice models. An example is in the area of 'Indigenous homelessness' where research has illuminated how the homeless experience of Indigenous people differs from homelessness in the broader community, but little has been done at this point to construct specific models that are demonstrably effective.

Clearly, the HOME Advice Program model is based on best practice principles and models of intervention in the fields of family work, homelessness and early intervention. These have been collectively applied to the issue of family homelessness for the first time on a national scale.

There are some pointers to how and why the best practice principles have been implemented into an effective model.

First, the balance between national leadership, support and management accountability has been appropriately balanced with local responsibility for service delivery through the funded community agencies and seems to have been about right.

Second, the HOME Advice Program has demonstrated a coherent disciplined focus on early intervention without a significant amount of 'program drift' whereby perhaps homeless families are admitted to the program or families who have some problems but whose actual risk of homelessness is relatively low. The families accepted into HOME Advice varied in terms of the issues they were dealing with but were all facing the serious prospect of becoming homeless. Flexibility at the service delivery level did not undermine the robustness of the model.

Third, the program is strongly 'needs based' and works holistically with families that have high and complex needs as well as families with relatively low needs, all within a model that acknowledges and focuses on a family's strengths and resilience. The principle of needs-based support has not been compromised by other requirements such as time limits on the support period or the amount of resources that any one family might be given.

Fourth, the HOME Advice Program model has the capacity to successfully achieve early intervention with Indigenous families. This is an important achievement. The Indigenous component of the HOME Advice Program successfully designed and implemented a model of support that sensitively incorporated cultural knowledge, community development and sound service provision principles and strategies under the umbrella of the broader HOME Advice Program. The exemplar of the South Australian site could be replicated in other locations with distinct Indigenous communities.

Finally, the program embodies an innovative good practice example of a 'whole of government' partnership between two government agencies and the community sector with some clear implications at the practice level for on-the-ground service provision. The Centrelink HOME Advice social worker position is an important success factor contributing to the level of homelessness prevention for at risk families achieved by HOME Advice.

8.6 High Social Impact

The social impact of the HOME Advice Program can be examined at several levels. Firstly, there is the demonstrable effect of the support on the lives of the HOME Advice Program families who receive support. The evidence shows that homelessness is averted and families' resilience and overall situation is improved in more than nine out of ten cases.

The second impact is the effect of successful early intervention on the broader service system – in particular what would happen to the number of families entering SAAP as homeless families if early intervention is successful for a proportion of potential SAAP clients. To what extent this potential impact is achieved will depend on the quantum of early intervention programs deployed to meet the need. Families (with approximately 58,000 accompanying children) are close to one third of the homeless clients receiving help through SAAP. It is likely that a significant proportion of homeless families would have been eligible for the HOME Advice Program had they been reached before the onset of homelessness.

The third social impact is about the broader society and economy. The cost-effectiveness assessment, which examined community benefits and long-term cost offsets in Chapter 7, estimated savings ranging from about $300,000,000 to $7.6 billion depending on the assumptions made about how long-term the effects of homelessness are likely to be. However, on all reasonable assumptions, the long-term cost of homelessness to the community is large compared to the cost of $3,079 per client family for early intervention support under the HOME Advice Program model.

9 Recommendations

The HOME Advice Program is a demonstrably highly effective response for reaching at-risk families and preventing homelessness. It is an example of 'indicated prevention' directed at families where there is clear evidence of a deteriorating position leading to homelessness. The core measure of the effectiveness of the HOME Advice Program is whether families remain in independent accommodation and do not become homeless following their participation in the program. For client families supported actively during 2005, 86 per cent of families maintained or improved the stability of their housing. In 2006 this was 87 per cent and in 2007 it was 88 per cent. This is by any standards in human services a very high level of achieved program outcomes.

The program intervention provided support in a flexible holistic way for as long as the client family required assistance to move forward. The support was strengths-based, focused on keeping at-risk families in their housing and preventing homelessness, and importantly it was about building resilience and skills so that families can sustain their changed situations. The evidence from the follow-up survey found that the program had achieved a high level of sustainability due to increased resilience in families supported under the HOME Advice Program. This is a very strong finding.

Recommendation 1:

That the HOME Advice Program be expanded as an Australian Government early intervention/prevention program for assisting families at risk of homelessness. Any expansion of the program should pay attention to:

- The importance of the cross-government partnership between FaCSIA and Centrelink in the program model;
- A match between the quantum of service resources and the extent of need by geographical area in order to optimise effectiveness;
- A cyclical or phased rollout of new agencies;
- An evidence-based approach to program development;
- A strong capacity to assist Indigenous families.

Decisions on the quantum of program intervention required depend on measures of the population in need – in this case an agreed measure of the number of 'at-risk' families. The development of the at-risk indicators (see discussion of family homelessness and more detailed information in Appendix 1) provides a rational basis for deciding priorities between areas in terms of need, as well as assessing the overall quantum of program resources required to meet the actual and likely expressed need from at-risk families.

The HOME Advice Program model has been implemented strongly across the different sites, despite local differences and some idiosyncratic factors between sites. In general, the model-in-practice was highly consistent across the eight sites. The sites maintained a strong commitment to 'early intervention' work with families 'at risk', but not homeless.

Early intervention is time sensitive and will fail if there is a significant wait time and/or if financial issues cannot be addressed effectively. Many times the Centrelink system is implicated in some way in the client family's financial crisis, sometimes as part of the problem but otherwise often an important contributor to arrangements that alleviate the situation. The Centrelink HOME Advice social worker played a crucial role in facilitating immediate early intervention by quickly and efficiently addressing families' problems with Centrelink entitlements and debts.

The success of the South Australian Indigenous service Wodlitinattoai was notable, as a model of working with the Indigenous community using Indigenous workers within a broader appropriate mainstream agency. The professionalism and cultural understanding of the Indigenous workers and the planning and design of specific service principles, protocols and standards for working with Indigenous communities all contributed to the success of the Wodlitinattoai model.

The development of an expanded program should follow a similar approach to the way that the Reconnect program was rolled out since this builds in opportunities for learning and improvement. The national workshops conducted during the life of the HOME Advice Program provided platforms for shared knowledge and an impetus for program development. These elements ought to be strengthened and resourced.

An effective and efficient system of referral is important for early intervention to work. In the first year or so, all eight sites established themselves relatively quickly as 'a site for early intervention' in their local and regional service system. Centrelink remains the largest single source of referrals but the range of other referral sources suggests the HOME Advice Program achieved strong networks in their local communities. This result was attributed to the community development work performed by the HOME Advice Program workers. Some allowance needs to be made to provide for local systems building and maintenance.

An expanded HOME Advice Program will require a sophisticated data collection and reporting system which can, from the outset, use secure internet IT tools. Data collection and information systems need to measure changes such as housing, labour force participation etc but also resilience, social support and a range of life changes, which reflect the holistic approach of the HOME Advice Program.

Recommendation 2:

That the HOME Advice Program be developed with consideration of:

- A flexible partnership model whereby a Centrelink HOME Advice social worker and the community agency provider work collaboratively;
- Indigenous program units of expertise located within mainstream agencies;
- An action learning component leading to an approach for quality assurance and service development within the program;
- A capacity for building and maintaining the local service system as a community of support services for at risk families;
- A national program electronic data collection with client data, a satisfaction survey and a client follow-up survey.

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Appendices

Appendix 1
Developing an indicator of families at risk of homelessness

An indicator of families at-risk of homelessness is required to be able to compare the need in one geographical area with another. The indicator will be a statistical and empirical construct that draws on theory about homelessness and data on family homelessness incorporating assumptions to create an index which should be higher when there are more homeless families and lower when there are less. On many issues, the indicators used distinguish the relativities between areas, while not providing absolute figures on the extent of the problem.

From a technical standpoint, the question is whether geographical data on the problem exists which can be used to decide on the rational allocation of resources between states and territories and within states and territories. Two different methodologies have been applied to the task of producing a realistic and robust indicator of 'families at risk of homelessness'.

Three out of four families coming to the HOME Advice program are single parent families in which the parent is female. The risk of homelessness for couples with children is less than for single parent families because of a generally more extended possibility for social support on either parent's side and because of the greater possibilities for resilience through mutual support and cooperation. Most of the families were facing a deteriorating financial situation. Overall nearly half were in private rental (48%) and about one third (36%) were in public housing of one kind or another. The first source of data is the ABS census data on families in rental accommodation and the at-risk indicator derived from rental data is called the rental indicator [RIND].

The population data on homelessness in Australia has been produced. In 2003, this work yielded the number of homeless individuals (adults and children) by ABS statistical division and statistical sub-division based on the 2001 ABS Census. Although the number of homeless families cannot be derived in any simple way, there is some reliable national level information on the proportion of families in different sectors. The indicator inferred from the homelessness data is referred as the 'Homeless Indicator' [HIND].

As various assumptions are applied in each case, empirical comparative information has been used wherever possible and conservative decisions have been taken, on the grounds that errors of over-estimation are more likely than under-estimation.

Deriving the Rental Indicator [RIND]

In the first iteration of this indicator, it was decided to base the rental indicator on single parent families only. Single parent families are about 9 times more likely to seek to access SAAP than couples with children. The following rental statistics on Melbourne are used to illustrate the development of the 'Rental Indicator' – RIND.

