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# Acronyms and abbreviations used in this report

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<th>Full Form</th>
<th>Description</th>
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<tr>
<td>AHURI</td>
<td>Australian Housing and Urban Research Institute Limited</td>
<td></td>
</tr>
<tr>
<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
<td></td>
</tr>
<tr>
<td>AOD</td>
<td>Alcohol and other drugs</td>
<td></td>
</tr>
<tr>
<td>BYS</td>
<td>Brisbane Youth Service</td>
<td></td>
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<tr>
<td>CALD</td>
<td>Culturally and linguistically diverse</td>
<td></td>
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<tr>
<td>DFV</td>
<td>Domestic and family violence</td>
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<tr>
<td>Evaluation</td>
<td>Evaluation of the Sustaining Young People’s Tenancies Initiative</td>
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<tr>
<td>HP</td>
<td>Housing Provider</td>
<td></td>
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<td>HPW</td>
<td>Department of Housing and Public Works</td>
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<tr>
<td>NPAH</td>
<td>National Partnership Agreement on Homelessness</td>
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<tr>
<td>NT</td>
<td>Northern Territory</td>
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<tr>
<td>OASIS</td>
<td>Online Acquittal Support Information System</td>
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<td>PSE</td>
<td>Psychosocial evaluation</td>
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<td>QLD</td>
<td>Queensland</td>
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<tr>
<td>QUT</td>
<td>Queensland University of Technology</td>
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<tr>
<td>SHS</td>
<td>Specialist Homelessness Services</td>
<td></td>
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<tr>
<td>SHSC</td>
<td>Specialist Homelessness Services Collection</td>
<td></td>
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<tr>
<td>SRS</td>
<td>Service Record System for client and case management</td>
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<td>SA</td>
<td>South Australia</td>
<td></td>
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<tr>
<td>SYT</td>
<td>Sustaining Young People’s Tenancies</td>
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<tr>
<td>VIC</td>
<td>Victoria</td>
<td></td>
</tr>
<tr>
<td>WA</td>
<td>Western Australia</td>
<td></td>
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<tr>
<td>YP</td>
<td>Young person / young people</td>
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Executive summary

The Queensland Government Department of Housing and Public Works (HPW) commenced a pilot project with Brisbane Youth Service (BYS) in August 2016 to provide mobile support services to assist young people (YP) aged 16–25, who are in social housing and are at risk of losing their tenancy and becoming homeless, to sustain their social housing tenancy.

The Sustaining Young People’s Tenancies (SYT) pilot provides mobile support to YP after they have entered a social housing tenancy. The SYT initiative is testing a new tenancy sustainment approach, which addresses the unmet support needs of YP in social housing.

HPW has engaged the Australian Housing and Urban Research Institute (AHURI) to undertake an independent evaluation (Evaluation) of the initiative to determine whether it has met its intended aims and objectives and to inform future investment decisions. This report provides the Evaluation findings.

The Evaluation covers the first year of operation of the SYT initiative (September 2016–September 2017) and draws on 24 qualitative interviews with key stakeholders and analysis of administrative and cost data. To provide confidence in the Evaluation’s results, data was triangulated with evidence from the national and international literatures, which demonstrated consistency of findings.

The key evaluation questions are:

- How effective is SYT in sustaining the tenancies of YP in social housing?
- How successful are the early intervention and prevention strategies used as part of SYT?
- What is the role of pre-existing relationships and collaboration with HPs in delivering outcomes through SYT?
- What system issues affect YP’s ability to sustain tenancies?

SYT client profile

By September 2017, the SYT initiative had recorded contact with 111 distinct persons and had opened case plans for 80 YP in social housing who were at risk of homelessness, which exceeds the annual target of 72. Of the YP with open case plans, 44 per cent were male and 56 per cent were female. Nearly half (49%) of YP engaging with the SYT initiative were Aboriginal or Torres Strait Islander or both. There was a high prevalence of mental health issues; all YP interviewed identified that they experienced mental health issues and 67 per cent of YP identified mental health as a high support need in the psychosocial evaluation.

YP required support with a range of housing related issues, including poor communication with Housing Providers (HPs), challenging behaviours, rent arrears, complaints from neighbours and fulfilling responsibilities in relation to cleanliness and upkeep of the property. YP also required support with a range of non-housing issues, including practical supports (cooking, cleaning, budgeting, transport), general life skills, links with appropriate services (e.g. AOD, health care, mental health), financial assistance, social connections, education, skills and employment, and legal issues.
The SYT model and client outcomes

SYT services are being delivered as intended and the vast majority of YP who engage with the initiative are successfully sustaining their tenancies or are in the process of transitioning/have transitioned to more appropriate housing. Administrative data shows that in the period 15 September 2016 to 15 September 2017, 30 of the 31 YP whose support period was closed exited into secure and sustainable housing. Qualitative interviews show that stakeholders and YP view the SYT initiative as a successful model for tenancy sustainment. Positive housing related outcomes identified on the basis of qualitative interviews included increased confidence in sustaining tenancies independently, improved relationships and communication with HPs, increased knowledge of housing processes, increased ability to meet requirements such as inspections and housing reviews and improved behaviour.

In addition to positive housing outcomes, the Evaluation found that the SYT initiative delivers significant social wellbeing outcomes for YP, which contribute to their ability to transition to independence in the future. Non-housing related outcomes identified by the Evaluation include increased confidence and self-esteem, improved ability to navigate systems, better life skills, enhanced social connectivity, greater access to material needs, better mental and physical health, and safety.

The SYT model is consistent with best practice for providing tenancy sustainment services for YP at risk of homelessness as identified in the national and international literatures. Critical success factors for the SYT initiative relate to the service model and the way in which SYT works with YP.

Value for money

SYT services were delivered within the allocated budget, with an average cost per client for whom a case plan was opened of $7,760. The cost of delivering the SYT initiative compares favourably with other homelessness programs aimed at a similar cohort or using similar service models (holistic case management for young people with complex needs).

The average length of support received by the 30 YP whose support periods were closed during the reporting period was 6.2 months (189.77 days). Of these, 5 YP (17%) received support for 0–8 weeks; 11 (37%) received support for 2–6 months; and 14 (47%) received support for 6–12 months or more.

Evaluation findings

SYT is effective in sustaining the tenancies of YP in social housing

Evidence from all data sources demonstrates that the SYT initiative is an appropriate support to assist YP in social housing to sustain their tenancies and gain the skills required to transition to greater independence. The SYT initiative:

→ is effective in sustaining the tenancies of YP in social housing
→ provides to its clients mobile support and case management that are individualised, needs based and flexible
→ provides support with material needs (brokerage)
→ contributes to clients’ knowledge and skills development
→ connects clients to a broad range of supports and services.
The core components of the SYT service model—early identification and referral (early intervention), holistic approach, flexible support, access to brokerage, case management, strong partnerships with external supports, service integration—are consistent with best practice for tenancy support services and services for YP at risk of homelessness, as identified in the literatures.

**SYT uses effective strategies for early intervention and prevention**

The SYT initiative has in place effective referral mechanisms for early intervention and prevention. These mechanisms rely on HPs making referrals through early identification of YP at risk of losing their tenancies and becoming homeless. SYT has worked with HPs in a collaborative and sustained manner to establish and refine these processes. Early intervention is important to tenancy sustainment as it allows supports to be put into place before problems compound and escalate, leading to risk of eviction.

**Pre-existing relationships and collaboration with Housing Providers are a critical success factor in delivering SYT outcomes**

The SYT initiative arose from and builds upon pre-existing relationships between service providers and HPs. These relationships are actively fostered by SYT support staff and are a critical success factor in the delivery of the initiative and in generating positive outcomes for YP. The significance of the relationship between the SYT initiative and HPs lies in a culture change, where support services for YP work together in a collaborative, rather than an adversarial manner, thereby addressing one of the systems issues that can negatively affect tenancy sustainment for YP. It is critical for the ongoing success of the SYT initiative to continue to foster and grow these relationships.

**Systems issues that affect YP’s tenancies**

The Evaluation identified a number of systems issues that contribute to tenancy instability and homelessness among YP, including: the process of applying for social housing, which some YP experience as too long and difficult, and ensuring the application remains current; limited ability of the system to keep track of YP’s movements if they do not notify of a change of address; lack of support services after a tenancy has commenced; constraints on the skills and capacity of Housing Service Centre staff to offer social service responses (e.g. health care, education, employment, social welfare services); constraints on effective service delivery and referrals due to the Information Privacy Act 2009; and limited capacity and long wait times for support services required by YP.

Other systems issues, which are beyond the remit of HPW, but affect YP’s tenancies, include employment services not meeting the needs of YP and the child safety system not adequately equipping YP for independent living.

SYT supports fill a gap in the service provision for YP once they have entered social housing, by assisting them in navigating these issues.

**Policy development opportunities**

The Evaluation finds that the SYT service model is effective and robust.

The SYT initiative has proven to be highly effective in delivering early identification, early intervention, prevention and tenancy sustainment support for the target group. It clarifies the need for an effective, integrated and tailored support framework for YP who are homeless or at risk of homelessness, including after YP have entered social housing.

The evidence collected and synthesised for the Evaluation demonstrates that the SYT pilot makes an important contribution to sustaining the tenancies of vulnerable YP in
social housing and thereby contributes to reducing homelessness. The SYT initiative fills an important gap in the service system by providing support once a social housing tenancy has commenced (as opposed to support to enter social housing). This reduces the rate of tenancy failure and churn.

The strengths of the SYT approach are demonstrated in the increase in YP’s structured access to mainstream services and their increased social connectedness over time as a result of engaging with the initiative. The Evaluation highlights that localised responses and partnerships are a powerful mechanism for generating positive outcomes. However, there is a need for greater system integration between housing and homelessness services and mental health services: a very high proportion of YP accessing the SYT initiative have mental health issues and the evidence suggests that the majority of YP in social housing experience mental health issues. However, constraints on the availability of free mental health services once YP age out of child and youth mental health services mean that there are significant constraints on the ability of the cohort to access the mental health supports they require. Similarly, access to effective youth specific employment programs are critical if YP are to achieve their goal of transitioning to independence and successfully sustaining their tenancies in the long term. Thus there is a need for greater system integration at the policy and program levels links between SYT and work programs for YP (e.g. Skilling Queenslanders for Work).

The Evaluation suggests the following.

**Policy and program level**

1. The demonstrable success of the SYT pilot in relation to early intervention and prevention for YP suggests that the department could consider adopting this model more broadly in the provision of Specialist Homelessness Services and social housing.

2. There is a need for greater system integration between housing and homelessness services and mental health services in order to reap maximum benefit from SYT.

3. The department could explore ways to create greater system integration at the policy and program levels between SYT and work programs for YP. The Skilling Queenslanders for Work program, for example may represent an opportunity for this cohort.

4. The Evaluation indicates that the SYT pilot meets an important need effectively and at costs that are arguably good value for money. This argues strongly for the extension of the initiative to meet the ongoing demand in the pilot sites and expansion of the initiative to meet the ongoing need/demand for the service in other locations.

5. In order for the SYT model to adequately address the unanticipated high level of client need of the cohort, the department should consider whether the level of brokerage funding is sufficient for the SYT.

**Service provider level**

6. The service provider could, in conjunction with HPs, explore ways to further enhance processes for early intervention and identification of YP who are at risk. This could include SYT support staff having designated times at which they are present at HP’s offices during intake interviews into social housing to assist with identification and allocation issues.
7 The service provider, together with HPs, should further embed processes to ensure popularisation of and continuous education about the SYT initiative with relevant HP staff to ensure early identification and referral of YP at risk.

8 Considering the high proportion of Aboriginal and Torres Strait Islander YP engaged in the SYT initiative, the service provider should consider employing a support worker who is of Aboriginal and Torres Strait Islander background to further enhance culturally appropriate support for this cohort of YP.

9 The service provider should consider partnering with local youth specific employment services to enhance the employment prospects of YP engaged in the initiative and further support their ability to transition to independence.
1 Introduction

This is the Final Report for the evaluation of the Brisbane Youth Service Inc. (BYS) Sustaining Young People’s Tenancies (SYT) initiative (Evaluation).

The Queensland Department of Housing and Public Works (HPW) is responsible for delivering the SYT initiative funded under the National Partnership Agreement on Homelessness (NPAH). HPW commenced the SYT pilot initiative with BYS in August 2016 to provide Mobile Support to Young People (YP) aged 16–25, who are already living in social housing and are at risk of losing their tenancy and becoming homeless.

The Final Report is structured according to the key evaluation questions, which are answered using qualitative and quantitative evidence derived from multiple data sources. Key evidence is included in the body of the report and tabulated data is provided in the appendixes.

1.1 Purpose of the Evaluation

The purpose of the Evaluation is to ascertain whether the SYT initiative achieved its intended aims and objectives, to examine the effectiveness of the service model and to identify opportunities for improvement. The Evaluation will be used to inform future service improvements, planning and investment decisions under the Queensland Housing Strategy 2017–2027 (HPW 2017a) and the Queensland Housing Strategy 2017–2020 Action Plan (HPW 2017b).

The key evaluation questions are:

➔ How effective is SYT in sustaining the tenancies of YP in social housing?
➔ How successful are the early intervention and prevention strategies used as part of SYT?
➔ What is the role of pre-existing relationships and collaboration with Housing Providers in delivering outcomes through SYT?
➔ What system issues affect YP’s ability to sustain tenancies?

1.2 Method

The Evaluation used a mixed methods approach comprising a series of qualitative interviews with key stakeholders, analysis of administrative and financial data provided by agencies, and analysis of data from the psychosocial evaluation (PSE) that is embedded within the SYT initiative case planning.

1.2.1 Qualitative interviews

Qualitative interviews were conducted with YP, SYT staff and HPs in early September 2017. A pilot interview to test the validity and suitability of the survey instrument for YP was conducted in May 2017.

Interview schedules were developed in collaboration with key stakeholders from HPW, SYT staff and Queensland University of Technology (QUT) using an iterative process. This was done to ensure that all relevant aspects of the program were illuminated and to ensure that questions were respectful to YP, understandable and appropriate to the information sought. Completed interview schedules and the interview protocol were submitted to the Anglicare Victoria Research Ethics Committee and ethics approval.
(AVREC 2017-02) was received in March 2017. Refer to Appendices 1 and 2 for the interview schedules.

The qualitative component of the evaluation consisted of 24 in-depth semi-structured interviews.

- 13 interviews with YP who sustained their tenancies 6–12 months after their commencement in SYT
- 2 interviews with YP who did not sustain their tenancies
- 4 interviews with SYT support workers
- 4 interviews with HPs (2 public housing, 2 community housing)
- 1 interview with HPW staff.

Young interviewees were 16–25 years of age and were selected to represent a balance of genders and sub-groups, such as Aboriginal and Torres Strait Islanders, disability, young parents and case complexity (low to high support needs) (Table 1).

**Table 1: YP interviewees’ characteristics**

<table>
<thead>
<tr>
<th>Tenancy outcome</th>
<th>Gender</th>
<th>Family type</th>
<th>Special group</th>
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<tbody>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Family</td>
<td>Family</td>
</tr>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Single</td>
<td>Own child safety</td>
</tr>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Single</td>
<td>Intellectual disability, own child safety</td>
</tr>
<tr>
<td>Sustained</td>
<td>F</td>
<td>Sole parent</td>
<td>Family, Aboriginal and Torres Strait Islanders, own child safety</td>
</tr>
<tr>
<td>Sustained</td>
<td>F</td>
<td>Sole parent</td>
<td>Family, Aboriginal and Torres Strait Islanders, own child safety</td>
</tr>
<tr>
<td>Sustained</td>
<td>F</td>
<td>Sole parent</td>
<td>Family</td>
</tr>
<tr>
<td>Sustained</td>
<td>F</td>
<td>Sole parent</td>
<td>Family, Torres Strait Islander</td>
</tr>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Single</td>
<td>Nil</td>
</tr>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Single</td>
<td>Nil</td>
</tr>
<tr>
<td>Sustained</td>
<td>F</td>
<td>Single</td>
<td>Nil</td>
</tr>
<tr>
<td>Sustained</td>
<td>M</td>
<td>Single</td>
<td>Aboriginal and Torres Strait Islanders, child safety</td>
</tr>
<tr>
<td>Not sustained</td>
<td>M</td>
<td>Single</td>
<td>Unsuccessful tenancy, intellectual disability, own child safety</td>
</tr>
<tr>
<td>Not sustained</td>
<td>M</td>
<td>Single</td>
<td>Intellectual disability</td>
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The period YP had been in SYT ranged from 4 weeks to 12 months. YP were split evenly between public housing (7) and community housing (8) tenants. Five interviewees were sole parents, 4 identified as Aboriginal and Torres Strait Islanders, 8 had previous own child safety involvement, 3 had an intellectual disability (both YP who did not sustain their tenancy had intellectual disabilities), many faced legal issues and all identified that they
experienced mental health issues and this contributed to their difficulties in sustaining their tenancies.

As YP are a vulnerable group and can often be difficult to access for the purposes of research and evaluation, recruitment was undertaken in collaboration with support workers delivering SYT and an incentive ($50 Coles gift voucher) was provided to participating YP in recognition of their contribution.

Agency staff and representatives from HPs were purposively chosen on the basis of their knowledge of the SYT.

1.2.2 Administrative and cost data

Administrative and cost data was drawn from a combination of sources:

- the SRS client and case management system
- the Queensland Government Online Acquittal Support Information System (OASIS)
- Australian Institute of Health and Welfare (AIHW) Specialist Homelessness Services Collection (SHSC)
- data from the psychosocial evaluation (PSE) (see section 8.3.2).

The period for which the SYT initiative was evaluated, and for which this data was analysed is from 15 September 2016 to 15 September 2017. The timeframe was chosen to account for a full year of the initiative’s operation.

1.2.3 Psychosocial evaluation

A psychosocial evaluation (PSE) is embedded within the SYT pilot. The PSE progressively measures psychosocial outcomes of YP as they progress through the initiative. PSE questionnaires are embedded with initial assessment, case management planning, review and exit from the initiative. YP and SYT support staff complete the PSE informally and collaboratively as part of the case planning, review and exit processes (see Appendices 3–8).

The PSE measures the following domains, which broadly align with the non-shelter outcomes used for the Evaluation, using a five point scale (5=doing great; 4=doing well; 3=ok; 2=could be better; 4=could be a lot better):

1. Life skills (positive decision making, dealing with the systems, self-responsibility)
2. Meeting basic needs (stable housing, food, money and other resources)
3. Safety (reduced risks from alcohol and other drug use, violence or other risks to you or your children)
4. Connection (having good social support and support from services/professionals)
5. Health (dealing with physical health issues, maintaining healthy lifestyle and self-care)
6. Mental wellbeing (feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment)
7. Relationships (with partners, friends, family, children, support workers)
8. Participating (in work, education, meaningful/enjoyable activities, belonging and having a voice)
9. Overall: How are you at the moment?
In addition, HPs are asked to provide feedback on their assessment of how the tenant is going at that point in time. The Evaluation reports PSE data from the commencement of SYT up to 24 October 2017. During this timeframe, 60 YP completed the initial assessment, 49 the first review, 31 the second review, 18 the third review, and 18 the final review.

1.3 Limitations

AHURI is confident that the findings of the Evaluation are sound as the methodology used triangulated the results from a range of data sources.

However, the Evaluation identified limitations to the state and national reporting datasets with minor variations in data between the two. AHURI considered the limitations across datasets and decided that the SRS (Service Record System) client and case management system was the most reliable data source. This is because the SRS supports unique client IDs for all clients, making it possible to query and cross check data inconsistencies against OASIS and AIHW data. This was done on a number of occasions and was supplemented with OASIS financial reports and AIHW data, where indicated. Data from the SRS is also used to populate OASIS and to provide data to the AIHW for the Specialist Homelessness Services Collection.

Data from the PSE needs to be treated with a degree of caution due to the fact that of the 80 YP who have completed initial assessments, so far only 18 YP have progressed through the initiative and completed their final reviews and exit reviews. However, findings from the PSE are consistent with the findings from this Evaluation.

Finally, it is too early to assess the long term outcomes in terms of tenancy sustainment of YP who have engaged in the SYT initiative. While current results are encouraging, it would be desirable to follow up with YP at 6 and 12 months after exiting from SYT.
2  Key concepts and definitions

This section of the report sets out key definitions and concepts used in the Evaluation.

2.1  Case management

Case management is a service delivery approach now widely adopted in diverse settings in the human services and health sectors. The Case Management Society of Australia uses the following definition of case management, which is based on that developed by Marfleet, Trueman et al. (2013):

*Case management is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual’s holistic needs through communication and available resources to promote quality cost-effective outcomes. (CMSA 2017)*

The Homelessness Program Guidelines, Specifications and Requirements state that case management is a mandatory service approach for all services as it puts identifying and responding to the client’s expressed needs at the centre of all aspects of service delivery. It is an approach that can be tailored to all service types and delivery models. It is not related to the intensity of support provided or the length of relationship with a client. It may be intensive and comprehensive, or an abbreviated or compressed version, for example in access services.

The main elements of case management are identified as being:

→ entry/screening
→ assessment
→ planning
→ direct service
→ co-ordination (including referral)
→ monitoring and review
→ exit planning, case plan closure and follow-up
→ evaluation.

