

Evaluation of the Homeless Youth Assistance Program

The NSW Homeless Youth Assistance Program (HYAP) provides integrated support and accommodation services to children aged 12-15 who are homeless or at risk of homelessness.

HYAP was developed to fill a gap in the service system. The program aims to reconnect children with their families and broader support networks or support them to transition to longer-term supported accommodation. Services are provided state-wide by 17 providers in 19 locations.

HYAP was recently evaluated to understand if the program was effective in transitioning this group of children out of homelessness.

In response to the HYAP evaluation findings and the NSW Ombudsman's 2018 'More than Shelter' report, the program is being redesigned to better meet the needs of the target group. Services will transition to a new model over the next three years.

This Evidence to Action Note outlines key evaluation findings and actions being taken to improve the homelessness service response for this vulnerable cohort. A snapshot of key data reported in the evaluation is also provided.

The full report and summary evidence to action note are available on the DCJ website.



What did the evaluation find?



The current HYAP service model is not entirely fit for purpose and should be reconfigured to better meet the needs of the target group.



Children with complex needs are not consistently obtaining an appropriate service response through the program.



HYAP had little impact for the large group of highly vulnerable children accessing HYAP services who had a child protection history (56% of children in HYAP), and who may require a more intensive response. This group had more difficulties reconnecting with family and friends and were more likely to return to HYAP.



The program is of some benefit to vulnerable children in the early stages of risk. Children with no prior contact with the child protection system when entering the program (44% of children in HYAP) were more likely to reconnect with family and friends, less likely to return to HYAP and more likely to say they had achieved their case management outcome goals.



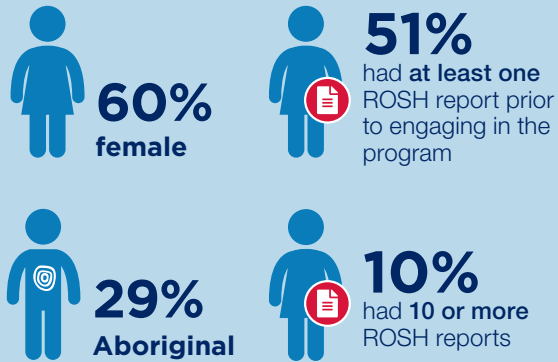
HYAP models appear to be guided by the services that are available locally rather than the most appropriate services required to work with a population with complex needs.



Better integration between the homelessness and children protection service systems is needed to deliver improved outcomes for these children.

Key statistics and evidence from the HYAP evaluation

Who are HYAP clients?



Many clients had complex needs and extensive patterns of contact with the child protection system before and after accessing HYAP services and support.



Most common reasons for children presenting at HYAP:

- Relationship/family breakdown**
- Domestic and family violence**
- Financial difficulties**

What services do they receive?

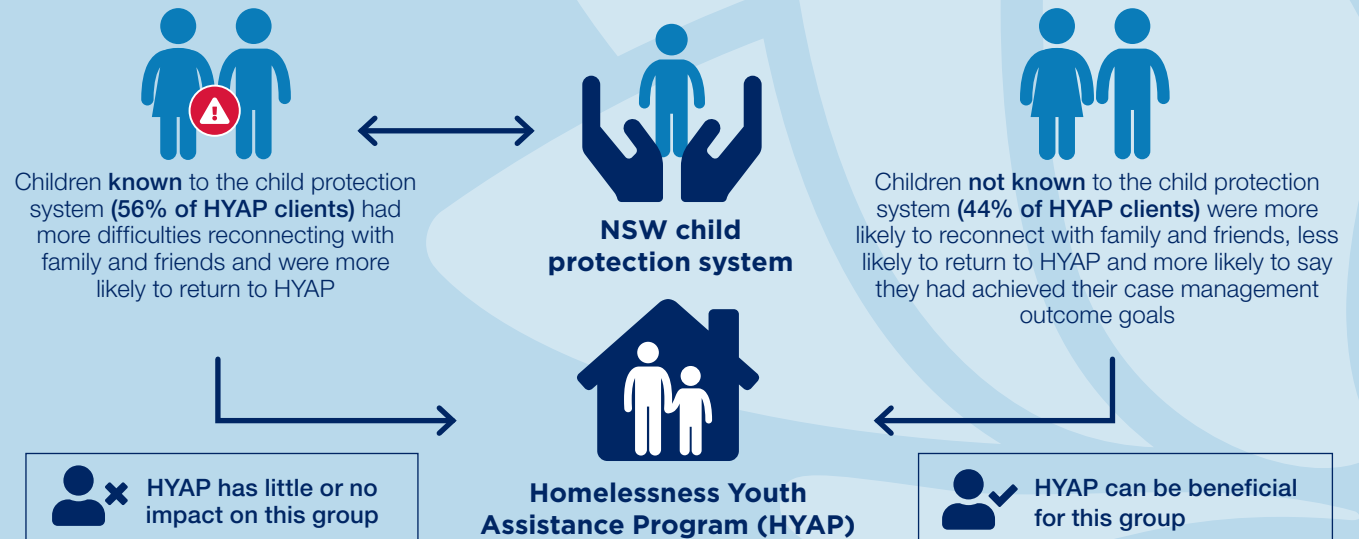
There is large variation in the services provided to children across locations and service providers:



The evaluation found the types and duration of services provided were guided by the individual service provider and the services available locally rather than the services that may have best met the needs of the children accessing HYAP.

What client outcomes were achieved through the program?

The evaluation found the program may be of some benefit for vulnerable children not known to child protection services who are in the early stages of risk. However, it had little or no impact for the large group of highly vulnerable children accessing HYAP services who had a child protection history.



What did the evaluation find about specific client outcomes?

Housing instability

At the start of HYAP:

- 23% were in short-term accommodation
- 10% were sleeping rough.

During HYAP:

- 4 in 5 (82%) children with an identified need to maintain accommodation were provided housing assistance (79%) or were referred elsewhere (3%).
- Half (51%) of the children with a short-term or emergency accommodation need were provided accommodation and 21% were referred.

After HYAP, some vulnerable children continued to experience housing instability:

- Unmet need remained – 1 in 10 (12%) children with identified longer and medium term housing needs were not provided with this assistance.
- Almost a third (30%) of young people went on to access Specialist Homelessness Services after they turned 16.



Child safety concerns

Prior to entering the program more than half of all children had a previous ROSH report, and many had extensive involvement with the child protection system. For many children, this continued despite participation in the program.

After commencing HYAP:

- 2 in 5 (38%) children had at least one ROSH report
- 14% had a face-to-face assessment.

The overriding predictor of the frequency or timing of future ROSH reports or face-to-face assessments was prior history of ROSH and non-ROSH reports – not the services provided or who provided them.



Reconnection with family and friends

At the start of HYAP:

- 2 in 5 (39%) children had family relationship issues as their main identifying reason for service.

During HYAP:

- More than half had an identified need for family/relationship assistance.
- 4 in 5 (83%) children with an identified family and relationship service need were either provided (64%) or referred (19%) to a service for that need. Providers often made the decision to provide that service in-house.

After HYAP, many children continued to experience family tensions:

- Children had a large number of ROSH reports after HYAP began, indicating continued tension in families.
- The provision or referral of counselling and relationship services did not influence the frequency or timing of subsequent ROSH reports or face-to-face assessments – the overriding predictor was prior history of ROSH and non-ROSH reports.
- A third (33%) of young people over 16 years who subsequently presented to SHS after HYAP did so for family breakdown reasons.





How much did the program cost?


The evaluation found there was a high variation in cost estimates due to the variation in HYAP service models used. Estimates of the cost per entry range from \$1,215 to \$34,169. The report recommends that any further cost analysis should take into account the specific services provided by each HYAP service provider.



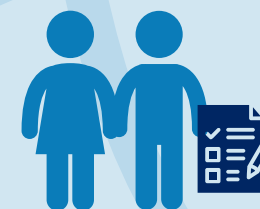
What factors impacted the successful implementation of the program?

Focus groups with service providers and DCJ staff highlight a range of issues at the program and system level that impacted the delivery of HYAP.