Table A1: Sole parents in private rental in 3 Melbourne SSD's

	Potentially Unaffordable	Total NS	Total Private rental	State
Inner Melbourne	576	198	1,700	2,075
Western Melbourne	2,065	442	4,120	2,074
Melton-Wyndham	790	146	1,445	389

The above example gives the total private rental in three Melbourne statistical sub-divisions: Inner Melbourne – 1,700; Western Melbourne – 4,120 and Melton-Wyndam – 1,445. Public/Community housing in Inner Melbourne was 2,075, Western Melbourne – 2,074 and Melton-Wyndam – 389. The first assumption about families in private rental is the criterion for deciding which families are financially vulnerable.

The unpublished data from a sample survey of low income private renter families suggests that about half experience rental arrears during a year while about half of these families seriously face loss of their housing i.e. risk becoming homeless. Thus the total estimated number of at risk families is 198 in Inner Melbourne, 442 in Western Melbourne and 146 in Melton-Wyndam.

A large proportion of the families in state housing are on low incomes but the risk of losing that accommodation is significantly less than for families in private rental. Tenure is much more secure and various arrangements can be made to redress rental arrears. It is therefore estimated that 1 in 10 of the public housing tenants are vulnerable to homelessness by losing their public housing rental compared to 1 in 4 of the most vulnerable private renters. Following the examples ...

- Inner Melbourne: estimated at risk families[RIND] = 0.25*576 + 0.1*2075 = 257
- Western Melbourne: estimated at risk families [RIND] = 318

Deriving the Homelessness Indicator [HIND]

The second approach to developing an at-risk indicator is to work back from the homelessness population data on families to estimate the number at risk over a year. This is inferential because household data is not as adequately available for all sectors of the homeless population. Few families – couples or single parents with children spend time sleeping out. In rural areas families in a primary homelessness situation are most likely to be residing in a bush shack [improvised dwelling] and this may be their permanent or semi-permanent way of life. The category of primary homelessness is not included in the indicator. Likewise it is difficult to establish the proportion of families in boarding houses. Families in SAAP can be established over the year and at a point in time. This is about 35 per cent. Families staying with friends can also be enumerated and is about five per cent. The time families spend homeless once they become homeless has been estimated at 6–7 months. Over the year the number of homeless families will be somewhat higher than the point in time estimate but also there will be some double counting. The conservative assumption is that the point in time estimate is the same as the annual number.

- Inner Melbourne: estimated at risk families[HIND] = 0.35*538 + 0.05*728 = 225
- Western Melbourne: estimated at risk families [HIND] = 0.35*538 + 0.05*521 = 215

The two indicators RIND and HIND have been derived from different data sources

In Figure A1 the two indicators of families at risk of homeless are displayed. Derived by different methods involving different assumptions and from different data, they purportedly estimate the same quantity – the number of at risk families in a designated area.

Figure A1: Correlation of RIND and HIND

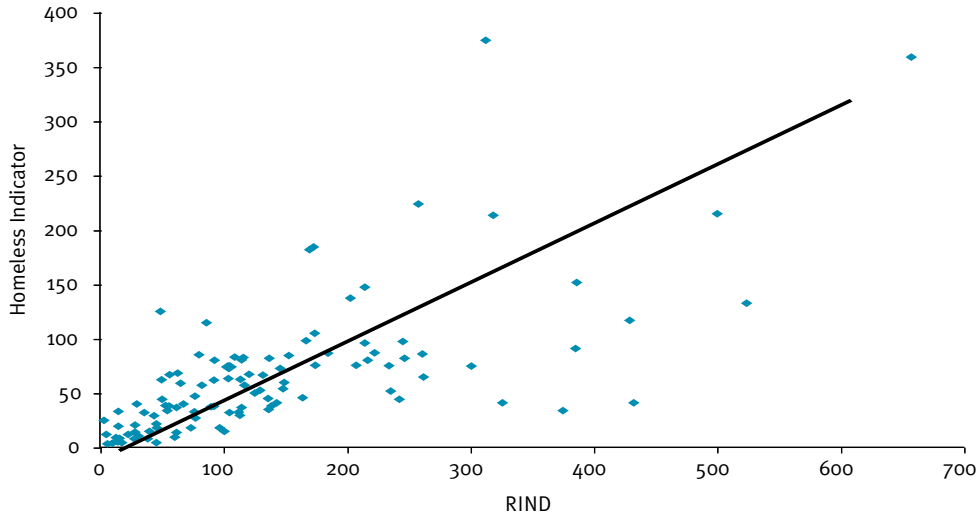

Figure A1 shows that the two indicators are strongly correlated. The Pearson r coefficient is 0.68 [significant at the 0.01 level] and RSquare = 0.89 measures the variance explained by the linearity of the line of best fit. The indicators are strongly correlated and thus used separately or combined together they provide a basis for estimating the relativity of need between different geographical regions and the quantum of resources that might be applied to meet the need.

Some points have more at risk families based on RIND but a lower HIND. Blacktown is one example. In some communities particularly communities of people from culturally and linguistically diverse backgrounds there are strong protective social support networks associated with extended families and mutual aid within the community. On the other hand, there are some points where HIND is higher than RIND. Among these are the inner city areas of Australia's capital cities where homeless people come from elsewhere.

Assessing need geographically

The model using the two converging indicators can be used to estimate the number of workers by area. The key divisor is the case-load per worker per year. The duration of a case will depend on the complexity of the issues and how the process of engagement and support works out in practice. For the purpose of these calculations this has been set at 20 per year – only some cases will be year long in duration, while others (about 50%) will be less than 20 weeks.

The cost per worker is based on the latest indexed budget figures in the program guidelines – $166,250 (2007–08) which includes administration and on-costs as well as brokerage and 1.5 workers. The notional cost per agency worker has been taken as $100,000 per annum. In the following table, QR is the number of workers based on a case load of 20 client families per worker per year and using the Rental Indicator [RIND] as the measure of the population in need over the year. Likewise, QH is the number of workers based on a case load of 20 client families per worker per year and using the Homelessness Indicator [HIND].

This report argues that the Centrelink contribution is important. For the purpose of these calculations the Centrelink fraction is 0.25 EFT / agency worker. As well there are the costs of program management, national conferences, program development and data collection and evaluation. Each agency will require the services of a Centrelink HOME Advice Program social worker which has not been added in to these calculations.

QH is the predicted number of workers to meet the full demand of at risk families based on the homelessness indicator. This would translate into $39,000,000 annually fully implemented. At the other end of the indicated range of need based on an hypothesised at risk population based on ABS Census data on private and public rental, this would translate into $78,000,000 per annum. Another point of reference is the proportion of the SAAP budget expended on families which, when based on a notional 35 per cent of support periods used by families, would be in the order of $60,000,000.

Table A2: Profile of the at risk families indicator by state and resources

State	RIND	HIND	QR	QH	Cost[QH] $
NSW	5485	1893	274	95	9,500,000
VIC	3016	2165	151	108	10,800,000
QLD	2866	1397	144	69	6,900,000
SA	1567	851	78	42	4,200,000
WA	1666	991	83	49	4,900,000
TAS	549	183	27	9	900,000
ACT	428	175	21	8	800,000
NT	235	186	11	9	900,000
Australia	15812	7841	791	392	39,000,000

While the two indicators correlate highly there will be variation and for practical purposes a figure will need to be determined area by area that reconciles the two numbers. In the above table the state funds would need to somewhat closer to QR than based on QH as done in the table for illustrative purposes. The indicator(s) highlight the relativities of need, but in the implementation, a number of important contextual and local issues would need to be considered.

The first is the mobility of homeless families and individuals. This explains a major part of the variation between the two indicators. In the inner city area of Australia's capitals, the HIND tends to be higher than RIND because there is a drift to the city centre, where there has historically been a concentration of homelessness services. This would not mean that a high level of early intervention services for families should be located there. Also communities differ in social composition and in some places the number of homeless families [and homeless people generally] is lower than predicted by an at risk indicator based on ABS rental data.

Also, for many single parents with children entering SAAP, domestic violence has precipitated the crisis of accommodation and where this is the predominant issue, SAAP family violence services will be needed to play a central role. In the 2004–05 SAAP NDCA Annual Report, 38 per cent of female single parents with children received counselling for domestic violence and in these cases, domestic violence is likely to have been the major issue. For these families, SAAP is still the most appropriate option in all probability.

It is unlikely that even an extensive early intervention program could reach every at risk family destined to experience homelessness with 100 per cent efficiency, so a significant number of families will continue into SAAP over time, if sufficient early intervention resources are deployed then there may be relief of the pressure on supported accommodation over the long term.

Expressed need is the indication of need in the community as shown by behavioural activity by clients or potential clients – calls to an agency seeking assistance, SAAP turn-away rates or waiting lists. Drawing on the experience of Reconnect, a phased implementation would allow for the development of better information of demand and a developmental approach to service deployment. Whereas, the HOME Advice agencies have not maintained waiting lists or systematically collected data on expressed demand, but in the broader program expansion it would be important to do so. Table A3 lists the indicator figures for the populations of at-risk families by ABS Statistical Sub-Division. For each area, a notional allocation of resources needs to be made and the judgement should take into account local knowledge which might help decide whether the best allocation is closer to QR or QH.