A comprehensive research synthesis by Gronda (2009) of the evidence base for case management practice for working with people experiencing homelessness, highlighted the importance of the therapeutic relationship. Persistent, reliable, intimate and respectful relationships that provide practical support are most likely to lead to positive outcomes. The likelihood of achieving stable housing outcomes is increased with effective case management that focuses on the provision of practical supports, education and advocacy, rather than case management that adopts a primarily coordinating and referral role.

The evidence demonstrates that effective case management is a time and resource intensive intervention; however, controlled experiments show that it is cost effective because it reduces other system expenditure (Gronda 2009).

Conditions which enable the case management relationship to deliver beneficial outcomes for people experiencing homelessness include: access to housing resources and specialist supports; individually determined support durations; case management staff
with advanced assessment, communication and relationship skills, and regular practice supervision (Gronda 2009: 7).

### 2.2 Complex needs

Complex needs (sometimes also referred to as multiple needs) is a term used to refer to people who experience various combinations of mental illness, intellectual disability, acquired brain injury, physical disability, behavioural difficulties, homelessness, social isolation, family dysfunction, and drug and/or alcohol misuse. They have often been involved with many services since childhood, including child protection and juvenile justice. People who have complex needs require high levels of health, welfare and other community based services (Hamilton 2010).

### 2.3 Measuring the cost of homelessness

The methods used to calculate financial benefits or savings to government, arising from programs and services, vary and are often conflated. Three measures that are frequently used are cost effectiveness, cost benefit and cost offset analyses.

- **Cost effectiveness** calculates the cost of a program and measures this against outcomes. For example, the total cost of a program \((x)\) is divided by the unit of effectiveness \((y)\). ‘The unit of effectiveness is any quantifiable outcome central to the program objectives’, for example number of people housed (Johnson, Parkinson et al. 2012: 27). The cost effectiveness value is then expressed in dollar values, such as the cost to house an individual. The dollar value can then be used to measure or compare against other programs with similar outcomes.

- **Cost benefit** uses both program costs and outcomes. In contrast to cost effectiveness, program outcomes are given dollar values. These values are also expressed as a ratio, where the program outcomes, expressed in dollar values \((y)\) are divided by the cost of a program \((x)\). This method measures and incorporates broader benefits across a range of potential dimensions including, for example, increased employment, better health, reduced crime, or increased property and income tax revenues.

- **Cost offset** presents both costs and outcomes in dollar terms and estimates the potential savings associated with the outcome of a program. Cost offset makes it possible to draw cost offset findings from cost benefit analyses. In an evaluation of an existing intervention, cost offset analysis would show the costs of the use of a service (i.e. health or justice) as a monetary sum against which to offset the financial costs of the intervention aimed at prevention (Pinkney and Ewing 2006: 19–20).

### 2.4 Mental health and mental illness

Definitions of mental illness vary widely, and are typically narrower in a legal and political context than in a clinical one. The *Report on Government Services* identifies a mental illness as a diagnosable illness that significantly interferes with an individual’s cognitive, emotional and/or social abilities. It describes a diverse range of behavioural and psychological conditions. These conditions can affect an individual’s mental health, functioning and quality of life. Each mental illness is unique in its incidence across the lifespan, causal factors and treatments (ROGS 2017: 13.1–2).
This contrasts with mental health issues (also known as mental health problems), which ‘are typically less severe and of shorter duration than mental illness and may (be) … experienced as a reaction to life stressors’ (Department of Community Services 2009: 23). Nonetheless, the terms mental health issues and mental illness are often used inconsistently in the evidence base and operationalised differently across the national and international service systems. The Evaluation uses the term mental health issues to encompass the two.

2.5 Presenting Unit and Presenting Unit Head

Presenting unit (PU) and presenting unit head (PUH) are terms from the Specialist Homelessness Services collection (SHSC). A PU is a client or group of clients that together, all receive a service from a Specialist Homelessness Service (SHS). People who do not receive a direct service are not included in the presenting unit. This may include children who present with a parent or guardian but do not receive any services themselves. People who present to an agency who are not part of the presenting unit might include relatives or friends of the people requiring direct services. They may be there to support the client but do not themselves require assistance (AIHW 2017).

In order to understand the composition of a group presenting to a SHS agency, it is important to know how people within this group interrelate to one another. This is done by selecting a PUH from among members of the presenting unit. Anyone within the group may be selected to be the presenting unit head but the group member best suited to the role is the person who has the strongest relationship with all other group members (AIHW 2017).
3 Review of the evidence for tenancy sustainment programs

Tenancy sustainment programs aim to reduce homelessness by preventing loss of tenancy for people at risk of losing their tenancy and becoming homeless. Jones et al. (2012:11) broadly define tenancy sustainment as ‘housing management policies and practices designed to assist social housing tenants to manage their tenancy successfully and to achieve improvement in their lives.’ This includes assisting vulnerable tenants to avoid tenancy failure through eviction or exit under duress (Habibis, Atkinson et al. 2007), encouraging positive experiences of housing and supportive landlord practices that balance social and economic imperatives and link housing and other services (Seelig and Jones 2004).

Tenancy sustainment has a dual focus on early intervention (pre homelessness) and post crisis intervention (post homelessness). To this end, most tenancy sustainment programs target tenancy maintenance as well as tenant capacity building (Jones, Gronda et al. 2012).

3.1 Failed tenancies and the cycle of homelessness

The likelihood of homelessness following a failed tenancy is strong, especially for tenants involuntarily exiting social housing, because their low incomes make finding alternative accommodation in the private rental market very challenging (Habibis, Atkinson et al. 2007). YP are a group that is at high risk of tenancy failure (Habibis, Atkinson et al. 2007). The ‘cycle of homelessness’ is a sequence of events whereby high-need tenants are housed (often with pre-existing debt) and subsequently evicted, become homeless, access SHS, before being rehoused (this time with greater debt), and then are frequently evicted again to start the cycle over (Habibis, Atkinson et al. 2007: 3). Eviction from social housing also contributes to ‘churn’, where someone evicted from their home often relocates somewhere else within the social housing system (Habibis, Atkinson et al. 2007).

Eviction from social housing and homelessness incur serious costs for the individual (the negative effects of homelessness are well documented and include health and mental health problems, poverty, social problems, justice system involvement), for Housing Providers (e.g. documentation to support the eviction, legal costs, court attendance, unrecovered rent arrears, property refurbishment) (Habibis, Atkinson et al. 2007), and for the system more broadly (use of social welfare supports, health and justice systems, etc.).

The causes of homelessness have been linked to a person’s individual circumstances and characteristics, as well as institutional and broader structural factors.

Australian research identifies the following individual risk factors which may put a person at a higher risk of first time homelessness or homelessness due to insecure housing: a history of contact with institutions; poor decision making; having been homeless as a child; previous experience of homelessness; serious mental illness; drug or alcohol dependency; leaving state care (psychiatric or correctional institutions as well as state care, including foster care); domestic and family violence and family conflict; for older people, the death of a partner or illness; for YP, the experience of family violence, child abuse, parental drug or alcohol dependency or mental illness; unemployment; relationship breakdown; and being a sole parent (Flatau, Conroy et al. 2013; Johnson, Scutella et al. 2015; Steen, Mackenzie et al. 2012; Stone, Sharam et al. 2015; Wood, Batterham et al. 2015).
Institutional factors, such as the social housing and private rental systems can also contribute to housing instability and homelessness; for example limitations on access to transitional and social housing and a very competitive private rental market with limited tenant protections.

Structural factors contributing to homelessness include weak labour markets, tight housing markets and geographic factors (Johnson, Scutella et al. 2015; Wood, Batterham et al. 2015).

The cumulative effect of these risk factors means that some people are at higher risk than others of tenancy failure and homelessness. High risk groups include: Aboriginal and Torres Strait Islander people; children and YP, especially YP who have experienced family violence, child abuse, parental drug or alcohol dependency or mental illness; people with substance abuse and/or mental health issues; CALD people; people leaving state care and other institutions; families with children; and women and children escaping domestic violence (Brackertz 2016).

3.2 The cost of homelessness

The evidence shows that homelessness prevention results in considerable cost savings to government in terms of cost offsets. The national and international evidence demonstrates that homeless people use health and justice services at a greater degree than the general population. As a consequence, any intervention to prevent or reverse homelessness will provide significant cost savings to government, particularly in the areas of health and justice. The evidence also clearly shows that early intervention and prevention of homelessness can also reduce the use, and therefore cost, of homelessness specific services.

Key findings from the evidence-base about cost effectiveness of homelessness services are (Costello, Jones et al. 2013a):

→ Early intervention and prevention programs can provide savings to government.
→ Homelessness services that successfully stabilise housing produce savings to government. The savings per year and over a lifetime have been found, both in Australia and internationally, to be significant.
→ Early intervention for YP at risk of homelessness can reduce negative outcomes and create significant short and long term savings to government.
→ YP exiting care who do not have effective preparation for independent living can incur significant costs to government over a lifetime, not just in housing.

3.2.1 Can we measure the cost effectiveness of homelessness services?

The categorical enumeration of either cost effectiveness, cost benefit or cost offset is difficult, not least because homelessness is a multi-faceted social phenomenon and both costs and outcomes occur in a range of dimensions (Berry, Chamberlain et al. 2003: 9–12; Pinkney and Ewing 2006: 115–18). Berry, Chamberlain et al. (2003: 3) note that the costs and benefits relate to the individual, to government and to society, and occur across the domains of housing, health/welfare, justice and education, training and employment. A recent AIHW study (2012) undertook an analysis of linked Supported Accommodation Assistance Program (SAAP), juvenile justice and child protection data from Victoria and Tasmania. The study found that:

→ YP involved in one sector are more likely to be involved in one of the other two.
YP with child protection histories enter juvenile justice services at an earlier age.
YP, particularly women completing a detention sentence, are at a greater risk of homelessness.

What this analysis shows is that homelessness and the risk of homelessness are related to a wide range of other government services. As such, savings and benefits in one area can significantly benefit other sectors.

Notwithstanding these difficulties, a number of studies have quantified the costs and savings associated with homelessness services.

### 3.2.2 Homelessness services that successfully stabilise housing produce savings to government

Zaretzky and Flatau (Flatau, Zaretzky et al. 2008; Zaretzky and Flatau 2013; Zaretzky and Flatau 2015; Zaretzky, Flatau et al. 2013) have undertaken a series of linked studies on the cost effectiveness of homelessness services. Taken together these studies make a clear point that homelessness services provide savings to government and provide shelter and non-shelter outcomes to clients.

The study found that:
- Homelessness programs provide cost savings to government and improve client outcomes.
- Homelessness programs improved housing, health, social relationships and, more modestly, employment outcomes of clients.
- The programs yielded average cost savings to government of $3,685 per client per year by reducing the use of non-homelessness services (health, justice and welfare), though this only partly offsets program costs.

Zaretzky and Flatau (2015) specifically examined the cost effectiveness of tenancy support programs in Australia (all states and territories except SA and NT). They found that ‘the mean cost per support period is highest for supported accommodation for YP, based on the Youth Foyer model ($26,191/PUH), and programs offering support to help YP access/maintain a social housing tenure have the second highest mean cost/PUH ($20,852/support period)’ (Zaretzky and Flatau 2015: 52).

### 3.2.3 The cost of youth homelessness

A recent national study by MacKenzie, Flatau et al. (2016) examined the cost to government of youth homelessness. The study, which covered 60 programs in Victoria, Western Australia, New South Wales, the ACT, SA and QLD, was undertaken over a period of four years and followed more than 400 YP who were either homeless or at very high risk of homelessness. The study compares the economic costs of a cohort of homeless youth with another group of disadvantaged YP who were not homeless but who were unemployed. This comparison provides a net average cost difference that can be attributed to homelessness.

The study found that the costs associated with young homeless people’s use of services such as health and the justice system were much higher than for the comparison group.
- The costs to the Australia economy of health services associated with YP experiencing homelessness averages $8,505 per person per year or $355 million
across all YP aged 15–24 accessing SHS. This is $6,744 per person per year more than for long-term unemployed youth.

- Homeless YP are much more likely to have contact with the **criminal justice system** than the general population or other disadvantaged YP, who are long-term unemployed but not homeless. The cost to the Australian economy is an average of $9,363 per person per year or $391 million across all YP aged 15–24 accessing the SHS system. This is $8,242 per person per year more than for long-term unemployed youth.

- **The total cost to the health and the justice systems** due to young homeless people is an average of $17,868 per person per year ($14,986 more per person per year than for unemployed youth). These costs do not include the additional lifetime impact of early school leaving and low engagement with employment.

- On the basis of 41,780 YP aged 15–24 years who were clients of SHS in 2014–15 and present alone rather than in a family group, the total cost to the Australian economy of additional health and justice services is an estimated $747 million annually. This exceeds that total cost (approx. $619 million) of providing SHS to the 256,000 clients (young and old) assisted by the system over the same period.

### 3.3 Good practice for tenancy sustainment

There is considerable evidence that tenancy sustainment programs are successful in preventing homelessness for those at risk (Flatau, Coleman et al. 2009; Jones, Gronda et al. 2012), yet tenancy sustainment in social housing can be challenging due to the multiple support needs of vulnerable tenants (Habibis, Atkinson et al. 2007). The literature clearly demonstrates that meeting the needs of people in social housing involves more than ‘putting a roof over someone’s head’ and that the issues that contribute to an individual’s entry into social housing (physical and mental health, social and economic factors) must also be addressed if the tenancy is to be successful (Jones, Gronda et al. 2012: 53; Pawson and Munro 2010).

From their review of the Australian and international literatures, Jones, Gronda et al. (2012: 54) conclude that tenancy sustainment services need to adopt a continuum of support that:

- assesses issues and if necessary implements **support during the allocations phase** when tenants are first assigned a social housing tenancy
- provides **early intervention** strategies following a change in circumstance or behaviour, for example rent arrears, reports of anti-social behaviour, interaction with the justice system and health facilities, and family changes such as child protection issues, family break up or the death of a partner
- ensures longer term and sustainable tenancies through **capacity building**.

Characteristics of successful tenancy sustainment programs include:

- **Early intervention**—proactive approach focused on prevention and early intervention, rather than stepping in only at crisis point (Flatau, Coleman et al. 2009; Jones, Gronda et al. 2012: 58)
- **Sustainable**—aimed at empowering clients to ensure longer term independent living (Jones, Gronda et al. 2012: 58)
- **Holistic**—address a range of support needs (Jones, Gronda et al. 2012: 58)
→ Tailored / bespoke—meet individual needs (Jones, Gronda et al. 2012: 58)
→ Flexible—provide changing levels of support over time (Jones, Gronda et al. 2012: 58)
→ Culturally sensitive—support workers need to be culturally sensitive, able to understand and acknowledge cultural issues and obligations (Flatau, Coleman et al. 2009; Jones, Gronda et al. 2012: 58)
→ Confidential—respect the confidentiality and privacy of tenants in accordance with applicable laws (Jones, Gronda et al. 2012: 58)
→ Strengths-based—build on people’s strengths and build their capacity to successfully manage their own tenancies (Flatau, Coleman et al. 2009; Jones, Gronda et al. 2012: 58)
→ Case management—the likelihood of achieving stable housing outcomes is increased with effective case management (Flatau, Coleman et al. 2009)
→ Service integration—integration of human services support with social housing provision (Jones, Gronda et al. 2012: 58)
→ Links with external supports—good linkages with support services in areas such as mental health and drug and alcohol counselling are critical to address the underlying sources of tenancy failure (Flatau, Coleman et al. 2009)
→ Brokerage—access to brokerage funds supports the implementation of a case plan (as distinct from material aid or emergency relief) (Family and Community Services and Housing NSW 2012; MacKenzie, Desmond et al. 2007).

### 3.3.1 Sustaining YP’s tenancies

YP are a group at high risk of homelessness. A review of tenancy sustainment services for YP in the UK found that many YP were not ready for an independent and unsupported social housing tenancy (Third et al. 2001). The study reported the following factors affecting tenancy failure: feelings of isolation; budgeting problems; lack of household furniture and equipment; complex drug/mental health issues; and problems with families, neighbours or peer groups. This is consistent with the findings from the Evaluation. The research also identified loss of self-esteem and confidence, reduced ability to access and sustain education, training, work or housing in the future, as adverse outcomes of tenancy breakdown for YP. The authors noted that YP welcomed advice and support from independent agencies and councils, particularly if it was delivered in a ‘young person friendly’ way, and concluded that, in order to connect with YP, the ‘style’ of advice and support services is important—organisations need to be young person friendly (Third, Pawson et al. 2001).

Recommendations for improving tenancy sustainability practice for YP include:

→ consideration of the continuum of support needs; for some YP help at the ‘moving in’ stage would suffice, while others require intensive ongoing support

→ development of a range of advice and support services specifically for YP; these services must be provided in a way that is accessible and acceptable to YP in style and timing

→ strengthened partnerships to maximise resources and to ensure that agencies are able to respond to the range of issues presented by YP in a holistic manner
facilitation of links between new tenants and longer-established neighbours, and/or integration with local social networks

recognition of widespread need for help with claiming benefits and with budgeting (Jones, Gronda et al. 2012).
4 The SYT model

The SYT pilot is a new tenancy sustainment initiative to address the support needs of YP. The SYT pilot commenced in August 2016 and targets YP aged 16–25 and their dependents, after they commence their social housing tenancy, and who are at risk of losing their tenancy and becoming homeless.

The SYT model incorporates many of the best practice elements identified by the literature (section 3). The SYT model uses a holistic, needs based approach to case management which is providing the service on a mobile basis whereby the case management support is delivered to YP where they are, as opposed to YP being expected to attend a specific location to receive their case management support. Establishing and maintaining good working relationships with HPs is integral to the SYT model.

This chapter describes the SYT service model, identifies critical success factors, how well the service model has been implemented and whether it is suited to providing the sought outcomes.

4.1 SYT objectives

The SYT initiative has two major stated objectives:

- to prevent and/or end homelessness for YP where possible and to achieve sustainable housing outcomes
- to engage with YP as early as possible to support them to sustain and maintain their current social housing tenancy, or transition to more appropriate accommodation, particularly where they are at risk of losing their tenancy and becoming homeless.

4.2 SYT inception

The SYT initiative came about when three of the Housing Providers now part of the initiative (Bric Housing, Brisbane Housing Company (BHC) and Fortitude Valley HSC) and BYS support staff, who are all part of the Under One Roof case coordination group that has existed in Brisbane for the past 10 years, sought ways to better sustain the tenancies of YP in social housing. Throughout the process, HPs talked about their challenges in terms of housing YP and working alongside support providers.

In response, BYS established a working group consisting of Bric Housing, BHC, HPW, the Department of Communities, Child Safety and Disability Services and the Queensland University of Technology (QUT). This group met regularly over a period of four months, providing advice and feedback regarding available practice evidence and frameworks to inform service model design. In December 2016, BYS submitted a proposal to HPW focused on improving outcomes for young tenants. Tenancy sustainment and Housing First principles were central to the proposal.

In August 2016, the pilot SYT project was funded by HPW under the National Partnership Agreement on Homelessness (NPAH). The first tenant was referred and supported in September 2016. Program design and development continued alongside tenancy support, in an environment of practice reflection and learning.
4.3 SYT services are being delivered as intended

There is clear evidence from all data sources that the SYT initiative is being delivered as intended and the vast majority of YP who engage with SYT are successfully sustaining their tenancies or are in the process of transitioning or have transitioned to more appropriate housing. Services are being delivered in line with the *Homelessness Program Guidelines, Specifications and Requirements* (Department of Housing and Public Works 2015).

4.3.1 Identifying YP at risk, referral and early intervention

SYT referral processes have been fine tuned to successfully prioritise early intervention and prevention.

SYT focuses on early intervention and prevention—consequently early identification and referral of YP who are at risk is paramount. HPs can find it difficult to assess YPs support needs as HPs are not social workers and are responsible for managing large numbers of tenancies. Processes are now in place to enable HPs to refer YP early on in their social housing tenancy—at intake, or at the first sign of difficulty—allowing SYT support staff to intervene before problems escalate. In the early stages of the initiative, SYT frequently received referrals from HPs when YP were already in a serious crisis in terms of sustaining their tenancy (e.g. facing an imminent QCAT hearing). In response to this, a process of education with HPs was undertaken to review referral procedures, and HPs now mostly refer YP at the point of intake into social housing or at the first sign of difficulties, using a referral form which also establishes the YP’s consent to proceed (Figure 1). A copy of the referral form for HPs is in Appendix 3.

4.3.2 Needs assessments and progress reviews

The SYT initiative has effective processes and procedures to provide YP with needs assessments, review their progress and allow them to plan for and chart their progress towards goals.

SYT uses a variety of tools, in conjunction with case plans, to establish YP’s needs and priorities, and to assist them in setting goals, plan actions to work towards those goals and evaluate progress towards goals. The tools are largely administered informally by SYT support staff in collaboration with the YP. Examples of the tools are provided in Appendices 3–8. Since October 2017, tools have been migrated to an electronic platform and hard copy versions are no longer used.