	Program level	System level
 <p>Barriers</p> <p><i>What hindered delivery?</i></p>	<ul style="list-style-type: none"> • State-wide inconsistencies related to the process used to design the service model • A poor fit between the population and the model • Limits in the length of time accommodation can, or should, be provided • Consent and legal barriers • Absence of transitional support • Funding issues 	<ul style="list-style-type: none"> • Referral pathways channel complex or inappropriate clients to HYAP services • Clients are presenting with child protection concerns, which is not the focus of HYAP • Few, if any, early intervention services have been available for this cohort • Few services are available to meet the current needs of the cohort • Children in this cohort are ineligible for many potentially beneficial services • There are insufficient safe accommodation options • There are few appropriate 'post-HYAP' options
 <p>Facilitators</p> <p><i>What helped delivery?</i></p>	<ul style="list-style-type: none"> • Fit between the client and service • Flexible approach to service delivery • Setting achievable goals for clients • Supportive organisational setting 	<ul style="list-style-type: none"> • Having an operational district protocol with DCJ • Localised links with DCJ and other services



Limited availability of appropriate services to meet children's needs, including challenges accessing child protection services, was the **key barrier** to the delivery of HYAP.



More than **1 in 3** children and young people (35%; n=1479) who received a HYAP service did not meet the eligibility criteria for the program, either because they were outside the age range or not part of a group who were all under 16

HYAP providers have been proactively adapting their practice, procedures and even service approach to – as best they can – meet the needs of children and young people who present at their service, irrespective of eligibility.

HYAP Evaluation: What actions are we taking to improve the service response?



Action Area



Clients

How do we better meet the needs of the target group?

The current HYAP model does not meet the needs of the target cohort.

Children with complex needs, including those with a child protection history, are not getting the response they need to improve their outcomes.

HYAP service models are defined by the services that are available locally as opposed to client need or appropriate evidence-based responses.



System

How do we improve system integration to drive better outcomes?

System barriers and inadequate local protocols and local referral infrastructure are contributing to children with complex needs not getting the response they need to improve their outcomes.



Data & Evidence

How do we support improved practice, and ensure services are evidence-informed and evidence building

HYAP providers do not have access to the tools or evidence they need to appropriately respond to children presenting with complex needs.

Data limitations made it difficult to accurately track the services HYAP clients received and for what purpose, and therefore measure program outcomes through the evaluation.



Evaluation Findings



Actions we are taking ...



Action Plan

- **Reconfiguring HYAP** to better meet the needs of the target population and to better integrate services with the child protection system.
- **Establishing a DCJ Escalation Pathway for HYAP/SHS** to pursue better outcomes for clients with child protection concerns.
- Providing unaccompanied children and young people support through the **newly established Family Connect and Support (FCS) service**. FCS can divert more children and young people not meeting the statutory threshold of risk of significant harm (ROSH) from the homelessness sector and supports restoration supported by case management, family group conferencing and preservation programs.
- **Improving access to family preservation programs** that support vulnerable children and their families. The NSW Government is improving family preservation programs over the next three years. The Family Preservation Improvement program will bring existing programs together into a single program structure to better meet the needs of vulnerable families who need different timing, intensity and frequency of services as their circumstances change. There will be less restrictive program eligibility with all programs delivering services to children and young people 0-17 years.
- **Reviewing the policy for Unaccompanied Children aged 12-15 years accessing Specialist Homelessness Services** to clarify the roles and responsibilities of DCJ and funded services (including Family Referral Services, etc.) and provide oversight for children staying in homelessness accommodation for longer periods.
- **A new internal DCJ Youth Homelessness Joint Working Group** will deliver a more integrated response for shared clients who have complex interactions between multiple service systems (e.g. homelessness, child protection and youth justice).
- **Integrating evidence-informed practice into the services** provided by HYAP.
- **Improved communication** to ensure caseworkers and service providers understand best practice when responding to unaccompanied children who present to HYAP and have a child protection history.
- **Improved data collection** for children who are in OOHC and present to HYAP when a child protection report is made (CP Helpline and eReport).