Table A3: Geographically sensitive Indicators of families at risk of homelessness

			RIND	HIND	QR	QH	Cost[QH]
NSW	10505	Inner Sydney	312	375	15.6	18.8	
	10510	Eastern Suburbs	163	47	8.2	2.3	
	10515	St George-Sutherland	235	53	11.7	2.6	
	10520	Canterbury-Bankstown	325	42	16.3	2.1	
	10525	Fairfield-Liverpool	384	92	19.2	4.6	
	10530	Outer South Western Sydney	374	35	18.7	1.7	
	10535	Inner Western Sydney	108	84	5.4	4.2	
	10540	Central Western Sydney	300	76	15.0	3.8	
	10545	Outer Western Sydney	216	81	10.8	4.0	
	10553	Blacktown	432	42	21.6	2.1	
	10555	Lower Northern Sydney	138	39	6.9	1.9	
	10560	Central Northern Sydney	104	33	5.2	1.6	
	10565	Northern Beaches	89	38	4.5	1.9	
	10570	Gosford-Wyong	233	76	11.7	3.8	
	110	Hunter	523	134	26.2	6.7	
	115	Illawarra	386	152	19.3	7.6	
	120	Richmond-Tweed	174	76	8.7	3.8	
	125	Mid-North Coast	222	88	11.1	4.4	
	130	Northern	148	60	7.4	3.0	
	135	North Western	112	33	5.6	1.6	
	140	Central West	148	55	7.4	2.7	
	145	South Eastern	136	83	6.8	4.1	
	150	Murrumbidgee	131	67	6.5	3.4	
	155	Murray	77	28	3.8	1.4	
	160	Far West	15	9	0.7	0.4	$9.5 m
VIC	20505	Inner Melbourne	257	225	12.9	11.2	
	20510	Western Melbourne	318	214	15.9	10.7	
	20520	Melton-Wyndham	75	34	3.8	1.7	
	20525	Moreland City	79	86	4.0	4.3	
	20530	Northern Middle Melbourne	202	138	10.1	6.9	
	20535	Hume City	103	64	5.2	3.2	
	20540	Northern Outer Melbourne	64	60	3.2	3.0	
	20545	Boroondara City	52	39	2.6	2.0	
	20550	Eastern Middle Melbourne	172	185	8.6	9.2	
	20555	Eastern Outer Melbourne	114	81	5.7	4.1	
	20560	Yarra Ranges Shire Part A	49	45	2.5	2.2	
	20565	Southern Melbourne	169	182	8.4	9.1	
	20575	Greater Dandenong City	104	75	5.2	3.7	
	20580	South Eastern Outer Melbourne	120	68	6.0	3.4	
	20585	Frankston City	91	39	4.6	1.9	
	210	Barwon	184	87	9.2	4.4	
	215	Western District	62	69	3.1	3.5	
	220	Central Highlands	116	58	5.8	2.9	
	225	Wimmera	27	21	1.4	1.1	
	230	Mallee	76	48	3.8	2.4	
	235	Loddon	115	83	5.8	4.2	
	240	Goulburn	145	73	7.3	3.7	
	245	Ovens-Murray	82	58	4.1	2.9	
	250	East Gippsland	55	36	2.7	1.8	
	255	Gippsland	113	63	5.7	3.2	$10.8 m

			RIND	HIND	QR	QH	Cost[QH]
QLD	30505	Brisbane City	657	360	32.8	18.0	
	30510	Gold Coast City Part A	61	37	3.1	1.9	
	30515	Beaudesert Shire Part A	5	4	0.3	0.2	
	30520	Caboolture Shire Part A	114	37	5.7	1.9	
	30525	Ipswich City (Part in BSD)	136	36	6.8	1.8	
	30530	Logan City	242	45	12.1	2.2	
	30540	Pine Rivers Shire	61	14	3.1	0.7	
	30545	Redcliffe City	60	10	3.0	0.5	
	30550	Redland Shire	73	19	3.6	0.9	
	310	Moreton	499	216	25.0	10.8	
	315	Wide Bay-Burnett	166	99	8.3	4.9	
	320	Darling Downs	129	53	6.5	2.7	
	325	South West	14	20	0.7	1.0	
	330	Fitzroy	152	85	7.6	4.3	
	335	Central West	4	12	0.2	0.6	
	340	Mackay	91	63	4.6	3.1	
	345	Northern	173	106	8.7	5.3	
	350	Far North	214	148	10.7	7.4	
	355	North West	35	33	1.7	1.6	$6.9 m
SA	40505	Northern Adelaide	428	118	21.4	5.9	
	40510	Western Adelaide	261	65	13.1	3.3	
	40515	Eastern Adelaide	85	115	4.3	5.8	
	40520	Southern Adelaide	246	83	12.3	4.1	
	410	Outer Adelaide	45	19	2.3	0.9	
	415	Yorke and Lower North	17	5	0.8	0.3	
	420	Murray Lands	55	39	2.7	1.9	
	425	South East	54	35	2.7	1.7	
	430	Eyre	28	15	1.4	0.7	
	435	Northern	103	75	5.1	3.7	$4.2 m
WA	50505	Central Metropolitan	48	126	2.4	6.3	
	50510	East Metropolitan	142	42	7.1	2.1	
	50515	North Metropolitan	261	87	13.0	4.3	
	50520	South West Metropolitan	207	76	10.3	3.8	
	50525	South East Metropolitan	245	98	12.2	4.9	
	510	South West	135	46	6.8	2.3	
	515	Lower Great Southern	39	15	2.0	0.8	
	520	Upper Great Southern	9	5	0.5	0.2	
	525	Midlands	30	11	1.5	0.6	
	530	South Eastern	45	22	2.2	1.1	
	535	Central	67	41	3.3	2.0	
	540	Pilbara	43	30	2.2	1.5	
	545	Kimberley	49	63	2.5	3.1	$4.9 m
TAS	605	Greater Hobart	214	97	10.7	4.8	
	610	Southern	14	6	0.7	0.3	
	615	Northern	125	51	6.2	2.5	
	620	Mersey-Lyell	112	30	5.6	1.5	$0.9 m
ACT	80505	North Canberra	56	68	2.8	3.4	
	80510	Belconnen	100	16	5.0	0.8	
	80515	Woden Valley	27	9	1.4	0.4	
	80520	Weston Creek-Stromlo	22	13	1.1	0.6	
	80525	Tuggeranong	96	19	4.8	0.9	
	80535	South Canberra	38	9	1.9	0.4	
	80540	Gungahlin-Hall	12	10	0.6	0.5	$0.8 m

			RIND	HIND	QR	QH	Cost[QH]
NT	70505	Darwin City	92	81	4.6	4.1	
	70510	Palmerston-East Arm	45	5	2.2	0.3	
	71030	Lower Top End	3	26	0.1	1.3	
	71040	Central NT	29	41	1.5	2.0	
		NT bal dm defined	14	34	0.7	1.7	$0.9 m
Aus							$39.0 m

Appendix 2
HOME Advice Program Case Data Form

Australian Government
Department of Family and Community Services

Family/Case form

Household Organisational Management Expenses (HOME) Advice Program

Agency ID | **Case Number** | **Support START date** 20 | **Support END date** 20

1 REFERRAL SOURCE

- Self 1
- Family/friends 2
- Centrelink (profiling) 3
- Centrelink worker referral 4
- Early childhood services 5
- Family support services 6
- School/other educational institution 7
- Material aid/emergency relief 8
- Counselling services (financial/relationship etc.) 9
- Child protection agency 10
- Job Network 11
- Mental Health services 12
- Other health services 13
- Legal unit (courts/police/detention centre etc.) 14
- Real estate agent/agency 15
- Community housing/State Housing Authority 16
- Other 88

2 PRIMARY FAMILY STRUCTURE

	Before Support	After Support
Couple with children 1		
Couple only (no children) 2		
Sole-parent family 3		
Other 8		

3 NUMBER OF FAMILY MEMBERS

	Before Support	After Support
Cohabiting adults (18+)		
Other adults (18+) wanting to cohabit		
Cohabiting children (under 18)		
Other children (under 18) wanting to cohabit		

4 POSTCODE OF HOME ADDRESS

Before Support | After Support

5 LENGTH OF TIME AT THIS ADDRESS

If less than one month, write 00 months and 00 years

Before Support		After Support	
Months	Years	Months	Years

6 CURRENT DWELLING TYPE

	Before Support	After Support
House, terrace/townhouse, flat, unit, apartment 1		
Caravan/mobile home/cabin/houseboat 2		
Improvised home, tent, no dwelling (sleeping rough) 3		
Institutional/dormitory accommodation 4		
Other non-private dwelling 5		

7 NUMBER OF BEDROOMS

Before Support | After Support

8 HOUSING TENURE

	Before Support	After Support
Owned or being purchased 1		
Rented from private landlord or real estate agent 2		
Rented from Housing Authority 3		
Rented from community housing 4		
Boarding with other family/individuals 5		
Being occupied rent free 6		
Other 8		

9 EXPECTED DURATION OF HOUSING

	Before Support	After Support
Crisis/temporary (under 3 months) 1		
Short term (3 – 6 months) 2		
Medium term (6 – 12 months) 3		
Long term (12 months or more) 4		

10 TIME SINCE LAST STABLE HOUSING

- Currently in stable housing 1
- Under one month 2
- 1 – 3 months 3
- 3 – 6 months 4
- 6 – 12 months 5
- 12 months or more 6

11 NUMBER OF MOVES WITHIN THE LAST 2 YEARS

If 0 write none

12 REASONS FOR MOVING IN THE LAST 2 YEARS

Tick all that apply

- Eviction 1
- Family violence 2
- Relationship breakdown 3
- Discrimination/non-family harassment 4
- Housing affordability issues 5
- Lifestyle factors/choices 6
- Health reasons 7
- Release from institution 8

1802.0410

An Australian Government initiative to prevent family homelessness

Adults involved in the case

Please enter details about all persons involved in the case who are **aged 16 and over**. The primary contact for the case should be listed as Person 1.
If you cannot identify a single primary contact, please enter the oldest person in the primary family unit as Person 1.
If there are more than 4 such persons within the family, please complete a *Supplementary Person Form* and attach it to this form.