Upon receiving a referral from a HP (Appendix 3), SYT support workers meet with the YP to complete a screen, which ascertains the YP’s suitability for participation in the SYT initiative (Appendix 5). If the YP is deemed suitable for SYT and chooses to engage, support workers will begin an initial assessment (Appendix 6) and commence case planning which can take up to four weeks of engagement with the YP. The reason it can take up to four weeks to complete a case plan is that it usually takes multiple contacts with the YP to complete an assessment. The initial assessment and case plan identify YP’s support priorities, goals and how they think they are currently faring in relation to these.

The majority of YP who engage with the SYT initiative have case plans and progress against case plans is reviewed every six weeks in order to track YP’s progress and increased capabilities over time (Appendix 7). The reviews also have the purpose of helping YP to acknowledge the changes they are making in their lives. In addition, the reviews trigger conversations with HPs, which means SYT support staff are able to ascertain whether or not the risks to YP’s housing are increasing or decreasing over time. Wherever possible, reviews are aligned with the case planning process.
YP’s goals are tenancy related (e.g. resolving rent arrears, resolving disputes with HPs) as well as focusing on other life domains. Interviews with YP and SYT support staff indicate that YP have realistic expectations of what they can achieve while in the SYT initiative and how they can accomplish this.

A key lesson from the implementation of the initiative has been around screening and goal planning for YPs. Initially, the focus was on developing comprehensive screening processes to determine the right pathway for YP, whether or not to support them or to refer them on. It quickly emerged that using a one-off point in time screening process makes it difficult to predict the pathway YP are going to be able to take. Consequently there is now a strong emphasis on regular reviews. This approach also supports YP to transition on from the program well.
Figure 1: SYT process flow

**Intake and support process**

**Housing provider:**
- completes and submits referral form to SYT team
- includes tenants’ consent to proceed

**SYT Team:**
- meets referred tenant
- completes screen form
- includes tenants’ consent to proceed

**SYT Team + Housing Provider:**
- prioritise support and identify support type
- shared housing and support plan
- reviews used to identify progress

**Support closure**

**Tenant chooses not to engage in support**

**Tenant chooses not to engage in support**

**Immediate, brief support only**

**Planned closure, informed by progress against reviews or plan. OR tenant chooses to disengage**
4.3.3 Transitioning from SYT

SYT undertakes successful exit planning and the vast majority (all except one for the reporting period) of YP exit into appropriate housing.

Once a YP is ready to exit the initiative, a final review is undertaken (Appendix 8). The purpose of the final review is to understand the changes made by the YP and to ensure that the SYT initiative meets the needs of YP.

At the same time, HPs complete a housing review form (Appendix 4), which is an opportunity to record any change in the tenant’s housing situation between time of referral and the end of support.

The SYT initiative aims to ensure that YP exit into appropriate housing. Regular reviews with HPs and YP mean that SYT support staff are able to track YP’s progress and to ascertain whether or not the risks to their housing are increasing or decreasing over time, and whether they have stabilised in other life domains and are feeling confident and capable. Once a YP has exited from the SYT initiative, or their support period has been closed, SYT support staff remain available as a check in point. This ensures that if something occurs in YP’s lives which they need assistance to navigate, SYT can step in. Some YP re-engage with the initiative at this point, while others merely require a sounding board—this is key to the relational approach of the SYT model, and a mechanism to ensure ongoing tenancy sustainment for YP.

If a YP is not able to sustain their tenancy and thus exits SYT, SYT support staff aim to ensure that the YP exits into appropriate housing (e.g. in one instance SYT provided temporary accommodation for a YP until a place in supported housing for people with an intellectual disability became available) and does not become homeless. SYT support staff remain in touch and the initiative is open to YP to re-join, should they re-enter social housing.

4.3.4 Relationship between the SYT initiative, HPs and YP

SYT support staff have put in place successful processes to establish good communication between themselves, YP and HPs, which is contributing to the success of the initiative.

The communication and relationship triangle between the SYT initiative, HPs and YP is fundamental to the SYT model, and prioritised by SYT support staff. The emphasis on building and sustaining relationships between SYT support staff, HPs and YP contributes to tenancy sustainment and early intervention objectives of the initiative. SYT continually engages with HP to ensure they are updated with YP’s progress and to identify any problems as they arise. This communication is supported by fortnightly operations meetings with core partners of the SYT initiative, as well as the six-weekly reviews undertaken with YP, which trigger communication with the HP.

A critical success factor in the good working relationship between HPs and SYT support staff was the shadowing, which took place early on in the initiative. For one day, SYT support staff accompanied HPs on site to understand more about their processes, priorities and ways of working. This helped build personal relationships, and provided SYT staff with a better understanding of the environment within which HPs operate, and how to best support them. HP interviewees indicated that they valued the shadowing process highly and that frequent and transparent communication with SYT assisted them in

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1 Operations meetings have changed to occur monthly as of November 2017.
managing YP’s tenancies successfully and made their jobs easier. SYT interviewees indicated that the shadowing process was important in providing them with a better understanding of how HPs work and what the key processes and priorities are.

Educating YP about tenancy processes and responsibilities and building their capacity to communicate with HPs is crucial to the future success of their tenancy. Interviewees indicated that SYT support staff accompanying YP to meetings with HPs and facilitating phone calls and other communication were successful mechanisms to build and maintain the relationship between YP and HPs, until YP felt capable and confident of navigating this on their own.

Initially the SYT initiative encountered a number of challenges, including:

- A lack of trust and assumptions held by HPs regarding service providers made it challenging to move beyond adversarial to partnership relationships.
- HPs manage large housing portfolios and operate at capacity. They can therefore encounter difficulties in identifying opportunities for early intervention or maintaining frequent communication.
- It took some time for HPs to understand the referral process, especially in regard to early intervention. Initially SYT received mainly crisis end referrals, which did not allow the service enough time to respond before Queensland Civil and Administrative Tribunal (QCAT) hearings.
- There was a strong focus on continuous improvements in the first six months of the initiative, which continues, and contributes to SYT being a well-designed service.
- Some HPs have been more willing to come on board with SYT than others. This points to an opportunity to further enhance relationships between HPs and the SYT initiative, especially in terms of educating HPs about the role of SYT and how it can link with HP processes.
- SYT is now operating at capacity, which limits its ability to take on more referrals. HPs have indicated that there is a greater need for SYT than the available capacity.
- HPs have indicated that there is demand for SYT in geographic areas in which they manage housing, but that these lie outside SYT’s remit and the service is therefore unable to respond.

4.3.5 Brokerage

The evidence shows that brokerage funds are being used in the context of case management to provide for the purchase of services and resources to achieve agreed client outcomes and are used in accordance with the requirements set out in the Guidelines for the use of Brokerage Funds in Specialist Homelessness Services (HPW 2011).

In total, in the period 15 September 2016 to 15 September 2017, the SYT initiative paid $33,081.54 in brokerage (83% of the $40,000 specified in the funding agreement) (Table 2). The majority of brokerage was used to assist YP to establish and maintain their tenancy (80%); 58 YP were assisted in this way, with a median amount of $321.

Interviews with SYT support staff indicated that the initiative has been innovative in finding additional ways to assist YP with their material needs. In addition to referring YP to organisations that can provide material support and training assistance where appropriate, SYT has been sourcing key household items from online sources where people offer free goods (e.g. http://www.givit.org.au).
Brokerage has also been used to provide YP with supports to increase their social connectedness, self-esteem and general wellbeing. This has included adventure based therapy (e.g. abseiling), social outings (e.g. Cirque du Soleil, Bangarra Dance Theatre), access to psychologists where this was not possible through other channels, alternative therapies, nutrition and recreational activities (e.g. gym membership, Tai Chi).

Table 2: SYT use of brokerage 15/09/2016 to 15/09/2017

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Total brokerage ($)</th>
<th>Total brokerage (%)</th>
<th>No of YP receiving</th>
<th>Median amount ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishing/maintaining a tenancy</td>
<td>$26,435.76</td>
<td>79.91</td>
<td>58</td>
<td>320.88</td>
</tr>
<tr>
<td>Training/education/employment</td>
<td>$2,794.43</td>
<td>8.45</td>
<td>24</td>
<td>91.05</td>
</tr>
<tr>
<td>Accessing external specialist services</td>
<td>$1,801.60</td>
<td>5.45</td>
<td>20</td>
<td>50.03</td>
</tr>
<tr>
<td>Other purpose</td>
<td>$1,134.75</td>
<td>3.43</td>
<td>25</td>
<td>20</td>
</tr>
<tr>
<td>Short term or emergency accommodation (e.g. hotel/motel)</td>
<td>$915.00</td>
<td>2.77</td>
<td>5</td>
<td>60</td>
</tr>
<tr>
<td>Total</td>
<td>$33,081.54</td>
<td>100.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A number of unintended costs and benefits have arisen in regard to brokerage.

- SYT did not anticipate the high need for and costs of rubbish removal (skip, bins, handy man, tip runs). Many YP have significant hoarding and squalor issues that were unknown until visits to property were made.
- Activities, such as adventure therapy workshops and an outing to a performance of the Bangarra Dance Theatre, organised by support workers, have proven to have additional social and therapeutic benefits for YP.
- Brokerage has been used to pay for specialised counselling and participation activities (private counselling, Tai Chi, swimming lessons, gym membership), to enhance YPs mental and physical health and wellbeing.
- Transport has been identified as an important need of YP and brokerage funds have been used to contribute to driving lessons, licence and registration payments.

### 4.3.6 Support periods and tenancy sustainment

The SYT initiative is exceeding its targets for the number of support periods and the amount of time spent supporting YP. Most YP exit SYT into appropriate housing.

Based on the data from the AIHW’s SHSC for the period 15 September 2016 to 15 September 2017, a total number of 85 individual clients engaged with the SYT initiative, of which 27 were children under the age of 16.2

During this time, 89 new support periods commenced, and 31 support periods ended. The number of support periods that closed during the reporting period and for which a case management plan was in place, was 23; for 22 of these, half or more of the case

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2 Note that the SHSC records 85 participants in the SYT initiative who have open case plans for the reporting period, while the SRS and OASIS record 80. Close inspection of SRS data shows that there are 5 participants included in the SHSC data from whom no case plan was opened and who did not engage with SYT on an ongoing basis.
management goals had been met, suggesting that clients largely exited from the initiative because they achieved their goals, rather than due to disengagement. **Importantly, 30 of the 31 clients whose support period closed were exited into secure and sustainable housing** (Table 3).

### Table 3: Measures related to distinct support periods 15/09/2016 to 15/09/2017

<table>
<thead>
<tr>
<th>Measure</th>
<th>Adults</th>
<th>Children</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number support periods ended during the Report Period</td>
<td>22</td>
<td>9</td>
<td>31</td>
</tr>
<tr>
<td>Number support periods commenced during the Report Period</td>
<td>50</td>
<td>39</td>
<td>89</td>
</tr>
<tr>
<td>Number open support periods at the end of the Report Period</td>
<td>29</td>
<td>30</td>
<td>59</td>
</tr>
<tr>
<td>Number support periods closed during the Report Period where a case management plan was in place</td>
<td>21</td>
<td>2</td>
<td>23</td>
</tr>
<tr>
<td>Number support periods closed during the Report Period where a case management plan was in place and half or more of the case management goals were met</td>
<td>20</td>
<td>2</td>
<td>22</td>
</tr>
<tr>
<td>Number support periods that ended with the client housed in secure and sustainable housing</td>
<td>21</td>
<td>9</td>
<td>30</td>
</tr>
<tr>
<td>Number new support periods where the client identified as sleeping rough or in non-conventional accommodation immediately before presentation</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Number new clients experiencing chronic homelessness immediately before support</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note: children are included in the adult case plans.*

Source: SHSC report.

Data from the SRS client and case management interface, which records the time spent supporting the 80 clients who had open case plans with SYT during the reporting period shows that SYT recorded a total contact time of 7,819 hours and 48 minutes for working with clients who had a case plan opened during the period. This comprised 3,601 hours and 3 minutes of contact time, 3,108 hours and 50 minutes of case work time and 1,109 hours and 55 minutes of travel time (Table 4).

### Table 4: Time recorded working with clients engaged in SYT

<table>
<thead>
<tr>
<th>Type of engagement</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact time</td>
<td>3601 hr 3 min</td>
</tr>
<tr>
<td>Case work time</td>
<td>3108 hr 50 min</td>
</tr>
<tr>
<td>Travel time</td>
<td>1109 hr 55 min</td>
</tr>
<tr>
<td>Total recorded time</td>
<td>7819 hr 48 min</td>
</tr>
</tbody>
</table>

SYT is contracted to provide 40 hours of support per client (contact time plus case work time). Thus, the combined contact and case work time for the period examined of 6,709 hours and 53 minutes considerably exceeds contracted hours (80 client x 40 hours = 3,200 hours).
The average duration of engagement by the 30 clients whose support periods were closed during the reporting period was 6.2 months (189.77 days). Of these, 5 YP (17%) received support lasting 0–8 weeks; 11 (37%) received support for 2–6 months; and 14 (47%) received support for 6–12 months or more).

4.3.7 Social wellbeing outcomes

Findings from the PSE and interviews attest to YP’s social wellbeing outcomes. Findings are largely positive, attesting to the fact that the SYT initiative provides the intended outcomes in housing but also in other domains. Detailed findings are provided in section 8 of the report.

4.4 Service evolution and refinement

The SYT initiative has evolved and a number of changes have been made since its inception in order to fine tune the service.

- The screening and review forms have been modified to better suit requirements and reviews of case plans are now undertaken six-weekly. Initially, SYT focused on screening to determine YP’s support needs, but this has changed to focus on reviewing YP’s improved capability and successful transition.

- SYT’s relational model has been refined to include persistent and proactive outreach to reach out to YP who may be reluctant to engage. SYT’s outreach approach takes care to strike a balance between being supportive and present and giving YP ownership over their decision to engage.

- Changes were made to the referral form used by HPs (provided by SYT).

- After initially receiving many crisis referrals, support workers have worked to educate HPs to refer early on, at the first sign of trouble, or to refer all eligible YP to be screened in order to identify what support is necessary.

- Use of brokerage has been expanded to provide YP with a broad range of supports to enhance their general wellbeing and social connectedness (e.g. social outings, adventure based therapy, alternative therapies).

4.5 Factors identified as critical to the success of SYT service model

The Evaluation, based on the comments from the qualitative interviews, identified the following factors as critical to the success of the SYT model. Critical success factors for the SYT initiative relate to the service model and the way in which SYT works with YP. Many of the factors identified for the Evaluation align with best practice for tenancy sustainment programs identified in the literature.

- Support once the social housing tenancy has commenced to sustain YP’s tenancies and/or facilitate transition to more sustainable and appropriate housing. SYT fills a gap in the service system, as it is a housing focused service that works with YP after they enter social housing; the majority of other specialist homelessness services for YP advocate to get YP into social housing, but support often drops off once housing is achieved, contributing to tenancy failure. There is a lack of support services for the cohort once they are housed, and existing services such as health and welfare support have long waiting lists. SYT aims to support YP
by developing their life skills and increasing their ability to sustain their tenancies or
transition to more sustainable accommodation.

→ **Early intervention.** The SYT service model, together with HPs, aims to identify YP at risk of homelessness and intervene early to resolve tenancy issues before they become serious or overwhelming. Interviews showed that the focus on early intervention over crisis management is critical to the success of SYT. Engagement when a tenancy is at risk of imminent failure makes it difficult for SYT to put in place the required supports in time and can result in tenancy failure; consistent with this, all SYT support workers and HP staff interviewed highlighted early intervention as contributing to the success of the initiative. The referral process, which identifies YP who may need SYT case management support at the commencement of the social housing tenancy or at the first sign of difficulties, was highlighted as a successful component of the initiative. Routine referral of YP awaiting social housing assistance had added benefits as sometimes YP who were identified by HPs as being low risk, were found by the SYT support staff to have risk factors that may lead to difficulties with the tenancy later on and early intervention allowed these risk factors to be addressed. This is consistent with good practice for tenancy sustainment services showing the importance of support during the allocations phase and early intervention (see section 3.3).

→ **Needs based support.** SYT’s ability to provide support in accordance with needs and strengths of the YP contributes to its success, allowing for flexible support that focuses on outcomes rather than number of support periods (throughputs).

→ **Holistic approach to supporting YP that facilitates transition to independence.** SYT takes a holistic approach to supporting YP, inclusive of all factors, such as developing life skills, improved wellbeing, mental health, alcohol and other drugs (AOD), legal, income, physical health, social connectedness, caring roles, relationships, navigating systems (e.g. Centrelink, job services, health care, utility providers, phone providers) and other goals that ultimately enhance a YP’s ability to sustain and maintain their housing and broader transition to independence.

→ **Relationship building with HPs.** Developing and maintaining good working relationships with HPs is critical to SYT’s success. Interviewees indicated that SYT’s proactive and collaborative approach had improved HPs experience of working with a support provider, made HPs more comfortable housing YP, and assisted in breaking down barriers between HPs and YP. The process, early on in the initiative, of support workers shadowing HP staff facilitated mutual understanding of the processes, requirements and priorities of the two services, as well as initiating positive working relationships. HP interviewees said they appreciated being asked what they required to sustain tenancies and facilitate the best possible housing outcomes. This built good will, which has been further enhanced by SYT demonstrating that they work to ensure tenancies are sustained and YP become good tenants, which lightens the workload for HPs.

→ **Relationship triangle of HP, SYT support staff and YP.** From HPs perspective, a lack of engagement from YP often contributes to tenancy failure. A critical component of support through SYT is to build the capacity of YP to communicate with HPs, understand housing processes (e.g. reviews) and understand tenant rights and responsibilities. Rather than doing this work for YP, SYT staff work in partnership with HPs and YP to develop YPs capacity to advocate on their own behalf.
Mobile support. Mobile support enables SYT workers to offer practical and directed support where and when this is required. YP interviewed indicated they found this to be an important aspect that positively distinguished SYT from other services. Mobile support enables SYT support workers to visit YP in their homes, to provide practical assistance on site, identify any other issues relating to the home, and makes the service accessible and available to YP.

Voluntary service. SYT is a voluntary service; this differentiates it from other services (statutory) and empowers YP, many of whom have previously only experienced mandated services and case management. YP interviewed indicated that SYT being voluntary gave them the sense the service was there for them and worked to support their best interests. This contributes to YP’s positive attitude towards engaging with the initiative and its case workers and facilitates engagement.

Flexible brokerage. Interviewees identified flexible brokerage as a critical component in the program’s success. Brokerage was used to support YP’s material needs (e.g. food, transport, furniture, whitegoods) and their general health and wellbeing (e.g. access to alternative health treatments, social activities). In this way, brokerage assists in achieving case management goals.

4.5.1 Ways of working with YP

[My case worker] is like a professional friend. (YP)

SYT’s approach to working with YP is a critical success factor in the initiative.

Holistic and relational approach to working with YP. SYT has a strong focus on guiding therapeutic relationships and role modelling. Key elements in the working relationship between SYT support workers and YP are persistence, reliability, intimacy and respect. YP frequently identified their relationship with the SYT workers as one of the best aspects of the initiative, as it gave them someone trusted to turn to for the advice and support that was generally lacking in their lives.

Persistent and respectful outreach. SYT employs a model of persistent and respectful outreach. This is a critical success factor in engaging YP either at intake or when they disengage from the initiative. The rationale behind this is that YP may initially be reluctant to engage because of previous experiences with HPs, SHS and other services, or because they do not know what SYT is about. If YP disengage from SYT while in the initiative, this may be due to other factors in their life taking priority or them being overwhelmed. Persistent and respectful outreach can then act as a mechanism to let the YP know that support under the SYT initiative is still available to help them should they need it.

I had a bit of a housing issue and when I was having an interview with Housing they referred me to SYT... that’s when [my case worker] came out and was trying to get my number and meet me at home. But most of the days I was never there, so it was quite a bit of chase. I was like ‘Who is this [name of case worker]? What is going on? Am I in trouble?’ Because I didn’t really understand...Then one day he actually came and knocked on the door and I was like ‘Who are you? What are you doing here?’ But he seemed pretty cool...When I started realising that for once someone’s actually going to be there [for me]— because my whole entire life I’ve just been by myself and I’ve just do things myself so I didn’t really have the motivation of somebody pushing me and somebody giving me positive energy and words—so I think once I started going to him and he was just helping with everything and I had someone I could talk...
to and rely on, then I started getting more comfortable...Now we have a pretty good relationship, which is awesome. (YP)

- **Case management which is strengths focused, goal directed and regularly reviewed.** Regular review of case plans against goals allows support to be responsive to YP’s changing needs. Regular review of goals and progress allows YP to reflect and acknowledge their progress and growth helps YP to take responsibility for their actions and the solutions to the challenges that present in their lives.

- **Focus on transition and exiting from the initiative well.** SYT has a focus on ensuring that YP transition from the initiative well and to ensure they continue to be able to sustain and maintain their tenancy and do not become homeless. If a YP is unable to sustain their social housing tenancy, wherever possible, SYT support workers will work with the YP to ensure they have other appropriate housing. For example, in one instance SYT provided temporary accommodation for a YP until a place in supported housing for people with an intellectual disability became available. In another instance, the YP lost their social housing due to difficult behaviours and SYT exited them into supported shared accommodation and initiated a new application for social housing.