	Person 1	Person 2	Person 3	Person 4
13 ALPHA CODE	2nd & 3rd letters of first name; 1st, 2nd & last letters of surname; M/F Male or Female	2nd & 3rd letters of first name; 1st, 2nd & last letters of surname; M/F Male or Female	2nd & 3rd letters of first name; 1st, 2nd & last letters of surname; M/F Male or Female	2nd & 3rd letters of first name; 1st, 2nd & last letters of surname; M/F Male or Female
14 MONTH AND YEAR OF BIRTH	Month; Year	Month; Year	Month; Year	Month; Year
15 SEX	Male 1; Female 2	Male 1; Female 2	Male 1; Female 2	Male 1; Female 2
16 RELATIONSHIP TO PERSON 1	No answer required for Person 1	Spouse/partner 1; Child/step child/foster child 2; Sibling 3; Parent 4; Other relative 5; Other unrelated person 6	Spouse/partner 1; Child/step child/foster child 2; Sibling 3; Parent 4; Other relative 5; Other unrelated person 6	Spouse/partner 1; Child/step child/foster child 2; Sibling 3; Parent 4; Other relative 5; Other unrelated person 6
17 DOES THE PERSON IDENTIFY AS AN ABORIGINAL OR TORRES STRAIT ISLANDER?	Yes 1; No 2	Yes 1; No 2	Yes 1; No 2	Yes 1; No 2
18 COUNTRY OF BIRTH	Australia 1; Other 8	Australia 1; Other 8	Australia 1; Other 8	Australia 1; Other 8
19 ENGLISH PROFICIENCY	Speaks only English at home 1; *Speaks another language and:* English very well 2; English well 3; English not well 4; English not at all 5	Speaks only English at home 1; *Speaks another language and:* English very well 2; English well 3; English not well 4; English not at all 5	Speaks only English at home 1; *Speaks another language and:* English very well 2; English well 3; English not well 4; English not at all 5	Speaks only English at home 1; *Speaks another language and:* English very well 2; English well 3; English not well 4; English not at all 5
20 COHABITING WITH PERSON 1	No answer required for Person 1	Before Support / After Support: Yes 1 / 1; No 2 / 2; N/A – person deceased 3; N/A – Person 1 deceased 4	Before Support / After Support: Yes 1 / 1; No 2 / 2; N/A – person deceased 3; N/A – Person 1 deceased 4	Before Support / After Support: Yes 1 / 1; No 2 / 2; N/A – person deceased 3; N/A – Person 1 deceased 4

	Person 1	Person 2	Person 3	Person 4
21 HIGHEST COMPLETED LEVEL OF EDUCATION	Before Support / After Support	Before Support / After Support	Before Support / After Support	Before Support / After Support
	Primary or less ☐ 5 ☐	Primary or less ☐ 5 ☐	Primary or less ☐ 5 ☐	Primary or less ☐ 5 ☐
	Year 7–9 ☐ 6 ☐	Year 7–9 ☐ 6 ☐	Year 7–9 ☐ 6 ☐	Year 7–9 ☐ 6 ☐
	Year 10 ☐ 7 ☐	Year 10 ☐ 7 ☐	Year 10 ☐ 7 ☐	Year 10 ☐ 7 ☐
	Year 11–12 ☐ 2 ☐	Year 11–12 ☐ 2 ☐	Year 11–12 ☐ 2 ☐	Year 11–12 ☐ 2 ☐
	Trade certificate/diploma ☐ 3 ☐	Trade certificate/diploma ☐ 3 ☐	Trade certificate/diploma ☐ 3 ☐	Trade certificate/diploma ☐ 3 ☐
	Undergraduate degree or higher ☐ 4 ☐	Undergraduate degree or higher ☐ 4 ☐	Undergraduate degree or higher ☐ 4 ☐	Undergraduate degree or higher ☐ 4 ☐
22 CURRENT EDUCATIONAL PARTICIPATION	Before Support / After Support	Before Support / After Support	Before Support / After Support	Before Support / After Support
	Studying full-time ☐ 1 ☐	Studying full-time ☐ 1 ☐	Studying full-time ☐ 1 ☐	Studying full-time ☐ 1 ☐
	Studying part-time ☐ 2 ☐	Studying part-time ☐ 2 ☐	Studying part-time ☐ 2 ☐	Studying part-time ☐ 2 ☐
	Not studying ☐ 3 ☐	Not studying ☐ 3 ☐	Not studying ☐ 3 ☐	Not studying ☐ 3 ☐
23 LABOUR FORCE STATUS	Before Support / After Support	Before Support / After Support	Before Support / After Support	Before Support / After Support
	Employed full-time ☐ 1 ☐	Employed full-time ☐ 1 ☐	Employed full-time ☐ 1 ☐	Employed full-time ☐ 1 ☐
	Employed part-time/casual ☐ 2 ☐	Employed part-time/casual ☐ 2 ☐	Employed part-time/casual ☐ 2 ☐	Employed part-time/casual ☐ 2 ☐
	Not employed – looking for work ☐ 3 ☐	Not employed – looking for work ☐ 3 ☐	Not employed – looking for work ☐ 3 ☐	Not employed – looking for work ☐ 3 ☐
	Not employed – Not looking for work ☐ 4 ☐	Not employed – Not looking for work ☐ 4 ☐	Not employed – Not looking for work ☐ 4 ☐	Not employed – Not looking for work ☐ 4 ☐
24 INCOME SOURCE *Tick all that apply*	Before Support / After Support	Before Support / After Support	Before Support / After Support	Before Support / After Support
	No income ☐ 1 ☐	No income ☐ 1 ☐	No income ☐ 1 ☐	No income ☐ 1 ☐
	Registered/awaiting benefit ☐ 2 ☐	Registered/awaiting benefit ☐ 2 ☐	Registered/awaiting benefit ☐ 2 ☐	Registered/awaiting benefit ☐ 2 ☐
	Newstart Allowance ☐ 3 ☐	Newstart Allowance ☐ 3 ☐	Newstart Allowance ☐ 3 ☐	Newstart Allowance ☐ 3 ☐
	Disability Support Pension ☐ 4 ☐	Disability Support Pension ☐ 4 ☐	Disability Support Pension ☐ 4 ☐	Disability Support Pension ☐ 4 ☐
	Parenting Payment ☐ 5 ☐	Parenting Payment ☐ 5 ☐	Parenting Payment ☐ 5 ☐	Parenting Payment ☐ 5 ☐
	Other Centrelink Payment ☐ 6 ☐	Other Centrelink Payment ☐ 6 ☐	Other Centrelink Payment ☐ 6 ☐	Other Centrelink Payment ☐ 6 ☐
	Maintenance/child support ☐ 7 ☐	Maintenance/child support ☐ 7 ☐	Maintenance/child support ☐ 7 ☐	Maintenance/child support ☐ 7 ☐
	Income from employment ☐ 8 ☐	Income from employment ☐ 8 ☐	Income from employment ☐ 8 ☐	Income from employment ☐ 8 ☐
	Other ☐ 9 ☐	Other ☐ 9 ☐	Other ☐ 9 ☐	Other ☐ 9 ☐
25 EXPERIENCED HOMELESSNESS IN THE LAST 2 YEARS?	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2
26 DURATION OF MOST RECENT PERIOD OF HOMELESSNESS - *if under 1 month record 00 00 If never been homeless, record 99 99*	☐☐ Months ☐☐ Years	☐☐ Months ☐☐ Years	☐☐ Months ☐☐ Years	☐☐ Months ☐☐ Years
27 PREVIOUSLY USED SAAP ASSISTANCE?	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2	Yes ☐ 1 No ☐ 2

Children involved in the case

Please enter details about all persons involved in the case who are **under 16 years.**
If more than 4 children within the family, please complete a *Supplementary Child Form* and attach it to this form.