  The regular reviews undertaken as part of the case management and with HPs assist to identify YP’s readiness for transition to independence. After a YP has closed their engagement from the SYT, the initiative, so long as it exists, will still be open to them for occasional support or advice as required. This is underpinned by the relational approach and helps avoid tenancy failure.

- **Relatable support workers.** SYT employs support workers to whom YP can easily relate and who are able to meet YP at their level.

### 4.6 The SYT initiative is replicable in other locations

The evidence from the data sources examined for the Evaluation indicates that the SYT initiative is being delivered in ways that meet the needs of YP in social housing, is effective in sustaining their tenancies, provides much needed support in other areas of YP’s lives, and increases their capacity for independence.

The SYT service model has proven to be robust in operation and is based on components identified in the literature as good practice for tenancy sustainment programs and case management for YP at risk of homelessness. Evidence from the interviews with HPs indicated that there is a need for similar tenancy sustainment initiatives in other geographic locations and the SYT model is well placed to be implemented in other areas.

A new contribution brought to tenancy sustainment services for YP at risk of homelessness is the focus placed by the SYT initiative on the relationship triangle between SYT support staff, YP and HPs. This is central to the success of the initiative and should be emphasised in any proposed replication of the SYT model.
5 SYT client profile

This chapter provides a profile of the YP accessing the SYT service in the period from 15 September 2016 to 15 September 2017.

5.1 YP support needs

The Evaluation identified that YP have a range of housing and non-housing related support needs.

5.1.1 Housing related support needs

Reluctance or refusal to engage with HPs is a key obstacle to tenancy sustainment and is an area where many YP require support.

During interviews, HPs identified managing behaviour, noise, communication with HPs, rent arrears and fulfilling tenancy responsibilities in relation to cleanliness and upkeep of the property as the main issues with which YPs require support. The priority for HPs is that tenants comply with tenancy requirements and legislation. HPW has zero tolerance of illegal activities.

This is confirmed by data from HPs’ referrals to SYT. The average score received by YPs interviewed for the Evaluation, whose needs were formally assessed on the referral form (N=13), was a “2—can be better.” However, the scores ranged from “1—can be a lot better” to “4—doing well.”

Referral reasons, where stated, included rent arrears, lack of ability to maintain the home, behavioural issues, complaints from neighbours, mental health issues, lack of general living skills, lack of contact with the HP, and a need to better understand tenancy processes and responsibilities.

Figure 2: Housing Provider assessment of tenant situation

[Diagram showing assessment results]
Data from the PSE, where HPs are asked to rate YP’s progress at each review point corroborates these findings. HPs’ assessments of tenant’s situations steadily improved over the time that YP were supported by the SYT initiative. The data shows a significant increase in the proportion of YP who were rated as ‘doing well/great’ from 22 per cent at the initial assessment to 78 per cent at the final review. Complementary to this, the proportion of YP whose overall progress in the PSE domains was rated ‘could be better/could be a lot better’ reduced from 54 per cent at the initial assessment to 22 per cent at the final review (Figure 2). This attests to the effectiveness of SYT, from the perspective of HPs, in facilitating positive outcomes in relation to tenancy sustainment.

5.1.2 Non-housing related support needs

HPs and support workers interviewed for the Evaluation identified a broad range of life domains with which YP require support to successfully sustain their tenancies and transition to independence:

- practical supports (cooking, cleaning, budgeting, transport)
- general life skills
- link with appropriate services (e.g. mental health, AOD, health care)
- financial assistance
- social skills, social connectivity and relationships
- advocacy to navigate systems
- education and skills
- employment
- legal
- DFV
- trauma.

This is corroborated by data from the PSE, which captures the self-assessed support needs of YP and shows that YP prioritise support in a number of life domains beyond housing. Results (see Figure 3) show that YP rated meeting basic needs as the most important support priority (83%) upon entering the initiative, but this almost halved (45%) by the first review, demonstrating the effectiveness of SYT in meeting YP’s material needs. Mental wellbeing was the second highest support priority at initial assessment and spiked at 67 per cent at the first review. After this mental health support priorities dropped, but remained relatively high compared to the other support priorities (see section 9 for more on mental health).

Data shows a dramatic increase in YP’s life skills as a result of receiving SYT support (53% support priority at initial assessment and a low 28% at exit). Only the connection domain showed greater improvement (42% down to 11%).
5.1.3 Types of support required for specific groups

The interviews asked HPs and SYT staff to identify whether specific groups required specialised support. Interviewees noted that additional transparency and proactive communications are important when working with special groups and that the work was often long term as it takes time for YP to establish the resources to manage their tenancies.

➔ Aboriginal and Torres Strait Islander people. SYT has a high proportion of Indigenous YP. Interviewees indicated that Aboriginal and Torres Strait Islander YP responded well to the types of support that were provided to non-Indigenous YP: a focus on relationships that are respectful, reliable and intimate. Outreach was identified as being important, early successes contributed to deepening the therapeutic relationship (the close and consistent relationship between a healthcare professional and a client is the means by which a therapist and a client hope to engage with each other, and effect beneficial change in the client). Where available, SYT offers culturally specific specialist services if available; this has had mixed uptake with Indigenous YP.

➔ Disability. YP with a disability have often been under-supported and can be at higher risk of being evicted due to difficulties managing relationships, maintaining Centrelink payments and negotiating systems. SYT supports a number of YP with an intellectual disability. Interview data shows that intellectual disability can be a contributing factor in tenancy failure and that additional specialist supports may be required.

➔ CALD. SYT supports only a low number of YP from CALD backgrounds. Interviews indicate that cultural and language barriers pose problems to effective service delivery to this cohort.
5.2 More clients were assisted than planned

In the year 15 September 2016 to 15 September 2017, the SYT initiative:

- recorded contact with 111 distinct persons
- opened case plans for 80 people; 59 of these were in the target age range (16–25), the remaining 21 were dependents
- the total number of recorded contacts with clients with open case plans for the period was 3,938.

This exceeds the client target of 72 users per annum.

Interview data shows that assisting the parents had positive effects for the children; SYT support helped parents access medical, educational and other supports needed by the children.

Of the YP with open case plans, 35 (44%) were male and 45 (56%) were female. The age distribution of YP is shown in Figure 4. [Note the outlier in the 26+ category is for an elderly person who is the dependent of an SYT YP.]

**Figure 4: Age distribution of SYT clients with open case plans 15/09/2016–15/09/2017**

5.3 SYT engaged with a range of clients consistent with the target groups

SYT supports a range of YP, who meet eligibility criteria for the groups targeted under the initiative. The high proportion of Aboriginal and Torres Strait Islander YP is notable.

- Nearly half of YP (49% or 39 individuals) who had an open case plan during the period identified as either Aboriginal or Torres Strait Islander or both.
- Four individuals with open case plans (5%) identified as CALD.
- Of YP with open case plans, 73 (91%) were from Australia, 2 (2.6%) were born in other countries, and for 5 data was not recorded or missing.
6 Efficiency of service delivery

This chapter examines the cost of delivering the SYT initiative and whether services are being delivered within budget.

6.1 Services delivered within allocated budget

Total funding for the SYT initiative under the funding schedule is $973,898 (excl. GST); and per annum is $632,599. Additional funding of $25,000 is available for establishment costs, database development, communications and publishing.

Based on OASIS acquittals, the annual cost for providing SYT in the period 1 October 2016 to 30 September 2017, the SYT initiative received $634,074 in total funding (funding provided by the department plus an additional $1,475 in the third quarter of 2017 from an external grant) and expended $620,803, resulting in a surplus of $13,271 (Appendix 9).

Figure 5: SYT cost against funding 30/09/2016–30/09/2017

6.2 SYT offers good value for money

The average cost per client for whom a case plan was opened between 15/09/2016 and 15/09/2017 (n=80) was $7,760.

The cost of delivering the SYT initiative compares favourably with other homelessness programs (Table 5). The average cost of various homelessness programs is documented in the literature and in evaluation reports. While no program was identified that is exactly like the SYT initiative, comparisons show that while SYT is more costly to provide than general tenancy support services (which do not offer case management), it is significantly more cost effective than Youth Foyer models (national data, excluding SA and NT) which have similar target groups or the Springboard initiative (Victoria).

Youth Foyer models are transitional housing responses that can help YP compete for existing job and housing opportunities. Youth Foyer models have a high cost of services delivery, as the model provides relatively intensive support and generally requires a purpose-built facility with high capital. Youth Foyer models are only suitable for YP who are ready to engage in education or training and are conditional upon the YP engaging in these activities. However, many YP require a period of housing stability in which to
address their underlying issues and acquire necessary life skills before they can turn their attention towards education and training.

While Springboard’s focus on employment and training differs from SYT, the Springboard service model has many similarities to SYT. Springboard has a focus on relationship centred, holistic case management and the cohort, YP with complex needs who are at risk of homelessness, is similar to the SYT cohort.

Springboard assists YP aged 16 to 20 on Victorian Custody or Guardianship orders who are in, or have recently left, residential care and many of whom are at risk of homelessness. The focus is to assist these YP to gain secure, long-term employment by re-engaging with appropriate education, training and employment opportunities and providing intensive, youth-focussed support. Community-based organisations with specialist skills in supporting YP with education, training and employment deliver the program across the state. Springboard does not deliver mobile support.

The Queensland HomeStay Support initiative is a tenancy sustainment program focusing on early intervention and post-crisis intervention for people at risk of homelessness who require medium term (approximately six months) support to maintain their tenancy. Like SYT, Homestay offers mobile support (active outreach). A key difference between HomeStay and SYT is that the former provides on average two months support for clients (ARTD Consultants 2014: ix), while SYT provides on average 6.2 months per closed support period, accounting for the difference in cost.
### Table 5: Cost comparison of SYT initiative with other homelessness programs calculated in 2017 dollars

<table>
<thead>
<tr>
<th>Program name</th>
<th>State/Territory</th>
<th>Average cost/client in 2017 dollars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support to maintain an existing social tenancy*</td>
<td>National data (excluding SA and NT)</td>
<td>$1,563</td>
</tr>
<tr>
<td>HomeStay Support**</td>
<td>QLD</td>
<td>$2,309</td>
</tr>
<tr>
<td>Supported accommodation services for women*</td>
<td>NSW, VIC, SA, WA</td>
<td>$2,486</td>
</tr>
<tr>
<td>Tenancy support services*</td>
<td>NSW, VIC, SA, WA</td>
<td>$2,899</td>
</tr>
<tr>
<td>Specialist Homelessness Services **</td>
<td>QLD</td>
<td>$2,874</td>
</tr>
<tr>
<td>Supported accommodation services for single men*</td>
<td>NSW, VIC, SA, WA</td>
<td>$4,299</td>
</tr>
<tr>
<td>General homelessness support to access/maintain a social housing tenancy*</td>
<td>National data (excluding SA and NT)</td>
<td>$7,045</td>
</tr>
<tr>
<td>SYT initiative</td>
<td>QLD</td>
<td>$7,760*</td>
</tr>
<tr>
<td>Street-to-Home services*</td>
<td>NSW, VIC, SA, WA</td>
<td>$8,514</td>
</tr>
<tr>
<td>Transition from institutional setting into social housing*</td>
<td>National data (excluding SA and NT)</td>
<td>$8,679</td>
</tr>
<tr>
<td>Support to help Indigenous people access/maintain a housing social tenancy*</td>
<td>National data (excluding SA and NT)</td>
<td>$11,584</td>
</tr>
<tr>
<td>Street-to-home/Common Ground*</td>
<td>National data (excluding SA and NT)</td>
<td>$11,699</td>
</tr>
<tr>
<td>Springboard Initiative#</td>
<td>VIC</td>
<td>$18,129</td>
</tr>
<tr>
<td>Support to help YP access/maintain a social housing tenancy*</td>
<td>National data (excluding SA and NT)</td>
<td>$22,094</td>
</tr>
<tr>
<td>Supported accommodation for YP, Youth Foyer model*</td>
<td>National data (excluding SA and NT)</td>
<td>$25,193</td>
</tr>
</tbody>
</table>

*Baldry et al. 2015; *Zaretzky and Flatau 2015: 53; **ARTD Consultants 2014: 43; *Zaretzky et al. 2013: 178; ++Productivity Commission 2017

*This figure is calculated by dividing the number of YP for whom a case plan was opened in the reporting period (N=80) by the total expenditure for the period.

### 6.3 Conclusion

SYT is effective in sustaining YP’s tenancies and preventing homelessness, and the cost of delivering the initiative is moderate for the intensity of the services provided, when considered against other programs aimed at the target group (YP with complex needs who are at risk of homelessness).

While not calculated for the Evaluation, it is likely (as demonstrated by the literature), that the cost of sustaining YP’s tenancies is partly or wholly offset by cost savings to other arms of government (e.g. legal and health costs) (compare section 3.2). Due to clients’ young age, the potential cost offsets resulting from housing stability and the benefits thereof, are likely to be considerable over the lifetime of the cohort.
7 Housing Provider perspective

SYT fills a gap in that is sustains tenancies where other services 'dump and run'.

(HP)

This section of the Evaluation draws on the qualitative interviews to report on HPs views of the SYT initiative. All HP representatives interviewed were very positive about SYT and noted that the good working relationships (formally and informally) between SYT and HPs were a critical ingredient in the success of the initiative.

7.1 The HP–SYT relationship is critical to the success of the initiative

→ Partnership approach. HPs saw their relationship with SYT support workers as qualitatively different from other services as it was non-adversarial. The partnership was seen to be critical to the success of the initiative and assisted in breaking down the ‘us and them’ mentality that had existed in some instances before SYT came into existence. Shared plans, frequent and transparent communication regarding YP’s strengths and progress are central to the SYT support worker–HP partnership. A strong positive for HPs is that SYT support workers facilitate better communication between YP and HPs. As a result, YP are more aware of their tenancy responsibilities and SYT helps them in practical ways to fulfil these tenancy responsibilities, thereby lightening the load for HPs.

→ Communication. All HPs identified good communication, as practiced by the SYT initiative, as an important factor in building successful relationships between HPs and SYT support workers.

→ SYT fills a support need for YP. HPs were very aware that YP have a range of support needs additional to housing that need to be addressed in order to successfully sustain a tenancy. While HPs expressed that they would like to assist YPs in this regard, the size of HP portfolios (usually hundreds of properties per worker) makes this impracticable. HPs stressed that SYT fills a gap in the service system (tenancy sustainment service for YP) and that working with SYT support workers makes it easier for HPs to work with YP to sustain their tenancies. As a result, Community HPs are more comfortable offering tenancies to YP if they know they are supported by SYT. All HPs felt that duration of tenancy sustainment among YP had increased due to SYT.

→ Reliable and responsive service. HPs felt that SYT differs from other services as it tries to ensure the needs of HPs are met. The SYT initiative understands HPs’ priorities, is responsive, has good communication and transparent processes.

→ Shadowing. HPs highlighted the shadowing process, in which SYT support workers observed HP staff on site for a day during the establishment phase of the initiative, as being important for establishing support for SYT and learning on both sides. Shadowing allowed HP workers to understand the service, helped SYT support workers to understand the complexities that come with being a landlord, and laid the foundation for good relationships between the two services.

[SYT] brought the whole team in, introduced themselves to us and asked what we wanted from them, which is a very different approach to how we normally deal with support agencies and agencies that can help us. It’s normally ’We’re
too busy, we can't do this’ ... So part of [SYT’s] success ... was developing that initial contact, that initial relationship building with us. (HP)

→ Referrals. Referrals usually take place at the point of sign-up to social housing, or at the first signs of tenancy related trouble, enabling SYT support workers to provide early intervention. HPs noted that early intervention was important for tenancy sustainment and to ensure that difficult behaviours exhibited by YPs do not continue on into adulthood.

Generally, people who are referred to us ... come to us in a state of crisis. So, it's at that initial tenancy sign up that I would make [a referral to SYT]. Even if they don't end up needing it, it's better to have that in place and then not need it...It just gives them the best chance in sustaining that tenancy from the get-go. (HP)

7.2 The SYT initiative contributes to positive client outcomes

I think it's easier to change [the trajectory of] a young person's life, than it is a person who has been living this really unhealthy way for most of their life. (HP)

HP interviewees noted a range of beneficial outcomes for YP that resulted from their engagement with SYT. This included:

→ tenancies are more likely to be sustained
→ YP engage better with HPs
→ better outcomes in the event of a tenancy failure, as transition plans are put into place
→ social support means YP are not isolated
→ advocacy on behalf of YPs means their needs are better met
→ strong personalised support that is professional meets YPs’ and HP’s needs
→ SYT contributes to employment and training outcomes
→ YP have increased confidence to take control over their lives
→ SYT supports appropriate engagement with family and friends
→ SYT helps YP navigate the system.

7.3 Housing Provider perceptions of critical success factors

I've been in the department for over four years now and I've never seen a support service this hands-on, this engaged, this excited to be involved with their clients and [have] never seen these kinds of successes. (HP)

HPs identified SYT as an intentional and focused project aimed at sustaining YP's tenancies. From HP's point of view, the following are critical to the success of the initiative:

→ SYT support workers are able to reach out to and get a response from YP where HPs often struggle
→ SYT support workers are responsive and true to their word
→ good communication
→ good relationships between HPs and SYT support workers
triangle working relationship HP, YP, SYT support workers
SYT support workers are proactive and assertive in addressing issues
ability to respond quickly to referrals and issues
transparent processes
advocacy within the system
SYT staff have the appropriate skills to address YP’s needs
SYT exhibits rigour in dealing with YP and sets clear expectations and measurable goals
SYT gets YP to take responsibility for their actions.

Overall, HP comments show that SYT staff have high levels of professional and therapeutic skills which facilitate a responsive and client-centred approach that is very effective at engaging YP.

7.4 Systems issues contribute to tenancy instability and homelessness among YP

HPs identified housing affordability and lack of social housing as structural factors that contributed to high levels of housing stress and homelessness among YP. It is not financially viable for YP to move out of social housing until they have a reliable and adequate source of income.

HPs identified the following systems issues that affected YPs ability to achieve and sustain social housing:

the application process for social housing can be onerous and time consuming and some YP struggle to complete the application
YP do not always understand the need to complete housing reviews and the implications of not doing so
limited ability of the system to keep track of YP’s movements if they do not notify of a change of address; this can also affect eligibility for housing
process of assessing rent can be confusing to YP
lack of support services after a tenancy has commenced
housing is not a social service and housing workers do not have the skills or capacity to offer social service responses (e.g. health care, education, employment, social welfare services)
the Information Privacy Act 2009 is a barrier to systems integration, effective service delivery and referrals
lack of funding means support services cannot function as effectively as they should.

7.5 Challenges and opportunities

HPs identified the following challenges and opportunities.
The complexity and fragmentation of the support service landscape makes it difficult for HPs to retain information about different services and appropriately refer YP to these. There are many pilot programs, and many services have caveats—some are restricted to certain geographic areas, provide only certain services, or support is linked to a particular housing tenure). SYT support staff have good knowledge of the service landscape, which addresses this issue.

It can be a challenge to ensure the connection between HPs and support workers delivering SYT remains current and active and that all relevant HP workers know about the initiative and make referrals when appropriate. Shadowing helps with this, but ongoing engagement is required.

SYT does not cover all geographic areas in which the HPs operate and there is an opportunity to expand the initiative to meet the need for tenancy sustainment services in these locations.

A key challenge for HPs it that YP are often reluctant to engage; SYT assists in this process.

SYT is now operating close to capacity and can take on fewer new YP, yet there is still high demand for the service.

7.6 Service evolution

The main area of service evolution was in relation to the referral process. Some of the early referrals did not work out due to client profile and referrals not being made early enough. As a result, HPs now strive to make referrals either at social housing application stage or at the first sign that the social housing tenancy is encountering trouble.

7.7 Suggestions for improvement

HPs identified a need for greater capacity to provide tenancy sustainment services such as the SYT initiative and within the housing system. HPs indicated that SYT had proven successful from their point of view and hoped the initiative would continue as it filled a gap in the service system.

7.8 SYT and the wider service system

HPs identified the following opportunities for further integration between SYT, HPs and the wider service system.

Partnering with Child Safety services, Department of Child Safety, Youth and Women to support YP in care or getting ready to exit care but suitable for independent living would ensure YP understand how to live independently and build skills to sustain their tenancy.

The evidence gathered for this Evaluation and evidence from the literature suggests that a very high proportion of YP already living in social housing experience mental health issues in some form. Ongoing monitoring of YP’s mental health needs and integration with specific mental health supports would increase YPs’ ability to sustain their tenancies (see also section 9).
Case study: Housing Provider perspective

Before this program I was always really sus if a young person was referred to me. I’ve just seen too many young tenancies fail. They’re hard to manage and they don’t engage well with us.

As a result of SYT, the tenancies we have are more likely to be sustained and are being sustained well. SYT is almost like a conduit between us and the tenant. A lot of times when we as housing workers have to deal with a young tenant they may have issues with any form of authority, and of course they see us as an authority figure. If we’re calling them relentlessly, putting notes under their door, then they just disengage. But with SYT supporting them I just found that just being able to have normal conversations about rent arrears, or behaviour and things like that is just so much easier.