	Child 1	Child 2	Child 3	Child 4
28 AGE OF CHILD *Write 00 if child aged under 1 year*				
29 SEX OF CHILD	Male 1 Female 2	Male 1 Female 2	Male 1 Female 2	Male 1 Female 2
30 COUNTRY OF BIRTH OF CHILD	Australia 1 Other 8	Australia 1 Other 8	Australia 1 Other 8	Australia 1 Other 8
31 DOES THE CHILD IDENTIFY AS AN ABORIGINAL OR TORRES STRAIT ISLANDER?	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2

32 PRIMARY RESIDENCE OF CHILD

	Child 1 Before Support	Child 1 After Support	Child 2 Before Support	Child 2 After Support	Child 3 Before Support	Child 3 After Support	Child 4 Before Support	Child 4 After Support
With primary family	1		1		1		1	
With other relatives	2		2		2		2	
In foster care	3		3		3		3	
Elsewhere	4		4		4		4	

33 CHILDCARE USED FOR THIS CHILD *Tick all that apply*

If no childcare used or needed, please leave question blank.

	Child 1 Before Support	Child 1 After Support	Child 2 Before Support	Child 2 After Support	Child 3 Before Support	Child 3 After Support	Child 4 Before Support	Child 4 After Support
Full time (day care)	1		1		1		1	
Part time/Before school/ After school	2		2		2		2	
Occasional care	3		3		3		3	
Formal childcare	4		4		4		4	
Informal childcare	5		5		5		5	
Childcare needed but not available	0		0		0		0	

34 DOES THE CHILD ATTEND SCHOOL ON A REGULAR BASIS?

	Child 1 Before Support	Child 1 After Support	Child 2 Before Support	Child 2 After Support	Child 3 Before Support	Child 3 After Support	Child 4 Before Support	Child 4 After Support
Yes	1		1		1		1	
No	2		2		2		2	
Not applicable — child under 5	3		3		3		3	

35 NUMBER OF SCHOOLS CHILD HAS ATTENDED IN THE PAST 2 YEARS *Write 00 if none*				
36 HAS THE CHILD BEEN THE SUBJECT OF PAST NOTIFICATION?	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2

37 HOUSING COSTS PER WEEK
Write 0 if none

Before Support	After Support
$ .00	$ .00

38 WEEKLY HOUSEHOLD INCOME FROM ALL SOURCES (AFTER TAX)
Write 0 if none

Before Support	After Support
$ .00	$ .00

39 CURRENT DEBT LEVEL
Write 0 if none

Before Support	After Support
$ .00	$ .00

40 DOES THE FAMILY HAVE SUFFICIENT FUNDS FOR BOND/EMERGENCIES?

Before Support	After Support
Yes ☐ 1	Yes ☐
No ☐ 2	No ☐

41 DID THE FAMILY EXPERIENCE HOMELESSNESS AT ANY TIME DURING THE SUPPORT PERIOD?

Before Support	After Support
Yes ☐ 1	Yes ☐ 1
No ☐ 2	No ☐ 2

42 HOW LONG DID THE PERIOD OF HOMELESSNESS LAST?
Leave blank if family did not experience homelessness

Weeks	Months

43 WAS ANY FAMILY MEMBER PREGNANT DURING THE SUPPORT PERIOD?
Yes ☐ 1
No ☐ 2

44 TOTAL BROKERAGE FUNDS USED FOR CASE
Write 0 if none
$ .00

45 NUMBER OF CASE CONTACTS

Phone calls (to and on behalf of family)	Home visits	Office visits

46 ISSUES THAT HAVE AFFECTED THE MANAGEMENT OF THE CASE
Tick all that apply—may relate to any family member

Legal issues
- AVO/Restraining/Intervention Order in place ☐ 1
- Current Family Court involvement ☐ 2
- Current other court involvement ☐ 3
- Current incarceration of family member ☐ 4
- Legal issues around immigration status ☐ 5

Child protection issues
- Children currently removed from family ☐ 6
- Children previously removed from family ☐ 7
- Current child protection issues with a case plan in place ☐ 8
- Suspected child protection issues—not acknowledged/confirmed ☐ 9
- No extended family to assist re child protection issues ☐ 10
- Parent(s) were removed from family as children ☐ 11

Family conflict, violence and abuse
- Family conflict ☐ 12
- History of family violence ☐ 13
- Currently experiencing family violence (in last month) ☐ 14
- Family violence suspected—not acknowledged/confirmed ☐ 15
- History of child sexual abuse ☐ 16
- Child currently experiencing sexual abuse (in last month) ☐ 17
- Child sexual abuse suspected—not acknowledged/confirmed ☐ 18

Illness and disability
- Diagnosed mental illness—managed well ☐ 19
- Diagnosed mental illness—not managed well ☐ 20
- Suspected mental illness—not acknowledged/confirmed ☐ 21
- Risk assessment indicates present suicide risk ☐ 22
- Chronic physical illness impairing everyday functioning ☐ 23
- Physical disability impairing everyday functioning ☐ 24
- Intellectual disability impairing everyday functioning ☐ 25
- Acquired Brain Injury impairing everyday functioning ☐ 26
- Limited access to health services ☐ 27

Addictive behaviour
- Alcohol abuse impairing everyday functioning ☐ 28
- Illicit drug abuse impairing everyday functioning ☐ 29
- Legal substance abuse (glue/petrol) impairing everyday functioning ☐ 30
- Suspected substance abuse—not acknowledged/confirmed ☐ 31
- Gambling addiction ☐ 32

Living situation
- Sought emergency financial assistance in past 6 months ☐ 33
- Settlement in Australia within previous 2 years ☐ 34
- Experienced torture/trauma prior to settlement ☐ 35
- No easy telephone access ☐ 36
- No reasonable transportation to attend work ☐ 37
- No reasonable transportation to access services ☐ 38
- Limited employment opportunities ☐ 39
- Limited training opportunities ☐ 40
- Debt impairing social/family functioning ☐ 41

Living skills
- Poor social skills ☐ 42
- Low literacy skills ☐ 43
- Lack of English language proficiency ☐ 44
- Few social support networks ☐ 45
- Poor budgeting skills ☐ 46

47 CASE PLAN GOALS
Tick one box in each row

	Met fully	Met partially	Not met	Not applicable
Living situation				
Secure tenure arrangement	☐	☐	☐	☐
Safe, appropriate housing	☐	☐	☐	☐
Obtain affordable housing	☐	☐	☐	☐
Financial situation				
Resolve immediate financial crisis	☐	☐	☐	☐
Pay arrears	☐	☐	☐	☐
Access full social security entitlements	☐	☐	☐	☐
Develop budget/debt reduction plan	☐	☐	☐	☐
Achieve stable employment	☐	☐	☐	☐
Addictive behaviours				
Address/treat gambling addiction	☐	☐	☐	☐
Address/treat drug/alcohol addiction	☐	☐	☐	☐
Health circumstances				
Diagnosis confirmed	☐	☐	☐	☐
Treatment/management of illness in place	☐	☐	☐	☐
Engagement with specialist service	☐	☐	☐	☐
Inoculations for children are up to date	☐	☐	☐	☐
Family relationships				
Resolve/manage family conflict	☐	☐	☐	☐
Resolve/manage family violence	☐	☐	☐	☐
Effect change in family structure	☐	☐	☐	☐
Build contact between children and parent	☐	☐	☐	☐
Access to respite childcare	☐	☐	☐	☐
Access to child support payments	☐	☐	☐	☐
Participation in parenting programs	☐	☐	☐	☐
Personal skills				
Environment in education/training	☐	☐	☐	☐
Improve financial management skills	☐	☐	☐	☐
Improve general living skills	☐	☐	☐	☐
Community participation				
Develop/enhance support networks	☐	☐	☐	☐
Engagement with community organisations	☐	☐	☐	☐

48 OTHER SERVICES WITH WHICH THE FAMILY WAS INVOLVED DURING THE SUPPORT PERIOD
Tick all that apply—may relate to any family member

- Early childhood services ☐ 1
- Youth services ☐ 2
- Child welfare services ☐ 3
- Centrelink ☐ 4
- JPET/Job Network/employment services ☐ 5
- Financial management services ☐ 6
- Housing/Tenancy advocacy services ☐ 7
- Legal services ☐ 8
- Mental health services ☐ 9
- Other health services ☐ 10
- Mediation/Counselling services ☐ 11
- Community/family support services ☐ 12
- Family violence services ☐ 13
- General welfare services ☐ 14
- Other ☐ 88

49 SERVICE ACTIVITIES PROVIDED
Tick all that apply

Information, advice and referral
- Information, advice and referral ☐ 1

Individual and family support
- Individual advocacy ☐ 2
- Counselling ☐ 3
- Needs assessment and management of case/service plans ☐ 4
- Development of family/household management skills ☐ 5
- Mutual support and self-help ☐ 6

Independent and community living support
- Social and personal development ☐ 7
- Recreational/leisure activities ☐ 8
- Independent and community living skills development ☐ 9
- Drop in social support ☐ 10

Domiciliary support
- Social support, escorting, visiting and personal transport ☐ 11

Employment, job placement and support
- Job search skills development ☐ 12

Financial and material assistance
- Financial relief ☐ 13
- Emergency financial assistance for accommodation ☐ 14
- Material assistance ☐ 15

Residential care and accommodation support
- Accommodation placement and support ☐ 16

Policy, community and service development and support
- Community development and support ☐ 17
- Cultural group development ☐ 18
- Other ☐ 88

50 REASON FOR ENDING SUPPORT/CASE CLOSURE
- Issues resolved—mutual agreement ☐ 1
- Client requested closure (support no longer required) ☐ 2
- Client requested closure (unable to attend) ☐ 3
- Client terminated support ☐ 4
- Service terminated support (client difficulties) ☐ 5
- Service terminated support (unable to assist further) ☐ 6
- Service terminated support (other reason) ☐ 7
- Exceeded 30 days of no contact ☐ 8
- Client referred to other organisation ☐ 9
- Other ☐ 88

51 ASSESSMENT OF THE OVERALL CHANGE IN THE FAMILY'S SITUATION AT THE END OF THE SUPPORT PERIOD
- Improved substantially ☐ 1
- Improved somewhat ☐ 2
- Remained the same ☐ 3
- Worsened somewhat ☐ 4
- Worsened substantially ☐ 5

Appendix 3
Sensitivity Analysis

[Note that the following figures are all based on the lower end estimate of 7,188 homeless families]

Table A4 below shows the impact on health costs of changing key variables associate with chronic and long-term homelessness in children employing the methodology by Pinkney and Ewing (1997). The figures assume maintaining the assumptions that 10% of children were expected to enter chronic homelessness and 40% long-term homelessness. The number of years affected by long-term homelessness is not assumed to change neither is the discount rate. The factors held constant are believed to be conservative and thus little justification for change. The significant items in the calculation relate to the number of years impacted by chronic homelessness, thus this was varied from 15 to 30 to 45 years, and the increase in health care costs as a result of experiencing either long-term or chronic homelessness. As can be see from the table even taking the smallest increase in health care costs and a 15 year impact in the deterioration of health for chronic homeless there is still $11,942,944 of cost offset in health costs. Using Pinkney and Ewings (1997) assumptions of 45 year of impact on chronic homeless and a 50 per cent increase in health costs the figure is $98,060,207. It should be reiterated this is only the impact on health deterioration of children in homeless families and does not include the impact of deterioration in health of adults.

Table A4: Sensitivity of child health offsets resulting from changing key variables

	Number of Years of Chronic Homelessness		
Percentage Increase in Health Care Costs %	**45 $**	**30 $**	**15 $**
50	98,060,207	83,069,600	59,714,722
40	78,448,166	66,455,680	47,771,777
30	58,836,124	49,841,760	35,828,833
20	39,224,083	33,227,840	23,885,889
10	19,612,041	16,613,920	11,942,944

The major variable affecting criminal justice cost offsets is the increased risk factor of involvement in crime and the criminal justice system. A four times increase in involvement of both chronic and long-term homeless children yields a $42,812,348 cost offset, while a three times increase $33,647,293 and a two times increase $24,482,238.

Table A5 below shows the sensitivity of adult health care offsets as a result to changes in health care costs and number of years impacted from chronic homelessness. As can be seen even a best case scenario of a 10 per cent increase in health care cost for both long-term homeless adults and a ten year impact on those experiencing chronic homelessness leads has a total cost offset of $5,919,378.

Table A5: Sensitivity on adult health care offsets resulting from changing key variables

	Number of Years of Chronic Homelessness		
Percentage Increase in Health Care Costs %	**30 $**	**20 $**	**10 $**
50	49,841,760	41,204,562	29,596,890
40	39,873,408	32,963,649	23,677,512
30	29,905,056	24,722,737	17,758,134
20	19,936,704	16,481,825	11,838,756
10	9,968,352	8,240,912	5,919,378

The cost of educational disadvantage resulting from not completing school year 12 was analysed for its sensitivity to changing the school 'drop out' rate. As can be seen from Table A6, even a small dropout rate of 20 per cent still has a significant long term cost of $166,288,492 for the estimated 14,375 children in homeless families.

Table A6: Sensitivity of cost – educational disadvantage to varying year 12 'drop out' rate

Percentage Expected to 'Drop Out' and Not Complete Year 12 %	Total Cost of Forgone Education $
60	498,865,476
50	415,721,230
40	332,576,984
30	249,432,738
20	166,288,492

Finally, with respect to adults and estimated lost earnings from homelessness Table A7 below shows the sensitivity of lost earnings to labour force participation. Considering the estimated cost of chronic and long term homelessness in term of lost wages of workers and assuming that those chronic and long-term homeless will be out of the labour force for 5 and 1 years respectively even a very conservative low participation rate of 20 per cent still indicates lost earnings of $80,877,236.

Table A7: Sensitivity of Adult Lost Earnings to Labour force Participation

Labour Force Participation of Homeless Adults %	Total Earnings Lost from Homelessness $
80	323,508,944
70	283,070,326
60	242,631,708
50	202,193,090
40	161,754,472
30	121,315,854
20	80,877,236

In summary Table A8 below shows that employing the best case scenario for children and adults in families in terms of health and justice cost offsets and lost productivity resulting from educational disadvantage and lost productivity is a $202,713,675 + $86,796,614 = $289,510,289.

It should be reiterated that this is based on the absolute minimum estimated number of families and the most reasonable estimates give a total of cost offsets and benefits of $648,903,085 + $373,350,704 = $1,022,253,789.

Table A8: Potential cost offsets and benefits of HOME Advice Program

	Lowest Estimates $	Expected Estimates $
Health related cost offsets – children	11,942,944	98,060,207
Crime and criminal justice related cost offset – children	24,482,238	51,977,402
Total cost offsets	36,425,183	150,037,609
Production loss due to premature school leaving	166,288,492	498,865,476
Total cost offsets and benefits – children	202,713,675	648,903,085
Health related cost offset – adults	5,919,378	49,841,760
Total earnings lost from homelessness – adults	80,877,236	323,508,944
Total cost offsets and benefits – adults	86,796,614	373,350,704

Appendix 4
Contingent Valuation Method

Estimating the societal benefits of family homelessness prevention

While certain benefits accrue directly to clients, there are other benefits for society at large. The assignment of dollar values to many of these benefits such as, improved community amenity reduced risk of disease transmission and improved quality of life from reduction in alcoholism and drug abuse is difficult. Non-market benefits or goods are valuable, but difficult to quantify as Cohen et al., (2004 p.91) states "conceptually, when deciding whether to fund a program we want to know how much the public expects to benefit – hence how much they would be willing to pay."

A method known as Contingent Valuation (CV) can be used to assign dollar values to these non-market goods. This method has been used in the environmental economics literature over the last several years, in studies such as health care (Olsen and Smith 2001, Smith 2000), drug abuse treatment programs (Zarkin 2001), crime control (Cohen, et al. 2004), foreign aid programs (Weaver, et al. 1996), environmental protection programs (Witzke and Urfei 2001) and homelessness prevention (Jones, et al., 2003).

In order to measure the willingness to pay for a homelessness prevention program for Australian families, we conducted a survey in two high profile locations in the Melbourne CBD. Respondents were asked one of two alternative questions:

Question 1

"A recent pilot program has proved very successful in keeping families at risk of becoming homeless in their homes. Hypothetically, what would you personally be prepared to pay to keep this project going and keep these families housed assuming the project were to receive no more public funding?"

Question 2

A family is about to lose their home. Hypothetically, what would you personally be prepared to pay to keep this family housed?

Respondents were asked to identify how much they would be prepared to pay per week and were given five options from $0 to in excess of $2.00. They were also asked their gender, age employment status, industry and level or position.

Only Australian residents participated in the survey. Respondents were not offered any inducement to participate and were informed that their participation was purely voluntary and no means of identification would be recorded. The only additional information offered to respondents, if they asked, was that the money would be spent on services to support families including financial counselling and support and that the hypothetical financial support is long-term i.e. over several years.

The mean response was 3.330. As can be see from Table A9 all values were represented with the greatest number of responses in the ‹$2.00 range (34 responses or 30% of total).

Table A9: Results of Willingness-to-pay homeless assistance survey

Amount ($) per Week	Responses		Age Distribution of Respondents %				Survey Question No.		Gender	
	(No)	(%)	Under 25	25–30	31–40	Over 40	1	2	Male	Female
$0.00	27	24	5	8	3	11	17	10	17	10
$0.50	3	3	1	0	0	2	2	1	2	1
$1.00	22	20	5	5	3	9	9	13	11	11
$2.00	26	23	7	7	8	4	11	15	11	15
‹$2.00	34	30	4	5	11	13	13	21	16	18
Total	**112**	**100**	**22**	**25**	**25**	**39**	**52**	**60**	**57**	**55**

Of the 112 surveys collected 57 (46%) were responding to question 1 and 60 (54%) to question 2. Respondents represented a reasonable cross section of Australian society with a spread of respondents across all categories of employment status and position as can be seen in Table A10.

Table A10: Employment Characteristics of Survey Respondents

Employment Status	**Number/Per cent**
Full time	40 (36%)
Part time	29 (26%)
Casual	14 (13%)
Unemployed^	27 (24%)
Employment Position	
Owner/operator	13 (12%)
Senior management	8 (7%)
Middle management	15 (13%)
Employee	46 (41%)
Unskilled employment	2 (2%)
No position [unemployed/retired]*	28 (25%)

^ includes retirees

*difference in unemployed figure in the two above categories is a data collection anomaly (information not supplied or not recorded).