One of the biggest successes was a client who did not want to engage at all. We conducted 17 home visits and made about 74 phone calls. He wasn't paying his rent and was 15 weeks in arrears. As a last resort we asked SYT to go in and, tenacious as anything, they kept going around to his place, dropping off calling cards, and he eventually engaged with them the day before QCAT, the day before he was going to lose his tenancy. I had said to him the week before: ‘Alright, with the help of SYT I will give you a list of things that I need you to comply with and then I will withdraw the QCAT application’. With the SYT worker’s help every single thing was complied with over and above what we asked. She took him to Centrelink, she took him to the doctor to get a mental health plan, she impressed upon him to stop smoking drugs at the unit and dealing, and she helped him to get his pet registered, de-sexed and his pet application approved. Now his rent is up to date, there have been no complaints and the lawn was mowed the last time we were around.

SYT having the right staff who are professional and able to connect with young people has been really important. Also, SYT workers understand how we work and what our priorities are. So we’ve been able to talk to them about the problems with tenants and they accept those problems are real and try and address them.

[This is a composite case study derived from interviews with a number of Housing Providers.]
8 Client outcomes

A lot of the times they [YP] don't have families to rely on. They don't have parents to rely on, and I would just explain to them that [SYT] are a very, very kind welcoming non-judgmental service. They can help you with everything. Like absolutely anything you need. Like mental issues. They’ll help you with housing issues. I would strongly recommend [SYT], because honestly when I first met them ... I was thinking that the organisations just do what they need to do so they can get their books signed, and that’s not the case. They really go out of their way to help you and to make sure you can sustain your housing. It’s just a good life. I would definitely recommend [SYT] to any young person, because I reckon it would be a huge relief off their shoulders just to have someone there to help them. Someone they can talk to about things. (YP)

This chapter provides evidence on client outcomes drawing on a variety of data sources and highlights YP’s perceptions of being engaged in the SYT initiative.

All stakeholders reported a broad range of positive outcomes for YP, related to housing and in other life domains, as a result of engaging with SYT.

8.1 YP face a range of challenges to sustaining tenancies

SYT support staff and HP interviews showed that YP face many barriers to successfully sustaining tenancies; lack of communication with HPs, lack of knowledge about HP expectations and tenancy responsibilities, behavioural issues, limited life skills and mental health topped the list. Consequently YP require support in a broad range of life domains.

→ Knowledge of HP expectations, tenancy rights and responsibilities. HP and SYT interviewees indicated that YP have a poor understanding of their tenancy rights and responsibilities and what was expected of them as a tenant. YPs explained that they struggled to understand the language used to communicate their tenancy rights and responsibilities to them and were often not aware of the processes required (e.g. for requesting maintenance).

→ Communication with HPs. SYT support staff and HP interviewees indicated that lack of communication with HPs was a key issue in tenancy failure. This included YP not checking the letterbox and therefore not completing housing reviews, not communicating with HPs about household changes (e.g. income, household members, children, modification, condition) and not responding to complaints.

→ Life skills. Due to previous experience many YP lack life skills, such as budgeting, cleaning, cooking, communicating with services and utilities providers and require practical support to learn these skills.

→ Financial issues. Financial difficulties, such as suspended payments, debt, rent arrears and lack of money for essential items, often contribute to tenancy failure.

→ Mental health. SYT support staff and HP interviewees identified mental health as a key issue with which most, if not all, YP require support and which has a strong influence over YP’s ability to sustain tenancies. This was corroborated by the interviews with YP, the majority of whom identified mental health as an issue that contributed to their difficulties in managing and sustaining tenancies.

→ Behavioural issues. HP interviewees stressed strongly that behavioural issues, such as noise and illegal activity, were key factors in tenancy failure among YP.
→ **Difficult relationships.** The nature of YP’s relationships and their ability to manage these can result in damages, noise and conflict and affects tenancy sustainment (e.g. previous or current violence or domestic and family violence); unauthorised occupants staying in the property or not using the property on a continuous basis; unwanted visitors; stressful/and or disrespectful relationships. Young women, especially mothers, are often victims of DFV and need practical, mental health and legal support.

→ **Cleanliness, hoarding and squalor.** Clients’ history before long term housing, such as homelessness or intergenerational behaviours, can create ‘survival priorities’ that reduce the importance of small tasks such as cleaning, taking rubbish to the bin, washing dishes, food scraps, cleaning clothes. This can be compounded by mental health issues, such as anxiety and depression.

→ **Housing ‘fit’ and complex neighbourhood dynamics.** Complex neighbourhood dynamics, discrimination or victimisation by neighbours and poor housing fit due to poor allocation (e.g. accommodating vulnerable young women in boarding houses) contribute to tenancy failure.

→ **Confidence.** A lack of confidence negatively affects many aspects of YP’s lives and their ability to sustain tenancies, including their ability to assert boundaries (cultural beliefs); effective communication with services, friends and family; and peer pressure.

→ **Social isolation.** Interviewees from all groups (YP, SYT, HP) identified social isolation as a key barrier for YP. Social isolation negatively affects YP’s mental health and means they lack support networks for advice and practical assistance.

→ **Cultural factors.** Cultural factors and obligations (e.g. lending and giving money, accommodating relatives and friends) can lead to financial stress and breaches of tenancy requirements.

→ **Drug use and illegal activity.** HPW has a zero tolerance policy regarding drug use and illegal activity on the property. Yet many YP struggle with these issues, either themselves, or by way of visitors.

### 8.1.1 YP’s views of barriers to tenancy sustainment

→ YP interviewed identified a range of difficulties with their housing prior to their involvement with SYT. These included:

→ unsuitable housing (e.g. boarding house, poor condition of housing, pest infestation, mould)

→ risk of eviction due to rent arrears or tenancy breaches

→ safety concerns (physical and mental), due to, for example, violent neighbours, bullying by fellow tenants in boarding houses, drug use/illegal activity in or near housing

→ lack of understanding of tenancy processes and their tenancy responsibilities

→ reluctance to engage with HPs due to prior negative experiences and/or a lack of confidence to communicate with HPs

→ difficulties making rent payments.
8.1.2 Structural and institutional issues that affect tenancy sustainment

Interviewees identified a number of structural and institutional issues that affect YP’s ability to sustain their tenancy and transition to independence. These include:

→ employment services not engaging with YP on their level or meeting their needs
→ Child Safety services not being responsive to YP’s needs; lack of transition planning to independence from child safety; lack of life skills in YP who have been in care
→ other support services required by YP being at capacity or having long waiting times.

8.2 SYT contributes to positive housing related outcomes for most clients

I was so stressed out, just so bothered. I was so down at the start. Like I just didn't know what to do. I was like running like a headless chook and then halfway through, the stress was slightly off my shoulders and it was starting to get all in place. Our lives are just better now. So much better. I never thought we'd get like this even in four or five years. (YP)

As intended, the SYT initiative improved housing related outcomes for most YP.

8.2.1 YP feel better able to sustain their tenancies

All YP interviewed who had sustained their tenancies identified that their housing situation had stabilised and improved as a result of their engagement with SYT.

Those who remained in the same housing as before identified they felt their housing situation was more stable (2). The others identified that they had transferred to more appropriate housing (6), were in the process of applying for a transfer (3), signed up to public housing and received support to sustain tenancy successfully (1).

Housing related outcomes for YP included:

→ sustained tenancies and improved confidence in sustaining tenancies independently
→ transition to more suitable accommodation
→ improved relationships and communication between HP and YP
→ increased knowledge and education about housing processes (inspections, reviews, complaints, transfers, exits) and ability to avoid risk in the future
→ increased ability to meet requirements such as inspections and housing reviews
→ improved behaviour (when YP are experiencing less crisis and feel more stable, their behaviour is less impactful on neighbours, partners and children etc.).

Due to the nature of the referral process (i.e. YP are referred by HPs), all YP interviewed were in social housing (ranging from boarding houses to free standing homes) upon engagement with SYT. Prior to being in this social housing, a number of YP had experienced various forms of homelessness (couch surfing, rough sleeping, etc.) or had resided in inappropriate accommodation.

Housing related support received included assistance with budgeting, paying rent/rent arrears, furnishing the house (bed, sofa, kitchen utensils, whitegoods, etc.), advocacy to HPs to have the house treated for mould/pests, communication with HPs to make small
changes to the house (e.g. put up clothes line/curtains), establishing communication with HPs, modelling communication with HP, explaining tenancy responsibilities, practical assistance with cleaning, assisting in preparation for housing inspections, practical assistance moving house, and help organising belongings.

8.2.2 SYT prevents exit into homelessness

YP who did not sustain their tenancies experienced a combination of difficult behaviours, intellectual disability, serious trauma and very unsettled housing histories prior to engaging with SYT.

Although the YP did not sustain their social housing tenancies, SYT support staff made sure they exited the initiative into appropriate housing. The trusting relationships established between the YP and SYT support staff benefitted YP in terms of being able to begin to address some of the underlying issues that contribute to tenancy failure.

In one instance this meant providing temporary accommodation for the YP until accommodation in supported housing for people with an intellectual disability could be arranged. All case plans and pending legal matters were handed over to the new housing support organisation.

In another instance, the YP lost his social housing due to difficult behaviours and complaints from neighbours. SYT supported the YP into supported shared accommodation and initiated a new social housing application at that point in time. SYT remained in contact for the nine months during which the YP was in supported accommodation. The YP has now been offered social housing, is again being supported by SYT, is engaging well, and is determined to keep his housing.

This shows that even YP who did not sustain their social housing benefitted from engaging with SYT by, in one instance, being able to access appropriate housing rather than going back to rough sleeping, in the other instance, moving back into social housing after a sustained period in supported housing.

8.2.3 SYT improves YPs communication with HPs

In interviews, YP identified that SYT support workers played a crucial role in improving their capacity to communicate with HPs. This included understanding the importance of housing reviews and completing them, negotiating changes to the dwelling (e.g. installation of a clothes line), understanding their tenancy responsibilities, responding to HP contacts, and feeling confident to engage with HPs in a non-adversarial manner.

8.3 SYT contributes to positive non-housing outcomes

Qualitative data from interviews and the PSE shows that SYT contributes to positive non-housing outcomes for YP. These non-housing outcomes are critical to YP being able to grow their capacity for independence now and into the future.

8.3.1 Interview data

Interviewees (SYT support staff and YP) reported positive outcomes for YP in a range of non-shelter domains, especially access to the basics of life, physical health, mental health and emotional wellbeing, staying safe, relationships and social connectivity, and ability to navigate the system. Positive outcomes for education, training and employment were also recorded, but to a lesser degree. Education, training and employment outcomes will likely take a longer time to eventuate, as YP’s lives must first be stabilised and their basic needs met, before they can turn their attention to other things.
YP identified their relationship with the SYT worker, access to material needs, increase in confidence and self-esteem, and an improved ability to navigate the system as the most important non-shelter outcomes resulting from their engagement with SYT.

→ **Improved ability to navigate systems.** Support workers and YP reported positive outcomes in YP’s ability to navigate systems (e.g. legal, Centrelink, employment and education) and more positive relationships with support providers. YP identified that engagement with SYT had increased their ability to navigate the system and negotiate on their own behalf. Support received included advocacy and guidance on how to make phone calls and talk with providers (e.g. Centrelink, service providers, electricity companies, job service providers), ensuring YP accessed the full range of Centrelink benefits for which they were eligible, and help navigating the health and legal systems.

*Calling Centrelink and stuff and yeah, I didn’t realise you could do that. I thought you just had to kind of go in and sit there for hours and wait for them. (YP)*

→ **Increased confidence and self-esteem.** Support workers reported big changes in YP’s self-confidence as a result of engagement with SYT. YP had an increased belief in themselves and their ability to change and achieve. YP are more hopeful and feel they are making progress.

Increased confidence and self-esteem as a result of engaging with SYT were also a strong theme in YP interviews. The relationship with the SYT case worker and the increased ability to navigate systems were strong contributors to this. The strengths based approach to case management and the regular reviews meant that YP set goals and were able to track their progress against these goals. Assistance and training in how to navigate systems were considered by YP to be of great benefit and helped them gain the confidence to get control over their lives.

*I think I’m just feeling a lot more confident with a lot of things. I feel better about myself. (YP)*

→ **SYT support worker/YP relationship.** YP identified the relationship with the SYT support worker as one of the most beneficial aspects of the initiative. All YP interviewed lacked family or friends who could provide them with positive role modelling and proactive reliable support to address their issues. Many had not previously been in a trusting, respectful and reliable relationship. Having someone to talk to who could help the YP with advice and practically was valued very highly.

→ **Life skills.** YP developed enhanced skills in managing income, bills, travel, debts, cleaning, cooking.

→ **Social connectivity.** The positive experience with SYT boosted YP’s ability to connect with others; YP are more comfortable with people and social interactions. Support workers assisted YP to connect with other groups and facilitated access to interpersonal or community supports; family reconnection has occurred for some YP.

→ **Cleanliness.** A clean and organised home engenders pride in the home and makes YP more willing to invite family home and SYT supports this connection. YP have developed a better understanding of the risks of not cleaning and leaving food around the home in terms of pest control, health and tenancy sustainment.

→ **Change in attitude and response to crisis/stressful situations.** YP are more positive in their attitude and have developed better skills to cope with crises. SYT
helps YP to consider and structure their response to crises and to manage situations with a different emotional/behavioural approach.

**Physical health.** Support workers and YP reported big changes in YP’s physical health (e.g. YP attending gym and positive flow on from this, YP accessing health care, YP managing weight). Eating well (too much or too little, gaining or losing weight) were of concern to a number of YP. YP felt that SYT assistance in learning how to prepare cheap and nutritious meals was valuable to them in this respect. YP also indicated that SYT assisted them in accessing the health supports they and their children required, making appointments and keeping these appointments, which contributed to their, and their children’s, improved health.

"I’m a lot more confident now. Back then ... I was not in a good space ... I just wanted to stay at home and kind of lock myself up. But [my SYT case worker] pushed me and motivated me and now I’m seeing my doctors all the time, I’m keeping to my doctors’ appointments and I’m actually all healthy because I had diabetes so I’m type 2 and now I’m diet controlled after having insulin and tablets at the same time for the first time since I first got diagnosed, so it’s really good. (YP)"

**Education, training and employment.** Some YP have achieved education and training goals. Some YP have gained employment, though achieving employment is a challenge not only because of YP’s circumstances but also because of a range of structural barriers (e.g. job market, effectiveness of job service providers).

"I got more support from [my SYT case worker] than I did from say like psychologists in all aspects of my life. She helped me emotionally and she helped me to get back up on my feet. She was kind of like my, I call her my angel, because she came into my life at that time where I just hit rock bottom and I was falling apart and she’s helped me so much. (YP)"

**Access to material needs.** Most YP interviewed identified that they had received material aid from SYT. This was valued very highly, especially SYT’s ability to provide support quickly and without red tape. In addition to providing furniture and white goods, assistance with transport (go card) and purchasing food (Coles vouchers) was highlighted as important, as many YP struggled to afford nutritious and healthy food.

**Mental health.** Improved mental health and emotional wellbeing were key outcomes of SYT, though many YP will require ongoing support with these issues after their engagement with the initiative has ended. Support workers noted that once a YP’s housing situation is stabilised, mental health can deteriorate before it gets better. Mental wellbeing was also a concern from YP’s perspective. YP identified anxiety, depression, anger issues, stress, grieving, social isolation, hearing voices, trauma, drug use, and feeling overwhelmed as issues that affected their ability to undertake day to day tasks and maintain their tenancies. YP reported that SYT support staff assisted them in getting referrals to mental health services where this was appropriate and the YP was open to this. SYT support workers also helped YP to put into place strategies to manage mental wellbeing, manage self-regulation, reduce exposure to risks and triggers, manage stress, support activities that facilitate social connections (e.g. gym memberships, social outings, family reconnection where appropriate) and provided a sounding board and advice, which YP identified as very helpful.
[Before SYT] I literally didn’t want to talk to anybody. I was just - I just hated the whole world ... everybody just pissed me off... I just pushed so many people away that tried to help me a lot. Then this community came in and they did a lot in that. (YP)

8.3.2 PSE data

Interview findings are corroborated by data from the PSE, which shows that YP’s self-assessed progress in the psychosocial domains improves from a mean level of just above 2 to above the midpoint of the scale in the first 1–2 months of engagement with SYT support. This improvement continues until at least the point that the YP transitions from SYT (Figure 7, p. 55).

As identified in the interviews with HPs, challenges often emerge between the first and third review points, as YP start to work towards addressing deeper issues, developing stability and resilience, and embedding changes that will be sustainable over time. With sustained support through this period, the patterns in the data suggest that YP feel able to address the underlying complexities and emerging issues.

Over time, as YP experience success in overcoming challenges and establishing sustainable, healthy and safe lifestyles, the patterns in their self-assessments improve until they reach a strong level at the final exit review (see Figure 7, p. 55).

The improvement in material wellbeing was partly due to the material aid provided or facilitated by the SYT initiative, as well as an improved understanding of Centrelink rules and processes, an increased confidence in navigating the process for remedying these issues/making new income claims, and debt reconciliation and negotiated payment plans.

The next biggest improvements were in the mental wellbeing and life skills domains, which improved from 2.43 to 3.75 and 2.60 to 3.92 respectively. This is particularly encouraging, as these are the domains identified as high priorities at initial assessment.

Such patterns in PSE results suggest that sustained case management allows challenges to emerge for YP while they are in the program and for YP to be supported to address them over time. Arguably, this breaks cycles of short term gain and failure, and results in YP having stronger perceptions of overall psychosocial wellbeing. This supports the conclusion that for YP, consistent planned support over time is more effective than short term crisis interventions.
Figure 6: What has been the most helpful aspect of the initiative overall?

At the exit review (n=18) the PSE asked YP to indicate which aspects of the SYT initiative they had found to be helpful. Interviewees were asked to indicate, for each item, whether or not they had found it to be helpful. Results show that all YP considered mobile support to be helpful, and 17 out of 18 YP thought that learning to negotiate systems and learning about the tenancy were useful aspects of the initiative (Figure 6). This was followed closely by the professionalism of the program, positive relationships with workers, and connection to others, which 16 out of 18 respondents thought were important aspects of the initiative.

8.4 Sustaining outcomes into the future

Interviews asked YP whether they thought they would be able to sustain the changes made while in SYT into the future and responses varied. Some YP were optimistic that the self-esteem and skills gained would allow them to sustain the positive changes made. Others were concerned that income would be an ongoing challenge (most YP who were seeking employment noted they had difficulty finding jobs and that job service providers were not helpful). A number of YP felt that they were not ready to graduate from SYT or felt anxious at the prospect of graduating from SYT.

I feel better [now] that I’ve got support ... a lot better. And more secure in my future, basically my new future. So the next two years I feel pretty secure. [Until the YP reaches the age of 25 and is no longer eligible for the service] (YP)

SYT support workers interviewed thought that the ability of YP to sustain the positive changes they had made was likely to be variable, depending on a range of factors, predominantly mental health, as well as transport, motivation and changes to
pathway/goals. Agency staff thought that outcomes achieved via experiential learning were more likely to be sustainable for YP. Outcomes that were most likely to be sustained in the long term were identified as:

➔ greater confidence and ability to navigate systems  
➔ better engagement with landlords  
➔ better understanding of tenancy rights and responsibilities  
➔ increased ability to connect with supports.

SYT support workers identified the following short term changes as being less likely to be sustained:

➔ financial wellbeing may deteriorate as brokerage associated within the SYT initiative has assisted YP to buy food and household items, and affordability of day to day necessities will continue to be a challenge for most YP  
➔ access to specialised services that YP have planned to pay for (subsidised) post SYT provision (e.g. Tai Chi, swimming classes, counselling)  
➔ maintaining cleanliness of the property (however, a greater understanding of what is expected has been established)  
➔ budgeting and managing finances is a constant challenge for many YP  
➔ cooking and nutrition can be too expensive so YP resort back to frozen meals  
➔ property maintenance affected by mental health can be inconsistent and unpredictable; hoarding and squalor are examples of this.

SYT support staff connect YP with a range of mainstream and specialist supports, including health providers, community groups, job networks, alcohol and drug support services and medical specialists. Interviews with YP and SYT support staff indicate that in many cases it is likely that YP will be able to continue to access these supports without assistance after they transition from SYT.

8.5 Conclusion

There is clear evidence that SYT clients reap considerable benefits from their engagement with SYT in terms of tenancy sustainment as well as in other life domains. SYT contributes to alleviating their immediate material needs and provides a stable environment in which YP can address non-housing related issues in their lives and build the life skills and capacity which will contribute to their transition to independence. While SYT is unable to affect the structural factors that contribute to tenancy instability, the initiative has significant positive impact on the individual (personal) factors that affect YP’s tenancies. In addition, via the strong emphasis on working well with HPs, the SYT initiative makes an important contribution to addressing some of the institutional factors (e.g. adversarial relationships between housing and other support providers) that can negatively affect tenancy outcomes for YP.
9 Focus on mental health

Mental health issues, whether diagnosed or undiagnosed, have a significant impact on YP’s ability to access and sustain tenancies and there is a high prevalence of mental health issues among YP who are living in social housing. Yet, while mental health support needs are high, there is little integration between mental health and housing services.

In order to better understand the links between mental health and housing instability for YP, this section draws on the literature to highlight key issues and interventions.