The exploratory survey produces an indicative result given the small sample size and single location. However, it is a useful indicative result in the context of the cost-effectiveness arguments and information in this evaluation study. Extrapolating the mean response over the approximately 10 million salary and wage earners in Australia yields a weekly figure of $10 million per week or some $520 million per year. This is a very large number, but implicit in this finding is the public's willingness to pay a significant amount to ameliorate family homelessness.

Appendix 5
HOME Advice Evaluation Follow-up Survey Guidelines

Purpose

The purpose of the follow-up questionnaire is to establish the housing outcomes of families assisted by the program six to twelve months after leaving the program. If client families at risk of homelessness on entry to the program are stabilised in their housing at exit and have not experienced homelessness in the period after the program, this strengthens the claims about the program's effectiveness in preventing family homelessness.

The follow-up questionnaire is a basic measure of homelessness status post-support and does not attempt to examine or to measure the details of each family's situation. The complexities of client issues and circumstances (that have initially placed them at-risk of becoming homeless as well as the positive and negative factors that have impacted on their situation after leaving the program) will be critically examined through detailed qualitative case studies at a later date.

Identification of Clients

The evaluation team may at times have access to confidential information about individuals and families, but generally we do not need to know names, addresses or other identifying information. At the top of the follow-up survey form is the agency ID and the case number. Combined, they are a unique identifier that allows follow-up information to be cross referenced with other client information for analytical purposes.

Doing the Survey

During the trial, Family Focus employed a separate worker to do the survey and her reflection on the process provides some insight.

> A barrier I faced was that I did not know anything about the clients. It was certainly easier for me to engage with clients having some knowledge of their individual situation, however the process of reading each file…seemed to be the most time consuming.

Family Focus workers also contacted some families directly and later commented that it had been a positive and rewarding experience to follow-up these families personally and learn about their experience since leaving the program. Therefore, it would be **best that the survey is done by HOME Program workers and/or HOME Centrelink social workers** telephoning families they have worked with to find out 'how they are going'. Case workers will be known and trusted by the family. This work could be done over a 3–4 week period with each worker contacting between 3–-5 families per week as a part of routine practice. However, alternatively, another worker (for example a university placement student or an intake worker) could do the interviews over about the same period of time.

Draw up a list of client families from 2005 in order that they presented. Begin interviewing the families who came to the service in the earlier part of the year first and then work down the list. This will provide follow-up data from 6 –18 months. A family who left the program close to the end of the year will be interviewed just over 6 months after the program, while for a family that left the program at the beginning of 2005 it will be closer to 18 months. The survey pro-forma contains some **items that should be filled in prior to doing the telephone interview:**

- At the top of page 1 is the Agency ID and Client Number. It is important that these are correct so that information can be cross-referenced for analytical purposes.
- Also, in this box is 'date left program' and 'interview date'. The length of time since leaving the program is the difference between these two dates to the nearest week.
- The time the survey is done (top right side) may not seem important but this will tell us the best times for conducting these kinds of follow-up interviews.

- At the bottom of the second page there is a box containing items for 'time on program', an estimated number of contacts with the family during the program, the number of telephone calls made and the estimated number of case work hours dedicated to their case. If there were 10 telephone calls of half hour on average and six meetings of two hours duration than the total time for the case would be 17 hours (hypothetical calculation). Some sites already keep this information as part of their normal data collection processes. For other sites that do not keep this information at hand, a review of case files may be needed to obtain good information (in some cases it will be necessary to estimate from case notes). The information is important because it allows the research team to analyse outcomes in terms of cost effectiveness and efficiency.

Cases that are not contactable by phone

After working through the client list for 2005, there will be some cases that have not been successfully contacted. There can be all kinds of reasons for this. Someone may arrive home at 7pm every night but calls have been made at 5–6pm. Sometimes, people are out off earshot. It is also possible that the family is running into debt and not answering the phone. A woman might have had calls from an ex-partner and taken to not picking up. Lack of successful contact can be simply a matter of unlucky coincidence. However, for our purposes, **it is important to have as near to a 100 per cent follow-up rate as possible**.

If 70–80 per cent of contacted families have remained in stable housing (not become homeless at any point) and their situation has remained the same or improved, then that is a highly positive outcome for a social program of this type. However, if only 80 per cent of all families in 2005 could be contacted that means that for 20 per cent of families we have no information. Maybe those families could not be contacted because they have become homeless and transient. If that were the case, the success rate reduces to 56–64 per cent. While it may be unlikely that all the non-contacted families have become homeless, the claims that can be made on the basis of incomplete data are weakened.

Following up families not contactable by telephone requires some outreach fieldwork. A worker doing follow-up will need to visit the house at an appropriate time. If no-one is there when the home is visited ask a neighbour. If you know that they are still living there and basically OK then you know the answer to the key question on the survey even though you do not have answers to all items.

Another way to find out about a former client family, not contactable by telephone, is to make contact with next of kin or a close friend named as emergency contact, if that information has been collected at point of entry. SAAP services normally collect this information as do schools and health services. If sites do not usually collect this contact information it would be worth considering building of this into the intake forms for the future.

Monitoring progress

With any exercise like this it will help if the team monitor how the follow-up is going so that changes in practice or additional effort can be exerted if necessary.

Follow-up interviewing

An **informal approach** should be used. The Family Focus team experience clearly indicated that clients respond positively to a 'conversational' approach rather than just being read the questions verbatim. During the trial an offer of a small incentive for participation (such as a voucher, a movie ticket etc.) was received well by clients. Informing clients about **the purpose of the questionnaire** is necessary (i.e. informed consent). This might be something like the script below:

> Hi – this is John Smith from Family Focus in Dandenong. We are doing a follow-up survey of all families who were involved with the Family Focus program in 2005 as part of the national evaluation of this program. But also we want to know how families have been going since leaving the program. Have you got a few minutes to talk now? I should tell you that no information about you will be identifying – your name won't be used. Are you OK about that? Also, the agency is giving out movie vouchers as a small token of our appreciation for your time.
>
> Thank you so much for that. Keep in touch!

Interviewers may need to use 'probe' questions about why a client's housing situation changed in a particular way. For example, a client may say they stayed with a friend or family member once since leaving the program. Was this because they were evicted from their previous housing, experienced domestic violence or was it an interim measure while they waited for their public housing to come through? The critical point to establish is whether they have been in a situation of homelessness at any time since they have left the program. Another example is if a client answers that their situation since leaving the program has stayed much the same, but looks likely to improve in the future. Is this because they have recently overcome a particular issue in their lives (such as unemployment) or because they are receiving support from another agency which will improve their housing/living situation? The 'Interviewers Notes' at the end of the questionnaire provides a space for writing in some of this extra information that may be gleaned during the telephone conversation.

Obviously, the best time to phone people is when they are likely to be home. This is most likely to be early evening. Experience from the Dandenong pilot suggests that the contact rate improves after 5 pm.

Return of follow-up data

Fill in the cover sheet and attach a form for every client, including forms for families that could not be contacted by any method. These 'non-contacted' cases will have information in the boxes and perhaps a comment about the efforts made in the interviewers comments section.

Contact with the Research team

Kathy Desmond will be visiting sites shortly to assist with this and the other planned data collections. If issues or problems arise please contact Kathy or David or raise the issue through the project website.

Appendix 6
HOME Advice Evaluation Follow-up Survey

Agency identifier: [ ] Client Case Number: [ ]

Interview date:____/_____/2006 Time:_____ am/pm Date left program:_____/____/____

Length of time since exit: _____years _____months _____weeks [please write in value(s)]

1. Since leaving the program have you ever stayed in any of the following situations?

Tick any of the below if indicated:

- ☐ Emergency/crisis accommodation service (i.e. a refuge, other crisis accommodation etc.)
- ☐ Medium/long-term accommodation service (i.e. THM or any other long-term accommodation)
- ☐ A boarding house or caravan park with no other usual address
- ☐ Stayed temporarily with a friend or relative with no other usual address
- ☐ A period with no accommodation (i.e. sleeping out in a car or tent or other improvised dwelling)

2. Where are you living now? [please tick one only]

- ☐ Private rental
- ☐ Public housing rental
- ☐ Boarding house or Caravan Park
- ☐ Temporarily with a friend or relative
- ☐ Medium/ long-term supported accommodation
- ☐ Emergency/crisis accommodation
- ☐ No conventional accommodation

3. How many times have you changed your accommodation since leaving the program? [please tick one only]

- ☐ No change
- ☐ Once only
- ☐ Twice only
- ☐ Three times
- ☐ More than three times (please specify number) _____

4. Since leaving the program, what best describes your employment experience?

- ☐ Gained on-going full-time work
- ☐ Gained permanent part-time/casual work
- ☐ Done a period of full-time work
- ☐ Done some part-time/casual work
- ☐ Remained unemployed but continue to look for work
- ☐ Not been in the labour force [i.e. not seeking work due to family, health or other reasons]

5. **Overall, since leaving the program have your circumstances: [please tick one only]**
   - ☐ Improved a lot?
   - ☐ Improved a little?
   - ☐ Stayed the same?
   - ☐ Got a little worse?
   - ☐ Got a lot worse?