9.1 Mental health issues affect tenancy sustainment

Mental health issues can have wide ranging impacts on YP’s ability to sustain housing, including:

→ **Property maintenance.** Mental health issues can contribute to inconsistent or sporadic property maintenance, hoarding and squalor issues. In Evaluation interviews, some YP noted that anxiety and depression affected their ability to clean and contributed to them hoarding and to squalor issues. YP felt overwhelmed with life and tenancy issues, and some YP were reluctant or unwilling to take medication for their mental health, felt intimidated by their neighbours, or felt unable to leave their houses.

→ **Difficult relationships.** Mental health issues can contribute to YP having difficulties managing their relationships. This can result in noise and conflict, complications managing visitors, property damage.

→ **Domestic and family violence.** DFV is a significant contributor to YP’s trauma and poor mental health.

→ **Social isolation.** Social isolation can negatively impact YP’s mental health and means they lack support networks for advice and practical assistance in sustaining tenancies.

→ **Communication.** Mental health issues can make it more difficult for YP to engage in effective communication with HPs, due to the stress and anxiety this can cause. Mental health issues can also make it more difficult to undertake tasks such as housing reviews.

9.2 The links between housing and mental health

Homelessness and housing instability have varied interactions with mental health and wellbeing and are well documented (Chamberlain, Johnson et al. 2007; Pryor 2011). Housing appears to have a much greater impact on self-reported mental health than physical health or other wellbeing measures (Beer et al. 2011).

Mental health is a key risk factor for homelessness and homelessness exacerbates existing mental health issues (Costello, Thomson et al. 2013b; Phillips and Parsell 2012). Housing interventions that support stable tenure can have beneficial mental health outcomes; the provision of permanent supportive housing to homeless people has been shown to improve their mental health (Costello, Thomson et al. 2013b).
Homelessness affects stability and social connectedness which, in turn, impacts health and wellbeing outcomes. The absence of housing also affects personal safety and people’s sense of control and mastery of their lives, impacting physical and mental health and wellbeing outcomes (Foster, Gronda et al. 2011: 14).

Homelessness and mental illness pose reciprocal risks. People with mental health issues are at particular risk of homelessness, due to uncoordinated service systems; poor support networks; social isolation; and high levels of stigmatisation within the service system and society more generally (Costello, Thomson et al. 2013b; Robinson 2005).

Mental health exacerbates homelessness—in Australia it has been estimated that 50–75 per cent of homeless youth have some experience of mental illness (Chamberlain, Johnson et al. 2007: 6; MHCA 2009; Pryor 2011: 14–17).

Approximately one in four young Australians experience mental health issues at some point in their adolescence. Yet people aged 16–34 years were less likely to have used services for their mental health problems (29%) than people aged 35–54 (41%) or 55–85 years (37%) (ABS 2009).

The risk of homelessness for YP can be due to their own mental health issues or those experienced by their parents (Chamberlain, Johnson et al. 2007; Costello, Thomson et al. 2013b). Dual diagnosis heightens risks of homelessness (Costello, Thomson et al. 2013b; Hipwell et al. 2000).

Many people living in social housing have mental health issues and their housing security is often precarious (Hulse and Saugeres 2008).

9.3 Why YP don’t seek help with mental health

Up to three quarters of Australian youth with mental illness or emerging mental health issues do not seek professional help (Wilson et al. 2012).

The evidence shows that a major proportion of YP:

→ simply do not believe they have a mental health issue (Meadows and Burgess 2009)
→ believe they need to manage their mental health issues alone, which is common among young men, who are less likely to access available services and seek help with mental health issues (Collin, Metcalf et al. 2011; Rickwood, Deane et al. 2005; Wilson, Cruickshank et al. 2012)
→ believe that they only require the intervention and advice of friends and family (Rickwood, Deane et al. 2007).

Research has also identified an inverse relationship between desire or intent to seek help for mental health issues and substance abuse (Reavley, Cvetkovski et al. 2010).

Homeless youth may not access primary mental health services due to reasons including perceived attitudes of health care workers (Dixon and Lloyd 2005); previous negative experiences with health care providers and poor resolution of issues (Herman and Manuel 2008); and negative social perceptions of their situation and stigma, which contribute to low overall self-worth (Dixon and Lloyd 2005). Fragmentation of support services and lack of clear direction between them may cause confusion amongst YP and a reluctance to seek further help and access services (National Youth Commission 2008). Lack of a permanent place of residence can act as a barrier to accessing health and social services (Costello, Thomson et al. 2013b; Flatau, Coleman et al. 2009).
Knowledge of mental health awareness programs is increasing among youth (particularly of established and well-funded programs such as beyondblue) (Collin, Metcalf et al. 2011; Morgan and Jorm 2007).

9.4 Interventions that help YP with mental health issues to sustain tenancies

The evidence supports that addressing mental health issues in YP who are homeless or at risk of homelessness requires interventions that combine housing with other formal and informal supports.

Maintaining stable housing is critical for youth in recovery from mental health issues – a key aspect of housing security is the confidence that comes with the security of tenure and feelings of safety (Duff, Loo et al. 2012).

A study by Duff, Loo et al. (2012) found that stable housing and social inclusion for youth recovering from mental illness requires intense individualised support from formal and informal sources as well as appropriate housing.

The evidence shows that sustaining tenancies programs can increase linkages to health and other social services, including improved access to counselling services, referrals to mental health, drug and alcohol services, and financial counsellors (O’Brien et al. 2002).

Tenancy sustainment services, particularly those provided to social housing tenants, constitute one early intervention and prevention process that can, in some cases, prevent and lessen the precarious housing circumstances for people with mental health issues (Habibis, Atkinson et al. 2007).

McCann and Lubman (2012) identified several issues in accessing local services (specifically, Headspace youth centres), including location-specific transport difficulties; institutional difficulties such as initiating appointments and unfamiliarity with the workings of the system; and financial difficulties such as shortcomings in the funding model for youth-based services. However, they highlighted the importance school counsellors (and school structures in general) play in initiating and facilitating access to youth health services. Online support services (e.g. ReachOut.com) have better outcomes in engaging with and targeting youth at risk of mental health issues, and are more effective at promoting help-seeking behaviours (Collin, Metcalf et al. 2011).

The evidence base provides a number of best practice principles to assist recovery and ensure housing stability for YP living with a mental illness. These include:

- Intensive case management, in which a housing worker establishes a relationship of trust with the young person (Roberts 2009).
- The placement of YP in housing needs to ensure suitability in terms of availability of local amenities, access to transport and public space. This can help ensure that YP do not suffer isolation and exclusion from the local community (McCann and Lubman 2012).
- The placement of YP in housing, either supported accommodation or transitional, needs to ensure the availability of support networks. This includes formal networks (e.g. mental health services and employment and education programs) as well as informal networks (Honey, Emerson et al. 2011).

A number of these prerequisites are present in the SYT initiative. Thus, while SYT is not a mental health support service, it plays an important role in stabilising the housing situation
of YP and providing them with circumstances that are conducive to addressing their mental health issues.

9.5 Mental health is a key issue for SYT YP

The Evaluation showed that all YP interviewed reported that they struggled with mental health and psychological wellbeing issues and that this affected their ability to sustain tenancies and address concerns in other areas of their lives. This was confirmed by interviews with HPs, who identified that mental health was a key issue with which most, if not all, YP in social housing struggle, and which affects their ability to sustain tenancies. Interviews with SYT support staff corroborated this.

Qualitative interviews with YP showed that their mental health could worsen if they were placed into inappropriate housing, for example placement in boarding houses often contributed to the worsening mental health of YP with serious mental illnesses (e.g. schizophrenia) and were identified as places where YP with traumatic histories of violence were very vulnerable. Conflict with neighbours was also identified as a factor that contributed to worsening mental health.

Data from the PSE indicate that a high proportion of the YP engaged in the SYT initiative regarded themselves as experiencing mental health issues. Patterns in the ratings of their progress suggest that their perceptions of their mental health can initially worsen after their housing situation has stabilised, before it gets better again. A high 58 per cent of YP identified mental wellbeing as a support priority at the initial assessment upon engagement with SYT. Once their housing situation stabilised, more YP, with assistance from SYT support workers, were able to identify and address their mental health issues, and mental wellbeing as a support priority rose to 67 per cent at the first review before slowly declining to 44 per cent at the third review, once supports for mental wellbeing were put into place. Correspondingly, YPs’ self-assessed mental wellbeing rose from 2.43 (ok) at intake to 3.75 (doing well) at the final review (Figure 7).

It appears from these patterns that once other factors in YP’s lives have stabilised, mental health issues can come to the fore, allowing them to be addressed with the help of SYT support staff.

Figure 7: Young people’s self-assessed progress in psychosocial domains
Case study: mental health

My caseworker introduced herself over the phone first and got to know me through phone to make sure when she meets me it’s not too formal or anything.

Before I had my own apartment I lived in a boarding house. Everyone thinks it’s a house, it’s not. It’s actually just a block of units that are stacked on top of buildings. Not even a unit, they’re just rooms. A unit has everything. This one just had a room with a bed in it, a fridge and a sink, that’s it; communal laundry, bathroom, kitchen. Yeah, everything was shared besides the sink and bed. I couldn’t wait to get out of there. I have a phobia about cockroaches and the roof was leaking. I didn’t feel physically and mentally safe. I was getting hassled by tenants, it was pretty bad and my mental health deteriorated. I didn’t want to leave the room.

My housing worker was really worried about my safety because he knew about things, about my mental illness and stuff, and then when my SYT worker came into the picture, he informed her about what I complained about. And then I pretty much confirmed it to her that I’m worried because there were quite a lot of people who have lots of issues there. And I needed to just go to a place as soon as possible so that I’m safe.

I also needed to get my place ready for an inspection for when I moved out. It needed to look presentable. I suffer from anxiety and depression and they focus mainly around house work and being seen doing house work, so it’s quite difficult for me to deal with. My place wasn’t very well kept, because being in a boarding house, if I would have taken my trash out, I would have had to try and do it without people seeing me or it would cause me a lot of just fear really. So I just didn’t do it very often. And so it was a mess. My case worker helped me with that and we practiced by doing mock inspections. My new place is much better. It’s just a better place and I can keep trash in trash bags and bins and take that out when that’s full. I feel much more comfortable in my own place.

[This is a composite case study compiled from various interviews with YP.]

9.6 Implications for tenancy support

One of the difficulties with providing mental health support to YP commencing social housing tenancies is that they may not have a formal diagnosis, may be unaware or unable to identify their mental health issues at the time of sign up, or may be unwilling to disclose this information and seek help. However, data collected for this Evaluation shows that mental wellbeing is an issue for most, if not all, YP in social housing.

The implications of these findings are that routine screening of all YP who enter into social housing may be advisable. This would allow for providing contact details/referring YP to mental health support in order to enable them to sustain their tenancies. Services such as SYT are then in a position to provide ongoing and tailored support as required and there are tools that allow non-mental health specialists to screen for anxiety, depression and stress.
Screening all YP for mental health support requirements at sign up to social housing is an opportunity to provide early intervention referrals, rather than waiting for escalation of problems or for a crisis to emerge. However, as the evidence from the literature and the data collected for the Evaluation demonstrate, not all YP are willing or able to disclose a need for mental health support at sign up to social housing. Often, it is only after a period of sustained engagement with a trusted case manager that YP are able to disclose what support is needed to address their mental health needs. This highlights the need for sustained support for YP in social housing. The evidence also shows the importance of housing that is well located in proximity to transport, mental health and other support services and YP’s informal networks.

The evidence from the literature and from the Evaluation also demonstrates that tenancy sustainment services, especially models such as SYT that provide intensive case management and formal and informal supports, are effective in enabling YP to access the mental health supports they require.

Thus, sign up to social housing presents a critical contact point to provide YP with the opportunity to engage with supports that can lead to them addressing their mental health issues, which ultimately will contribute to their housing independence. It is, however, important that uptake of referrals remains voluntary and that provision of housing not be conditional upon the uptake of referrals. Furthermore, YP’s privacy, trust and consent must be maintained.
10 Conclusion and recommendations

This chapter of the Evaluation draws together the evidence from all data sources to answer the evaluation questions and makes a series of recommendations.

10.1 SYT is effective in sustaining the tenancies of YP in social housing

Evidence from all data sources demonstrates that the SYT initiative is an appropriate support to assist YP in social housing to sustain their tenancies and gain the skills required to transition to greater independence. The SYT initiative:

- is effective in sustaining the tenancies of YP in social housing
- provides to its clients mobile support and case management that are individualised, needs based and flexible
- provides support with material needs (brokerage)
- contributes to clients’ knowledge and skills development
- connects clients to a broad range of supports and services.

The core components of the SYT service model – early identification and referral (early intervention), holistic approach, flexible support, access to brokerage, case management, strong partnerships with external supports, service integration – are consistent with best practice for tenancy support services and services for YP at risk of homelessness, as identified in the literatures (see section 3).

10.2 SYT uses effective strategies for early intervention and prevention

The SYT initiative has in place effective referral mechanisms for early intervention and prevention. These mechanisms rely on HPs making referrals through early identification of YP at risk of losing their tenancies and becoming homeless. SYT has worked with HPs in a collaborative and sustained manner to establish and refine these processes. This is an important aspect of the SYT initiative, as it can be difficult for HPs to assess YP’s support needs before crisis point is reached. Early identification requires referring HPs to have a good understanding of the SYT initiative and requires a process of continuing education and relationship building between SYT support staff and HPs.

Early intervention is important to tenancy sustainment as it allows supports to be put into place before problems compound and escalate, leading to risk of eviction.

10.3 Pre-existing relationships and collaboration with Housing Providers are a critical success factor in delivering SYT outcomes

The SYT initiative arose from and builds upon pre-existing relationships between service providers and HPs. These relationships are actively fostered by SYT support staff and are a critical success factor in the delivery of the initiative and in generating positive outcomes for YP. The significance of the relationship between the SYT initiative and HPs lies in a
culture change, where support services for YP work together in a collaborative, rather than an adversarial manner, thereby addressing one of the systems issues that can negatively affect tenancy sustainment for YP.

It is critical for the ongoing success of the SYT initiative to continue to foster and grow these relationships.

10.4 Systems issues that affect YP’s tenancies

The Evaluation identified a number of systems issues that contribute to tenancy instability and homelessness among YP, including: the process of applying for social housing, which some YP experience as too long and difficult, and ensuring the application remains current; limited ability of the system to keep track of YP’s movements if they do not notify of a change of address; lack of support services after a tenancy has commenced; constraints on the skills and capacity of Housing Service Centre staff to offer social service responses (e.g. health care, education, employment, social welfare services); constraints on effective service delivery and referrals due to the Information Privacy Act 2009; and limited capacity and long wait times for support services required by YP.

Other systems issues, which are beyond the remit of HPW, but affect YP’s tenancies, include employment services not meeting the needs of YP and the child safety system not adequately equipping YP for independent living.

SYT supports fill a gap in the service provision for YP once they have entered social housing, by assisting them in navigating these issues.

Policy development opportunities

The Evaluation finds that the SYT service model is effective and robust.

The SYT initiative has proven to be highly effective in delivering early identification, early intervention, prevention and tenancy sustainment support for the target group. It clarifies the need for an effective, integrated and tailored support framework for YP who are homeless or at risk of homelessness, including after YP have entered social housing.

The evidence collected and synthesised for the Evaluation demonstrates that the SYT pilot makes an important contribution to sustaining the tenancies of vulnerable YP in social housing and thereby contributes to reducing homelessness. The SYT initiative fills an important gap in the service system by providing support once a social housing tenancy has commenced (as opposed to support to enter social housing). This reduces the rate of tenancy failure and churn.

The strengths of the SYT approach are demonstrated in the increase in YP’s structured access to mainstream services and their increased social connectedness over time as a result of engaging with the initiative. The Evaluation highlights that localised responses and partnerships are a powerful mechanism for generating positive outcomes. However, there is a need for greater system integration between housing and homelessness services and mental health services: a very high proportion of YP accessing the SYT initiative have mental health issues and the evidence suggests that the majority of YP in social housing experience mental health issues. However, constraints on the availability of free mental health services once YP age out of child and youth mental health services mean that there are significant constraints on the ability of the cohort to access the mental health supports they require. Similarly, access to effective youth specific employment programs are critical if YP are to achieve their goal of transitioning to independence and successfully sustaining their tenancies in the long term. Thus there is a need for greater
system integration at the policy and program levels links between SYT and work programs for YP (e.g. Skilling Queenslanders for Work).

The Evaluation suggests the following.

**Policy and program level**

1. The demonstrable success of the SYT pilot in relation to early intervention and prevention for YP suggests that the department could consider adopting this model more broadly in the provision of Specialist Homelessness Services and social housing.

2. There is a need for greater system integration between housing and homelessness services and mental health services in order to reap maximum benefit from SYT.

3. The department could explore ways to create greater system integration at the policy and program levels between SYT and work programs for YP. The Skilling Queenslanders for Work program, for example may represent an opportunity for this cohort.

4. The Evaluation indicates that the SYT pilot meets an important need effectively and at costs that are arguably good value for money. This argues strongly for the extension of the initiative to meet the ongoing demand in the pilot sites and expansion of the initiative to meet the ongoing need/demand for the service in other locations.

5. In order for the SYT model to adequately address the unanticipated high level of client need of the cohort, the department should consider whether the level of brokerage funding is sufficient for the SYT.

**Service provider level**

6. The service provider could, in conjunction with HPs, explore ways to further enhance processes for early intervention and identification of YP who are at risk. This could include SYT support staff having designated times at which they are present at HP’s offices during intake interviews into social housing to assist with identification and allocation issues.

7. The service provider, together with HPs, should further embed processes to ensure popularisation of and continuous education about the SYT initiative with relevant HP staff to ensure early identification and referral of YP at risk.

8. Considering the high proportion of Aboriginal and Torres Strait Islander YP engaged in the SYT initiative, the service provider should consider employing a support worker who is of Aboriginal and Torres Strait Islander background to further enhance culturally appropriate support for this cohort of YP.

9. The service provider should consider partnering with local youth specific employment services to enhance the employment prospects of YP engaged in the initiative and further support their ability to transition to independence.
References


Third, H., Pawson, H. and Tate, J. (2001) *Sustaining young person’s tenancies in the social rental sector*, School of Planning and Housing, Heriot Watt University.


Appendix 1: Interview schedule for internal stakeholders (agency staff, Housing Providers, department staff)

Roles and responsibilities
1 Please describe your role/the role of your organisation in relation to SYT.
2 What do you see as the main objectives of SYT?

Types of support required by clients
3 What are the main types of support required by SYT young people?
4 What are some of the barriers or risks that may inhibit positive outcomes for young people in sustaining their tenancies?

Client outcomes
5 What do you see as the key benefits of SYT for young people?
6 What do you think are the key factors (specific to the type of support provided) that affect young people being able to access housing and sustain their tenancies? (Prompt key barriers, structural, personal, the way the system is set up, availability and capacity of support services)
7 Are there any other changes that that you have observed happening for young people as a result of participation in SYT – positive or negative? For example: family and social relationships; emotional and behavioural outcomes; community participation, education and training.
8 Of the changes you have seen happen, do you have reason to believe that some will be more sustainable than others? Why?
9 Are there areas in which you think that the program could have done more to support positive outcomes for young people?

Critical success factors
10 What are the critical success factors for that enable the SYT program to work effectively?

11 What would you say are the key factors about SYT that have helped achieve positive outcomes for young people? For example: service design, delivery, brokerage funding, outreach, solution focused support, partnerships, flexible approach, case work.

12 What were the most effective key elements of the working relationship between SYT staff and young people?

13 What were the helpful / hindering elements of the working relationship between SYT and housing partners?

14 How effectively do you think SYT was able to effectively accommodate the needs of specific groups of young people who may have high needs (e.g. Aboriginal and Torres Strait Islanders, CALD, young parents, gender/sexuality diverse, people with a disability)? (Prompt what specific strategies were used for these groups, how effective
do you think these strategies were, what additional supports do you think would be required for SYT to effectively address the needs of these groups?)

SYT and other housing services

15 What do you perceive as the relationship between SYT and other services that provide tenancy sustainment services or housing services for young people?

16 What are the areas of overlap?

17 Where are the gaps?

18 How is SYT different from other initiatives?

19 Are there any potential opportunities to strengthen or streamline the delivery of SYT?

SYT and the wider service system

20 What were the key elements of the working relationship between SYT and other relevant support services? (ask where relevant)

21 What do you see as opportunities for further service integration to enhance service delivery? For example, with child protection; youth justice; health, mental health, drug and alcohol.

Barriers and opportunities

22 What are some of the main barriers/challenges to implementing and delivering SYT? For example: implementation timing; staff recruitment, referral of young people.

23 Are there other forms of assistance that young people need that are not currently provided through the SYT?

Unintended costs and benefits

24 Have there been any unintended or unexpected costs and benefits from the SYT? Please describe.

Service evolution and refinement

25 Are there any ways in which SYT changed over time in response to emerging learning and barriers over the life of the program?

Suggestions for improvement

26 Do you have any suggestions for improvement or modification to SYT?

Wrap up

27 Is there anything else that you would like to add that you feel we have not covered?
Appendix 2: Interview schedule for young people

1. How long have you been supported by SYT?
2. How did you find out about service? Who referred you?
3. What challenges were you facing in keeping your tenancy before you were in the service?
4. How has the service been helping you? Prompt: What sort of help did your case worker provide to you to achieve your goals? What have been the most useful aspects of the service?
5. Has this helped you to keep your tenancy? How?
6. What ongoing challenges do you still face now?
7. How well do you feel you are now able to deal with these challenges?
8. What strategies do you use now to deal with these challenges?
9. What have you learned about managing your tenancy?
10. In what way do you feel that your housing is now more secure than it was?
11. Where do you think you will be living in one year?
12. I’m now going to ask you a few questions about SYT that don’t directly relate to your housing. I’m wondering what else has changed in your life since using SYT?
13. If you think about the basic things you need to live, like food and clothing, furniture for your home, enough money to get by, how much do you feel that the support from SYT has made a difference to you being able to access these things? (Prompt if yes, then how, if no, then why not)
14. If you think about your physical health (how well you feel, your ability to manage illnesses, go to a doctor, look after yourself), how much do think the support from SYT has made a difference to you? (Prompt if yes, then how, if no, then why not)
15. Thinking about your mental health and your emotional health (e.g. managing depression, anxiety or more generally how you are feeling about yourself and life) how do you think you are going at the moment? How much do you think the support from SYT has made a difference to this? (Prompt if yes, then how, if no, then why not)
16. Thinking about how you go with keeping yourself safe. How much do you feel that the support from SYT has helped you reduce or manage risks in your life (e.g. risky drug or alcohol use, violence, abuse, other risks) for yourself (or any children in your care)? (Prompt if yes, then how, if no, then why not)
17. Since being in SYT, have you been engaged in any education or enrolled in any courses that taught you new skills? (Prompt, what kind of education or course, how long for, did they complete the course (if no, why not))
18 Since being in SYT, have you been looking for or found employment in any capacity? How much do you feel that support from SYT has helped increase your ability to find/keep a job in the future (prompt what kind of job, how long, full or part time, etc.)

19 How much do you feel your relationships with friends and family have changed since being in SYT?

20 If you think about any other support services that are helpful to you, how do you think being in SYT has changed your ability to know about and access support services? In what way are these services helping you? What challenges did you encounter in accessing them?

21 How confident do you feel that you will be able to sustain connection with other supports, when you need them, after finishing with SYT?

22 How do you think SYT has helped you to make positive decisions about your life and access the resources and supports you need? (Prompt how did SYT help you with that, what was a key challenge you faced?)

23 What else has changed in your life since using SYT?

24 Would you recommend SYT to a friend? How would you describe it?

25 What was the best thing about SYT?

26 What could be better about SYT?

27 How well do you feel that SYT has been able to connect you with different kinds of support to work on your goals after finishing with SYT? If not well – why not?

28 Is there anything else you would like to add?
Appendix 3: Housing Provider referral form

B6.9 REFERRAL FORM – Sustaining Young Tenancies Project

The BYS Sustaining Young Tenancies Project is about helping people to keep their housing, and work toward their goals. BYS is independent from government and any other housing provider. All information young people provide will be kept confidential and only shared with their permission. This form can be completed electronically or scanned and emailed to bysreferrals@brislyouth.org. Once the form is received, it will be allocated to the Sustaining Young Tenancies Team. They will contact the young person to arrange an appointment.

<table>
<thead>
<tr>
<th>Referring Partner</th>
<th>BRIC</th>
<th>BHC</th>
<th>HPW</th>
<th>Referrer contact name</th>
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<td>Phone</td>
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<tr>
<td>Young Person/s</td>
<td>1.</td>
<td>2.</td>
<td>DOB</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2.</td>
</tr>
<tr>
<td>Young person</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact details</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Culture &amp; Identity:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Country of Birth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language at Home:</td>
<td>CALD</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Identifies as:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Torres Strait Islander</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neither</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Australian South Sea Islander</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household:</td>
<td>Single:</td>
<td></td>
<td>Couple:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Associated Children:</td>
</tr>
<tr>
<td>Gender:</td>
<td>Male</td>
<td></td>
<td>Female</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transgender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does not</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>exclusively identify as</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>male or female</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Gender not listed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>here. Describe:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other services or</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>supports involved?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length of time at</td>
<td>0-1 month</td>
<td></td>
<td>1-3 months</td>
<td></td>
</tr>
<tr>
<td>property:</td>
<td>3-6 months</td>
<td></td>
<td>6-12 months</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over 12 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any notices</td>
<td>1. Notice to Remedy</td>
<td></td>
<td>2. Notice to leave</td>
<td></td>
</tr>
<tr>
<td>issued:</td>
<td>#:</td>
<td></td>
<td>#:</td>
<td></td>
</tr>
<tr>
<td>(and number of)</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>referral:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Young Persons Current Housing Situation:
- 1. Can be a lot better
- 2. Can be better
- 3. OK
- 4. Doing well
- 5. Doing great

*Please turn over and refer to the indicators guide on the back of this form before completing the above scale*

**TELENT GOALS**

<table>
<thead>
<tr>
<th>I would like to talk with Sustaining Young Tenancies Team about:</th>
<th>Tenant's focus right now?</th>
</tr>
</thead>
<tbody>
<tr>
<td>My housing / my home</td>
<td>My experience with violence</td>
</tr>
<tr>
<td>My study/work/ how I spend my day</td>
<td>My experience with alcohol / other drugs</td>
</tr>
<tr>
<td>My money</td>
<td>My health and well being</td>
</tr>
<tr>
<td>My relationships</td>
<td>My experience with child safety</td>
</tr>
<tr>
<td>My pregnancy / parenting / caring roles</td>
<td>My experience with the law</td>
</tr>
</tbody>
</table>

I consent to:
- My personal information being de-identified and used for data collection and reporting purposes, including data and reports to government departments that provide funding to BYS, and for evaluation and research.

The BYS Sustaining Young Tenancies team will follow up with you.

Young Person/s signature 1. 2.

Witness Signature Name

Verbal consent Date: Written consent unavailable, verbal consent provided.
## Indicator Guide

<table>
<thead>
<tr>
<th>1: Can be a lot better (High Risk)</th>
<th>2: Can be better (Moderate risk)</th>
<th>3: Ok (Low risk)</th>
<th>4: Doing well (Safe)</th>
<th>5: Doing great (Safe and stable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imminent risk of homelessness</td>
<td>Tenancy failing</td>
<td>Emerging tenancy challenges</td>
<td>Sustaining tenancy</td>
<td>Tenancy area of strength</td>
</tr>
<tr>
<td>High risk relationships Eg.</td>
<td>Moderate risk relationships</td>
<td>Low risk relationships</td>
<td>Some positive relationships</td>
<td>Positive relationships</td>
</tr>
<tr>
<td>Violence, harassment</td>
<td>Trouble managing conflict</td>
<td>Limited support / social networks</td>
<td>Some support / social networks</td>
<td>Strong connections to support / social networks</td>
</tr>
<tr>
<td>Isolated from support / social</td>
<td>Limited support / social networks</td>
<td>Able to manage conflict</td>
<td></td>
<td></td>
</tr>
<tr>
<td>networks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highly vulnerable or unsafe</td>
<td>Moderately vulnerable or unsafe</td>
<td>Low vulnerability</td>
<td>No health or safety concerns</td>
<td>Healthy and well</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4: Housing Provider review form

Housing Review – Sustaining Young Tenancies Project

This form should be completed when a young tenant, referred by your agency, is transitioning from support with the SYT project. The intention is to provide the housing provider with an opportunity to record any change in the tenant’s housing situation between the time of referral and the end of support. The review asks the provider to consider project success factors and challenges to inform the evaluation and learnings for the project team.

<table>
<thead>
<tr>
<th>Housing Partner</th>
<th>BRK</th>
<th>BMC</th>
<th>HPW</th>
<th>Fortitude Valley</th>
<th>Housing contact name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Review</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Phone</td>
</tr>
<tr>
<td>Young Person(s):</td>
<td>1.</td>
<td>2.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length of time at property:</td>
<td>0-1 month</td>
<td>1-3 months</td>
<td>3-6 months</td>
<td>6-12 months</td>
<td>Over 12 months</td>
</tr>
<tr>
<td>Notices Issued in last 3 months</td>
<td>Notice to Remedy</td>
<td>#:</td>
<td>Notice to leave</td>
<td>#:</td>
<td>Other</td>
</tr>
</tbody>
</table>

**Assessment of young persons current situation (overall)**

- [ ] 1. Can be a lot better
- [ ] 2. Can be better
- [ ] 3. OK
- [ ] 4. Doing well
- [ ] 5. Doing great

<table>
<thead>
<tr>
<th>Imminent risk of homelessness</th>
<th>Tenancy failing</th>
<th>Emerging tenancy challenges</th>
<th>Sustaining tenancy</th>
<th>Tenancy area of strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>High risk relationships (e.g. Violence, harassment)</td>
<td>Moderate risk relationships</td>
<td>Low risk relationships</td>
<td>Some positive relationships</td>
<td>Positive relationships</td>
</tr>
<tr>
<td>Isolated from support / social networks</td>
<td>Trouble managing conflict</td>
<td>Limited support / social networks</td>
<td>Some support / social networks</td>
<td>Strong connections to support / social networks</td>
</tr>
<tr>
<td>Highly vulnerable or unsafe</td>
<td>Limited support / social networks</td>
<td>Able to manage conflict</td>
<td>No health or safety concerns</td>
<td>Healthy and well</td>
</tr>
<tr>
<td></td>
<td>Moderately vulnerable or unsafe</td>
<td>Low vulnerability</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Strengths or improvements for the tenant since last review.**

**Concerns for the tenant since last review.**

**BELOW: FOR FINAL REVIEW ONLY**

**Overall, how was your experience of working alongside SYT, re: this tenancy**

- [ ] 1. Can be a lot better
- [ ] 2. Can be better
- [ ] 3. OK
- [ ] 4. Doing well
- [ ] 5. Doing great

**What worked well? What was helpful about the partnership with the SYT project?**

**What could be improved? Please note any learnings to guide future work.**
# Appendix 5: SYT screening form

**Sustaining Young Tenancies**

**First Meeting Form**

The BYS Sustaining Young Tenancies Project is about helping people to keep their housing and work toward their goals. BYS is independent from government and any other housing provider. All information you provide will be kept confidential and only shared if you give us permission to. See consent form.

<table>
<thead>
<tr>
<th>Client Name:</th>
<th>Also known as:</th>
<th>Date of Birth:</th>
<th>Worker</th>
<th>Date Completed</th>
<th>Housing Provider:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Address:**

**Phone/other contact:**

**Country of Birth:**

- CALD ☐ Yes ☐ No
- Identifies as:
  - Aboriginal ☐
  - Torres Strait Islander ☐
  - Neither ☐
  - Australian South Sea Islander ☐

**Language at Home:**

- Migrant/refugee ☐ Yes ☐ No

**Household:**

- Single: ☐
- Couple: ☐
- Associated Children: ☐

**Gender:**

- Male ☐
- Transgender ☐
- Female ☐
- Do not exclusively identify as male or female ☐
- Gender not listed here. Describe: ___

**Personal Pronoun:**

- He/His ☐
- She/Hers ☐
- They/Theirs ☐
- Pronoun not listed here: ___

**Other services or supports involved:**

## My Housing / My Home

1. Do you feel positive about your housing? __________

2. Do you feel confident to ask someone for help if things aren’t going well with your housing? (landlord, tenancy officer, family, friend) __________

3. Have there been problems with your housing in the past? (unsafe, moved around a lot) __________

4. Can you see yourself being stable in your home in 12 months’ time? __________

**Risk: Is your tenancy at risk right now? (NTR, NTL, other) Yes ☐ No ☐ Total: __________**

### Additional Info:

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
</table>

## My Day

1. Do you have things to do that make you feel happy most days a week? (fulfilled) __________

2. Do you/have you ever studied or worked regularly? __________

3. Does anything get in the way of you doing activities you enjoy? __________

4. In 6 months’ time, can you see yourself participating in study/work/another activity that makes you happy? __________

**Additional Info:**

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
</table>
### My Money

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you happy with the way you currently earn your money?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Do you have enough $ to cover your living expenses? (any $ left over, need reg. financial help?)</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Is there anybody that thinks you owe them money? (any debts, anyone standing over you)</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>In 2-3 years, can you see yourself feeling good about money?</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Additional Info:  

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>O. Can be a lot better</td>
<td>1. Can be better</td>
</tr>
<tr>
<td>2. OK</td>
<td>3. Doing Well</td>
</tr>
<tr>
<td>4. Doing Great</td>
<td></td>
</tr>
</tbody>
</table>

### My Relationships

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have enough people that you enjoy spending time with?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Do you have anyone that you can rely on?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Do you have any relationships that don’t feel good? (stressful, disrespectful, unsafe or putting your tenancy at risk)</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Do you feel confident you can build positive relationships in the future?</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Additional Info:  

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>O. Can be a lot better</td>
<td>1. Can be better</td>
</tr>
<tr>
<td>2. OK</td>
<td>3. Doing Well</td>
</tr>
<tr>
<td>4. Doing Great</td>
<td></td>
</tr>
</tbody>
</table>

### How would you describe your support from... (circle)

- **Family** Great/Good/OK/Poor/Very Poor or None
- **Partner** Great/Good/OK/Poor/Very Poor or None
- **Other** Great/Good/OK/Poor/Very Poor or None

### My Caring Roles – Do you currently have a role looking after others? (look after children, family, friends, pets)

**Yes** □ **No** □ **IF YES** – Complete the following questions.

1. Is being a caregiver a positive part of your life?                     | Yes | No | TOTAL |
|                                                                         | 1   | 0  |       |
2. If caring for another, are you happy with how you’re managing?        | 1   | 0  |       |
3. Does caring for another, make it hard for you to look after yourself? | 0   | 1  |       |
4. Do you see your caregiving role having a positive impact in your life in 2-3 years time? | 1   | 0  |       |

**Risk:** If parenting, are there any immediate risks to the safety of your children?

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>O. Can be a lot better</td>
<td>1. Can be better</td>
</tr>
<tr>
<td>2. OK</td>
<td>3. Doing Well</td>
</tr>
<tr>
<td>4. Doing Great</td>
<td></td>
</tr>
</tbody>
</table>
### Looking Back (acknowledge can be hard, uncomfortable for some).

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Looking back, were things mostly positive for you? (when you were younger)</td>
<td>1</td>
</tr>
<tr>
<td>2. Were there people around who you could rely on?</td>
<td>1</td>
</tr>
<tr>
<td>3. Has Child Safety ever been involved in your life? (ever a child safety order)</td>
<td>0</td>
</tr>
<tr>
<td>4. In 2-3 years, do you see yourself drawing strength from your past experiences?</td>
<td>1</td>
</tr>
</tbody>
</table>

### My Mind / Body / Spirit (mental and physical health, spirituality)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are you doing things to keep yourself healthy? (exercise, sleep, food)</td>
<td>1</td>
</tr>
<tr>
<td>2. Are you confident to ask for support if things aren’t going well with your health?</td>
<td>1</td>
</tr>
<tr>
<td>3. Is there anything going now that you think could negatively impact your health?</td>
<td>0</td>
</tr>
<tr>
<td>4. Do you see yourself being in good health in 2-3 years?</td>
<td>1</td>
</tr>
</tbody>
</table>

### My Experience with Alcohol and other Drugs (inc. tobacco, marijuana, pharmaceuticals, caffeine, sniffing, other illegal or legal)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is your current use of Alcohol or Drugs a positive part of your life?</td>
<td>1</td>
</tr>
<tr>
<td>2. Are you confident to ask for support around your use? (safe use, reduction)</td>
<td>1</td>
</tr>
<tr>
<td>3. Has your use ever made things hard for you? (hold down a job, keep your housing or engage in meaningful relationships, or with your health)</td>
<td>0</td>
</tr>
<tr>
<td>4. In 2-3 years, do you see yourself in control of your use?</td>
<td>1</td>
</tr>
</tbody>
</table>

### My Experience with Violence (power, control, losing temper easily)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Would you seek support around violence if you needed to? (your or others’ violence)</td>
<td>1</td>
</tr>
<tr>
<td>2. Can you identify more people in your life that are safe than unsafe?</td>
<td>1</td>
</tr>
<tr>
<td>3. Has violence made things hard for you in the last 12 months?</td>
<td>0</td>
</tr>
<tr>
<td>4. Do you see violence playing a role in your life in 2-3 years?</td>
<td>0</td>
</tr>
</tbody>
</table>

#### Risk: Is violence involved in your life at the moment?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence in childhood/family home?</td>
<td>0</td>
</tr>
<tr>
<td>In the last 6 months:</td>
<td>0</td>
</tr>
<tr>
<td>□ Past □ Current</td>
<td>0</td>
</tr>
<tr>
<td>Violence from someone else?</td>
<td>0</td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td>0</td>
</tr>
<tr>
<td>Sexual/Physical Abuse/Assault?</td>
<td>0</td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td>0</td>
</tr>
<tr>
<td>Used violence/threats yourself?</td>
<td>0</td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td>0</td>
</tr>
</tbody>
</table>
### My Experience with the Law (eg. contracts, family, criminal, SPER, tenancy)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

### My Ability

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tenant</th>
<th>BYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
<tr>
<td>Tenant</td>
<td>BYS</td>
</tr>
</tbody>
</table>

### Additional Info:

### Sexuality:
- Straight
- Gay
- Lesbian
- Queer
- Asexual
- Pansexual
- Same-sex attracted
- Neutral
- Undecided
- Other (describe)

### Disability:
- Physical/Sensory
- Learning/Behavioural
- Intellectual/Developmental
- Other

### Reasons for Contact:

- Disability Related
- General life stress/emotional wellbeing (not mental health issue)
- Self-esteem/self confidence
- Suicidal thinking
- Self-harming behaviours
- Problematic gambling
- Transition from custodial arrangements
- Transition from foster care or other care
- Discrimination including racial and sexual
- Cultural issues – Indigenous
- Cultural Issues – Migrant/refugee
- Seeking access to general BYS youth programs
- Seeking general information not specific to an identified issue
- Unknown/Not stated

---

Are you willing to be contacted in the future to help us measure how effective our services have been in helping you make changes in your life?  

- ☐ Yes  ☐ No  
  If Yes: What is the best way to contact you?
Is there any other information you would like to share to help us to support you, or anything else you would like support with? (or other comments/notes)

<table>
<thead>
<tr>
<th>Immediate Risks Total</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Assessment Total</td>
<td></td>
</tr>
<tr>
<td>Can be a lot better</td>
<td>Can be better</td>
</tr>
<tr>
<td>Staff: Confidentiality Agreement Completed</td>
<td>Yes</td>
</tr>
<tr>
<td>BYS Client Profile Completed in SRS</td>
<td>Yes</td>
</tr>
</tbody>
</table>
B6.4 Young Person Exchange of Information Consent Form

This form is to be completed at the beginning of intake with a young person with the support of a staff member. The staff member is responsible for explaining to the young person the need to collect their information and how it will be used by BYS.

I, ___________________________ D.O.B. __________________ hereby give
BYS staff permission to collect, provide and receive my personal information as nominated below:

<table>
<thead>
<tr>
<th>Personal information may be provided to and received from the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Centrelink</td>
</tr>
<tr>
<td>☐ Medical (please specify):</td>
</tr>
<tr>
<td>☐ Housing Provider/s (please specify):</td>
</tr>
<tr>
<td>☐ School/TAFE/Other Education Services (please specify):</td>
</tr>
<tr>
<td>☐ Family (please specify which family members):</td>
</tr>
<tr>
<td>☐ Other (please specify):</td>
</tr>
</tbody>
</table>

I understand that:

| ☐ Only relevant information will be collected about me to provide appropriate support to assist me to reach my personal goals |
| ☐ BYS will only provide and / or ask for relevant information about me to those nominated on this form |
| ☐ Should BYS need to provide information about me with another party or seek information from another party without my consent, BYS will notify me beforehand, where possible |
| ☐ BYS may be legally obliged to provide information about me in certain circumstances, for example to the Police |
| ☐ I will have opportunities to view, update and / or correct my information |
| ☐ BYS shall collect and store my information in a safe and secure way, ensuring my privacy is protected |
| ☐ I can speak with a support worker at any time to withdraw my consent for my information to be shared |
| ☐ BYS may use images of me taken while participating in BYS activities if I give my written consent (please note: there is a separate consent form for this and it can be signed at a later date if you consent to us using your photos for annual reports, brochures and in other ways to promote BYS) |

I consent to:

| ☐ My personal information being collected by BYS for the purpose of providing me with support. |
| ☐ My personal information being de-identified and used for data collection and reporting purposes, including data and reports to government departments that provide funding to BYS, and for evaluation and research. |
| ☐ My personal information being shared with those people / organisations nominated above |

Young person’s signature: ___________________________ Date: __________________

BYS staff name: ___________________________ Date: __________________

Signature: ___________________________ Date: __________________
Appendix 6: SYT initial assessment form

Sustaining Young Tenancies Program

Assessment

This program aims to support young people to keep their housing and reach their own goals. Thank you sharing your stories with us, to help us get to know your support needs and achievements. These questions help us to understand how much things change for you over time and identify any areas that are priorities for us to support you with in the future. We will ask you to answer some of these questions again later, to help us to make sure that the support we provide is working well and to improve our services. BYS is independent from government and any other housing provider. All information you provide will be kept confidential. We may share some results with our funders or other stakeholders, but only in ways that ways that do not identify you (see consent form).