6. **Looking to the future, do you see your prospects as:** [please tick one only]
   - ☐ Likely to continue improving?
   - ☐ Remaining much the same as now?
   - ☐ Likely to become worse?

Interviewers notes:

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N.B. agency to complete:

Duration on program_____No. contacts_____No. telephone calls_____

Estimated number case hours_____

Appendix 7
HOME Advice Evaluation Follow-up Survey Summary Sheet

Agency: Page 1 of _

The combination Agency ID with Client ID allows linkage between other data on families with the follow-up information for analytical purposes only (i.e. confidentiality preserved). 'Date IN' is the date a family entered the program and the list should be earliest date first and then in order. 'Contact' is a Y–yes or N–No to indicate whether the family was contacted and 'Comment' allows a brief note particularly for cases that could not be contacted.

	Agency ID	Client ID	Date IN	Contact Y/N	Comment
1.					
2.					
3.					
4.					
5.					
6					
7.					
8.					
9.					
10.					
11.					
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Use additional sheets for more than 24 client families

Appendix 8
Regression Analysis

Technical Information and Data

There are two main outcome variables that measure the core objective of the HOME Advice Program. The first outcome or dependent variable is the extent to which client families succeed in meeting their case goals is a mediating outcome measure in the sense that case management and the support work done with families is the means for achieving the program outcome of housing stability and homelessness prevention. The second dependent variable is the 'maintenance of housing stability', which was discussed and analysed earlier in the report.

There are many factors that potentially contribute to program outcomes. Different factors may contribute to different degrees. Multiple regression analyses were used to investigate which variables out of the set of possible factors contributed the most, either positively or negatively to firstly 'successful case goal completion' and then secondly the 'maintenance of housing stability'. Regression analysis is a statistical technique for examining the linear relations between independent variables (ie. factors) and the dependent or outcome variables. As useful as regression analysis often is to reduce complexity through determination the significance of the linear relations tested, its results need to be examined in the context of everything else known about a program.

Some factors are characteristics of doing the case work undertaken by the HOME Advice workers ie. practice – what was done to achieve outcomes for the family – such as the 'duration of support' period or the 'intensity of support', and brokerage funds expended. The other variables are about the characteristics of client families – what issues they bring, whether they had been homeless before or whether they are Indigenous or not.

Regression A – Successful case goal completion

The completion of case goals was constructed as a composite variable. Altogether there were 26 case plan goals that could be 'fully met', 'partially met', 'not met' if the goal was applicable. A standardised measure scored all goals fully met as 3 to zero if no goals were met. Case complexity was not analysed as an aggregate variable as the FHPP evaluation. The complexity of issues was disaggregated for the seven issue categories – 'legal issues', 'child protection issues', 'family conflict, violence and abuse', 'illness and disability', 'addictive behaviour', 'living situation' and 'living skills'. As variables any indication of an issue(s) under the category was scored as a YES or NO where there was no issue. It was recognised that different sets of issues in family's lives might affect the outcome for a family in different ways and to different extents. Weighting the issues differently would be a consideration although it was not done in this analysis.

There are several options for dealing with each variable in a step-wise regression analysis. In the first analysis a backward linear regression proved to be the more sensitive. The following independent variables were used:

- Duration of support in weeks – the time in weeks between when the family entered the program [Support START date] and support ended [Support END date]
- Positive case ending – this was defined as issues resolved – mutual agreement and other options where in all likelihood the case was closed positively and appropriately.
- Intensity of support – a construct of the time spent actually working with the family based on Q45.
- Number of agencies involved – the number of agencies involved in the case
- Mental health issues – three items from illness and disability [Q46].
- Illness and disability issues [excluding mental health] – any of six items [Q46]
- Addiction issues – any of five items [Q46]

- Legal issues – any of five items [Q46]
- Brokerage [$100] – 'total brokerage used for the case [Q44]
- Previous homelessness in past 2 years – where the family had been homeless in that time period.
- Family conflict issues – any of seven items [Q46]
- Living situation issues – any of nine items[Q46]
- Child protection issues – any of five items [Q46]
- Life skills issues – any of five items [Q46]
- Negative case ending – this was defined as cases client terminate support or where the agency terminated support due to difficulties and other options which are likely to a negative case close rather than a positive case closure.
- ATSI status – where at least one person in the household identifies as Aboriginal or Torres Strait Islander.

Table A11: Factors affecting the successful achievement of case goals

	Un-standardised Coefficients		Standardised Coefficients	T	Sig.
	B	Std. Error	Beta	B	Std. Error
(Constant)	1.995	.112		17.737	.000
Duration of support in weeks	.001	.002	.039	.565	.573
Intensity of Support with weightings of (1,2,4) for (phone, office, home)	.000	.000	.141	1.982	.048
Child protection issues	-.107	.090	-.066	-1.193	.234
Addiction issues	-.207	.079	-.145	-2.630	.009
Family conflict issues	-.090	.070	-.071	-1.291	.198
Other illness and disability issues	.005	.068	.004	.078	.938
Legal issues	-.033	.078	-.024	-.430	.668
Living situation issues	-.246	.089	-.140	-2.746	.006
Life skill issues	-.204	.073	-.145	-2.769	.006
Mental health issues	-.121	.071	-.092	-1.693	.091
Brokerage ($100)	.013	.010	.083	1.375	.170
Number of agencies	.023	.017	.088	1.354	.177
Positive case closure	-.266	.092	-.162	-2.907	.004
Negative case closure	.238	.073	.189	3.267	.001
Previous Homelessness in past 2 years	-.013	.075	-.009	-.176	.860
At least one person identifies as ATSIC	.159	.073	.115	2.185	.030

The factors that are related significantly with the successful achievement of case goals are 'intensity of support' but not 'duration of support'; whether the closure of the case was positive rather than negative and whether the family was Indigenous.

Addiction issues, living situation, life skills and mental health issues as well as negative case closure all have a significant negative relationship with the successful completion of case goals. This group highlights factors, which make it less likely that case goals will be completed successfully.

The main practice variable that contributes to successful case goal achievement is 'intensity of support' or the actual amount of time and work done during phone contact, case meetings at the agency as well as home visits. These results explain 24.9 per cent of the variance of 'successful completion of case goals'.

Regression B – Positive housing stability outcome

This second regression investigates the factors that contribute to successfully achieving the core program outcome – housing stability and the avoidance of homelessness. The outcome or dependent variable was derived from housing stability – by aggregating categories for a positive outcome compared to a negative outcome – to give a dichotomous Yes/No variable. However, for this analysis, the small representation of the worse outcome is problematic in terms of statistical modelling. This issue can be handled by either under-sampling the most common in this instance positive outcome cases or over-sampling the rare or worst outcome cases.

The decision in this case was to use five-fold over-sampling of the negative outcome cases [115 or 20.6% of cases in the analysis] compared with cases with a successful outcome [443 cases or 79.4% of cases in the analysis].

Table A12: Factors affecting housing stability outcome

Factor in model	B	SE	Wald	DF	Sig
Constant	4.562	.909	25.184	1	.000
Addiction issue(1)	1.701	.677	6.307	1	.012
ATSIC Person(1)	-1.060	.417	6.463	1	.011
Negative Case closure(1)	1.234	.567	4.747	1	.029
Brokerage($100)	.171	.081	4.414	1	.036
Child protection issue(1)	-2.632	.695	14.342	1	.000
Complexity	.574	.391	2.151	1	.142
Family conflict issue(1)	-1.076	.581	3.426	1	.064
Other Illness and disability(1)	.873	.645	1.831	1	.176
Intensity	.002	.003	.911	1	.340
Legal issue(1)	1.000	.664	2.268	1	.132
Living Situation issue(1)	-2.270	.817	7.721	1	.005
Life Skills issue(1)	-2.107	.653	10.406	1	.001
Previous Homeless in last 2 years(1)	-1.514	.404	14.066	1	.000
Number agencies	-.274	.095	8.244	1	.004
Duration of Support	.007	.015	.218	1	.641
Positive Case Closure	.609	.443	1.885	1	.170

Variable(s) entered on step 1: addiction, ATSIC Person, Negative case closure, bokerage100, child protection, complexity, family conflict, illness, Intensity of support, legal, LS, LSK, New Homeless, services, Duration of support, Positive case closure.

The two variables which dominate the housing stability outcome are 'child protection issues' and 'brokerage'. When 'child protection issues are involved the odds of a positive outcome are reduced by a factor of 0.292 when brokerage is controlled. Conversely, when child protection issues are controlled the odds of a positive housing outcome are increased by 23.6% for the expenditure of each additional $100 of brokerage expended.

Cases with 'legal issues', 'addiction issues', 'other illness and disability issues' are all positively related to housing stability outcomes, while 'child protection issues', whether the family is Indigenous or has been homeless previously, and living situation, life skills issues as well as the number of agencies involved all have negative relationships with the outcome.

The main practice variable that seems to make a difference (at least in terms of the model and the available variables entered into the model) is the amount of brokerage expended. Some issues make it more likely successful outcomes will be achieved but then there are other issues that make a successful outcome less likely. This differentiation between case issues needs to be understood in the context of an achieved high level of program outcomes for the HOME Advice program.