<table>
<thead>
<tr>
<th>Client Name:</th>
<th>Worker</th>
<th>Date Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Also known as:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Address:</th>
<th>Current Phone/Contact:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Time since started SYT</th>
<th>Notice to Remedy / Leave recently</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Support level at the moment:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ HIGH (Frequent, crisis or intensive support)</td>
<td></td>
</tr>
<tr>
<td>□ MEDIUM (Regular planned support for working towards goals)</td>
<td></td>
</tr>
<tr>
<td>□ LOW (Semi-regular check-ins with mostly independent progress towards goals)</td>
<td></td>
</tr>
</tbody>
</table>

1. **What are your most important support needs/priorities** at the moment, from the SYT program? (lots of people feel like they need help in all the areas, but for now just choose your top priorities for the couple of months):

- [ ] **Life skills and feeling capable** – daily living skills (eg managing household tasks, budgeting, healthy eating etc); planning/decision making, dealing with the systems/agencies in your life, self-responsibility
- [ ] **Stable housing, food, money and other resources** – meeting basic needs
- [ ] **Safety** – reduced risks from alcohol and other drug use, violence or other risks to you or your children
- [ ] **Connection with others** – having good social support and support from services/professionals
- [ ] **Health** – dealing with physical health issues, maintaining healthy lifestyle and self care
- [ ] **Mental/Emotional Wellbeing** – feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment
- [ ] **Relationships** – with partners, friends, family, children, support workers
- [ ] **Participating** – in work, education, meaningful/enjoyable activities, belonging and having a voice

**Comments:**
2. Thinking about your goals for confidence and capability in day-to-day life skills. How are you going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel like I am managing day to day life tasks or achieving goals</td>
<td>Not what I’d like it to be but not the worst it could be.</td>
<td>Feel like I do sort-of ok at this but would like to improve my skills and confidence in day to day living skills</td>
<td>I feel pretty confident in my skills in dealing with day-to-day things I need to do in life.</td>
<td>I feel capable and confident to deal with life and achieve my goals</td>
</tr>
</tbody>
</table>

Comments about why?

3. Thinking about your goals for meeting your basic living needs (eg safe stable housing, food, furniture, enough money to get by), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel like I can get what I need to get by in life</td>
<td>Not what I’d like it to be but not the worst it could be</td>
<td>Feel like I do sort-of ok at having what I need to get by in, but would like to improve this</td>
<td>I feel like most of my needs are pretty well covered</td>
<td>I feel confident that I have the basics I need in life.</td>
</tr>
</tbody>
</table>

Comments about why?

4. Thinking about your goals for keeping yourself (and any children in your life) safe (eg from risky drug or alcohol use, violence, abuse or other risks), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel like I can keep myself (and kids) safe</td>
<td>Not what I’d like it to be but not the worst it could be</td>
<td>Feel like I do sort-of ok but would like to improve how I keep myself (or kids) safe</td>
<td>I do pretty well at keeping myself (and kids) safe most of the time</td>
<td>I feel confident that I am able to keep myself (and kids) safe in life</td>
</tr>
</tbody>
</table>

Comments about why?
5. Thinking about your goals for feeling connected with good social/service/community/cultural supports, how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER” Struggling/feel disconnected or unable to get the support I need</td>
<td>“COULD BE BETTER” Not what I’d like it to be but not the worst it could be</td>
<td>“OKAY” Feel like I do sort-of ok with this but would like to be more connected with people and supports.</td>
<td>“DOING WELL” I am pretty well connected with most of the social, service and/or community support I need</td>
<td>“DOING GREAT” I feel confident I am strongly connected socially, with support services and with my community</td>
</tr>
</tbody>
</table>

Comments about why?

6. Thinking about your goals for your health (managing any illnesses, looking after yourself lifestyle), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER” Struggling/feel unwell or like I need lots of support for my health</td>
<td>“COULD BE BETTER” Not what I’d like it to be but not the worst it could be</td>
<td>“OKAY” Feel like I do sort-of ok with this but would like to make changes to improve my health</td>
<td>“DOING WELL” I am doing pretty well at looking after my health/keeping myself as healthy as I can be</td>
<td>“DOING GREAT” I feel confident I can look after my health as well as possible</td>
</tr>
</tbody>
</table>

Comments about why?

7. Thinking about your goals for your mental and emotional health (eg feeling pretty good about yourself, managing any mental health issues, confident self-identity etc), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER” Struggling/feel like I need lots of support with mental/emotional health and wellbeing</td>
<td>“COULD BE BETTER” Not what I’d like it to be but not the worst it could be</td>
<td>“OKAY” Feel like I do sort-of ok with this but would like to make changes/improve my mental/emotional wellbeing</td>
<td>“DOING WELL” I am doing pretty well at managing mental health and positive emotional wellbeing</td>
<td>“DOING GREAT” I feel confident about managing my mental and emotional wellbeing</td>
</tr>
</tbody>
</table>

Comments about why?
8. Thinking about your goals for healthy relationships (eg family, friends, children, workers), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel like I can deal well with relationships</td>
<td>Not what I’d like it to be but not the worst it could be</td>
<td>Feel sort-of ok about making/keeping relationships</td>
<td>I am doing pretty well at maintaining/keeping positive relationships</td>
<td>I feel confident in having healthy, positive relationships in my life</td>
</tr>
</tbody>
</table>

Comments about why?

9. Thinking about your goals for participating in working, studying, other meaningful/enjoyable activities, how do you feel you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel I have work, study or other meaningful activities in my life</td>
<td>Not what I’d like it to be but not the worst it could be</td>
<td>Feel sort-of ok about my work, study or other activity options, but would like this to improve</td>
<td>I am doing pretty well in work, study or other meaningful activities</td>
<td>I feel like am actively participating in life and achieving my goals</td>
</tr>
</tbody>
</table>

Comments about why?

10. Overall – How are you at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 1 | 2 | 3 | 4 | 5 |

11. Other goals I have, or things I would like support with, are:

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

12. My vision for how I would like my life to be (in the next five years or so) is:

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
Appendix 7: SYT progress review form

### Sustaining Young Tenancies Program

**Progress Review**

This program aims to support young people to keep their housing and reach their goals. Thank you sharing your information to help us get to know your support needs and achievements. These questions help us to understand how much things have changed for you over the last while, and to identify any areas that are priorities for us to support you with in the future. It also helps us to make sure that the services we provide are generally working to benefit young people, and to improve our services. BYS is independent from government and any other housing provider. All information you provide will be kept confidential. We may share some results with our funders or other stakeholders, but only in ways that do not identify you (see consent form).

<table>
<thead>
<tr>
<th>Client Name:</th>
<th>Worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Also known as:</td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td>Completed</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Address:</th>
<th>Current Phone/Contact:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Time since started SYT</th>
<th>Review Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Changes in living situation since last review:</th>
<th>Notice to Remedy / Leave since last review</th>
<th>Yes □ □ No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Support level at the moment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ HIGH (Frequent, crisis or intensive support)</td>
</tr>
<tr>
<td>□ MEDIUM (Regular planned support for working towards goals)</td>
</tr>
<tr>
<td>□ LOW (Semi-regular check-ins with mostly independent progress towards goals)</td>
</tr>
</tbody>
</table>

1. **What are your most important support needs/priorities at the moment, from the SYT program? (lots of people feel like they need help in lots of the areas, but for now just choose your main priorities for the next couple of months):**
   - Life skills and feeling capable – daily living skills (e.g., managing household tasks, budgeting, healthy eating etc.);
   - planning/decision making, dealing with the systems/agencies in your life, self-responsibility/independence.
   - Stable housing, food, money and other resources – meeting basic needs
   - Safety – reduced risks from alcohol and other drug use, violence or other risks to you or your children
   - Connection with others – having good social support and support from services/professionals
   - Health – dealing with physical health issues, maintaining healthy lifestyle and self-care
   - Mental/Emotional Wellbeing – feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment
   - Relationships – with partners, friends, family, children, support workers
   - Participating – in work, education, meaningful/enjoyable activities, belonging and having a voice

**Comments:**
Other things I would like help with, since the last review, are:

2. What has changed the most for you since the last review? (Choose only the areas in which there has been significant change since the last time this form was done)

☐ Life skills and feeling capable – daily living skills (e.g. managing household tasks, budgeting, healthy eating etc); planning/decision making; dealing with the systems/agencies in your life, self-responsibility/independence.
☐ Stable housing, food, money and other resources – meeting basic needs
☐ Safety – reduced risks from alcohol and other drug use, violence or other risks of yourself or your children
☐ Connection with others – having good social support and support from services/professionals
☐ Health – dealing with physical health issues, maintaining healthy lifestyle and self care
☐ Mental/Emotional Wellbeing – feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment
☐ Relationships – with partners, friends, family, children, support workers
☐ Participating – in work, education, meaningful/enjoyable activities, belonging and having a voice

Comments:

3. Which of the following have you noticed happening for you since our last review?

☐ I have been able to talk with my SYT support worker about my goals and review how I am going
☐ I have learned about things that put my tenancy at risk and/or ways to keep stable housing
☐ I have used support when I needed it to avoid my housing being at risk, or avoid other life risks
☐ I have managed, by myself, to avoid things that might have put my housing at risk
☐ I have made some good decisions for myself that I think will work out well in the future
☐ I have negotiated effectively to get my needs met (e.g. with Centrelink, housing providers etc)
☐ I have solved a problem in my life with as good an outcome as possible
☐ I have felt confident to do something positive for myself that I wouldn’t have done before
☐ I have improved my income or become better able to manage my money
☐ I have stood up for myself, or spoken up about something important to me
☐ I have experienced something else positive – Describe:

Comments:

Other changes I have made/goals I have achieved/things I have noticed are:
4. Thinking about your goals for confident day-to-day life skills... How are you going at the moment?

<table>
<thead>
<tr>
<th>&quot;COULD BE A LOT BETTER&quot;</th>
<th>&quot;COULD BE BETTER&quot;</th>
<th>&quot;OKAY&quot;</th>
<th>&quot;DOING WELL&quot;</th>
<th>&quot;DOING GREAT&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/not making progress in my life skills, confidence/capability</td>
<td>My progress is not what I’d like it to be but not the worst it could be</td>
<td>Starting to feel a bit more confident and capable</td>
<td>I am making good progress towards feeling capable and confident in life</td>
<td>I am making huge progress, feel capable and confident to deal with life and achieve my goals</td>
</tr>
</tbody>
</table>

Comments about why?

5. Thinking about your goals for meeting your basic living needs (eg safe stable housing, food, furniture, enough money to get by), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>&quot;COULD BE A LOT BETTER&quot;</th>
<th>&quot;COULD BE BETTER&quot;</th>
<th>&quot;OKAY&quot;</th>
<th>&quot;DOING WELL&quot;</th>
<th>&quot;DOING GREAT&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/not making progress in meeting my basic needs</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td>Starting to feel a bit more like I can get my needs met</td>
<td>I am making good progress towards getting my basic needs covered</td>
<td>I am making great progress, feel confident that I have the basics I need in life</td>
</tr>
</tbody>
</table>

Comments about why?

6. Thinking about your goals for keeping yourself (or any children in your life) safe eg from risky drug or alcohol use, violence, abuse or other risks, how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>&quot;COULD BE A LOT BETTER&quot;</th>
<th>&quot;COULD BE BETTER&quot;</th>
<th>&quot;OKAY&quot;</th>
<th>&quot;DOING WELL&quot;</th>
<th>&quot;DOING GREAT&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/don’t feel like I am making progress in keeping myself (or kids) safe</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td>Starting to feel a bit more like I can keep myself (or kids) safe</td>
<td>I am making good progress towards feeling I (or kids) can be reliably safe in life</td>
<td>I am making great progress, feel confident that I can keep myself (or kids) safe in life</td>
</tr>
</tbody>
</table>

Comments about why?
7. Thinking about your goals for connection with social/service/community/cultural supports, how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER”</td>
<td>Struggling/don’t feel like I am progressing in connecting with other people or supports</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“COULD BE BETTER”</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“OKAY”</td>
<td>Starting to feel a bit more like I can get the support I need in life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING WELL”</td>
<td>I am making good progress towards feeling connected/supported in my life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING GREAT”</td>
<td>I am making great progress/am well connected to the supports I want in life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments about why?

8. Thinking about your goals for your physical health (managing illness, looking after yourself), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER”</td>
<td>Struggling/not progressing in meeting my health goals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“COULD BE BETTER”</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“OKAY”</td>
<td>Starting to feel a bit more like I can deal with health issues and keep myself healthy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING WELL”</td>
<td>I am making good progress towards dealing with my health and being as healthy as I can be</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING GREAT”</td>
<td>I am making great progress/feel confident I can keep myself healthy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments about why?

9. Thinking about your goals for your mental and emotional health (eg feeling pretty good about yourself, managing any mental health issues, confident self-identity etc), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>“COULD BE A LOT BETTER”</td>
<td>Struggling/not progressing in looking after my mental/emotional health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“COULD BE BETTER”</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“OKAY”</td>
<td>Starting to feel a bit more like I can manage my mental and emotional wellbeing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING WELL”</td>
<td>I am making good progress towards managing mental health and positive emotional wellbeing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“DOING GREAT”</td>
<td>I am making great progress/feel confident about managing my mental and emotional wellbeing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments about why?
10. Thinking about your goals for healthy relationships (e.g., family, friends, children, workers), how do you think you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/not progressing in meeting my relationship goals</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td>Starting to feel a bit more like I can make/keep healthy positive relationships</td>
<td>I am making good progress towards developing and keeping positive healthy relationships</td>
<td>I am making great progress/feels confident in having positive relationships</td>
</tr>
</tbody>
</table>

Comments about why?

11. Thinking about your goals for participating in work, study or other meaningful/enjoyable activities, how do you feel you are going at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggling/not progressing in my work/study/participating goals</td>
<td>My progress is what I’d like it to be but not the worst it could be</td>
<td>Starting to feel a bit more like I can participate in work, study or other meaningful activities</td>
<td>I am making good progress towards my study, work or other meaningful activity goals</td>
<td>I am making great progress/feel like a am actively participating and achieving my goals</td>
</tr>
</tbody>
</table>

Comments about why?

12. Overall – How are you at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
</table>

Comments about why?

13. Is there any other feedback you would like to give the SYT program about what is working well for you, or how you think that the SYT program could improve in how it supports you?
14. Please share a story about the most significant change that has happened for you/in your life since our last review.

MY STORY:

________________________________________________________________________
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If my story had a title it would be:

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What helped/contributed to this change?

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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Confidentiality:

- Can we share parts/all of your story (without your personal details) with funders/other services to show what we have learned about supporting young people to achieve positive change? Yes ☐ No ☐

- Can we share parts/all of your story (without your personal details) with others for the purpose of fundraising or publicity that helps us to keep helping young people? Yes ☐ No ☐

SIGNATURE: ____________________________
Appendix 8: SYT final review form

Sustaining Young Tenancies Program

FINAL Review

This program aims to support young people to keep their housing and reach their goals. Thank you sharing your information to help us better understand your experiences of our program. These questions help us to understand how much things have changed for you over the last while to make sure that the services we provide are working to benefit young people, and to improve our services. SYS is independent from government and any other housing provider. All information you provide will be kept confidential. We may share some results with our funders or other stakeholders, but only in ways that ways that do not identify you (See consent form).

Client Name: 

Also known as:

Worker

Date
Completed

Current Address:

Current Phone/Contact:

Time since started SYT

Review Number:

Changes in living situation since last review:

Notice to Remedy / Leave since last review

Yes

No

Support level at the moment:

HIGH (Frequent, crisis or intensive support)

MEDIUM (Regular planned support for working towards goals)

LOW (Semi-regular check-ins with mostly independent progress towards goals)

1. What has changed the most for you since the last time we did this review? (choose only the areas in which there has been significant change since the last time this form was done)

☐ Life skills and feeling capable – daily living skills (eg managing household tasks, budgeting, healthy eating etc); planning/decision making, dealing with the systems/agencies in your life, self-responsibility

☐ Stable housing, food, money and other stuff I need to get by – meeting basic needs

☐ Safety – reduced risks from alcohol and other drug use, violence or other risks to you or your children

☐ Connection with others – having good social support and support from services/professionals

☐ Health – dealing with physical health issues, maintaining healthy lifestyle and self care

☐ Mental/Emotional Wellbeing – feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment

☐ Relationships – with partners, friends, family, children, support workers

☐ Participating – in work, education, meaningful/enjoyable activities, belonging and having a voice

Comments:

Other changes I have made/goals I have achieved/things I have noticed since last review are:
2. Thinking right back to when you first started getting support from the SYT program, what would you say have been the most significant areas of change for you overall?

- Life skills and feeling capable – daily living skills (e.g., managing household tasks, budgeting, healthy eating etc); planning/decision making, dealing with the systems/ agencies in your life, self-responsibility/independence.
- Stable housing, food, money and other stuff I need to get by – meeting basic needs
- Safety – reduced risks from alcohol and other drug use, violence or other risks of yourself or your children
- Connection with others – having good social support and support from services/professionals
- Health – dealing with physical health issues, maintaining healthy lifestyle and self care
- Mental/Emotional Wellbeing – feeling ok about yourself and life, dealing with anxiety/depression, sense of self-identity and empowerment
- Relationships – with partners, friends, family, children, support workers
- Participating – in work, education, meaningful/enjoyable activities, belonging and having a voice

Comments:

Other changes I have made/goals I have achieved/things I have noticed since I started with the SYT program are:

3. Thinking about the support you have received from SYT … which of the following do you think have been most helpful for you?

- Learning more about tenancy and what I need to do to get/keep stable housing
- Learning new information or gaining new knowledge that was generally useful in life
- Support to change some of the ways I was behaving so that I could keep my housing and achieve my goals
- Getting material support (e.g., money, food, furniture or other basics)
- Gaining a stronger connection to people/community who can support me when I need it
- Getting linked to the services that I needed
- Help to negotiate the system to achieve my goals (e.g., Centrelink, housing, child safety or other agencies)
- Support to develop my goals in life and plan the steps I can take to reach those goals
- Developing better ways of dealing with problems in life without everything falling apart
- Finding ways of improving my own general wellbeing so that I can manage life and housing better
- The experience of the positive relationship I developed with the workers
- The way the workers worked closely with the other agencies in my life to coordinate my support
- The way that the workers took time to really understand my individual needs and goals
- The way that the workers came to me, rather than me having to travel to meet them at their office
- The way that the program helped me develop my own independence so I need less support in the future
- The way that the program was professionally run – organised, skilled workers with professional behaviours.

Comments:
4. Thinking about your goals for being confident to manage day to day life well... How did you go with achieving these goals?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don’t feel like I made much progress/I don’t feel very confident or capable in daily living.</td>
<td>My progress was not what I would have liked, but not the worst it could be/my confidence is not so great in daily living skills.</td>
<td>While I could have made more progress, I did ok in feeling confident and capable in daily living.</td>
<td>I made good progress towards feeling confident and capable in my daily living goals.</td>
<td>I made great progress/feel confident and capable to deal with life and achieve my goals.</td>
</tr>
</tbody>
</table>

Comments about why?

5. Thinking about your goals for meeting your basic living needs (eg stable housing, food, furniture, enough money to get by), how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don’t feel like I made much progress towards getting my needs met/I still don’t have a lot of what I need to get by.</td>
<td>My progress was not what I’d like it to be but not the worst it could be/I may have some but not most of what I need to get by.</td>
<td>While I could have made more progress, I did ok in finding ways to meet my needs and some of them are able to be met.</td>
<td>I made good progress towards getting my basic needs covered and most of them are now able to be met.</td>
<td>I made great progress/feel confident that I have the basics I need in life.</td>
</tr>
</tbody>
</table>

Comments about why?

6. Thinking about your goals for keeping yourself (or any children in your life) safe eg from risky drug or alcohol use, violence, abuse or other risks, how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don’t feel like I made much progress in keeping myself (or kids) safe/I’m not at all confident I can stay safe (or kids).</td>
<td>My progress was not what I’d like it to be but not the worst it could be/I may not be able to stay safe in the future (or keep kids safe).</td>
<td>While I could have made more progress, I did ok in finding ways to keep myself (or kids) safe/I am pretty safe (and kids).</td>
<td>I made good progress towards feeling I (or kids) can be reliably safe in life/I feel pretty good about my safety (and kids).</td>
<td>I made great progress/feel confident that I can keep myself (and kids) safe in life.</td>
</tr>
</tbody>
</table>

Comments about why?
7. Thinking about your goals for feeling connected with good social/services/cultural/community supports, how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&quot;Could be a lot better&quot; I don't feel I made much progress towards being connected the way I want in life/feel disconnected and unsupported.</td>
</tr>
<tr>
<td>2</td>
<td>&quot;Could be better&quot; My progress was not what I'd like it to be but not the worst it could be/any connections and support could be better.</td>
</tr>
<tr>
<td>3</td>
<td>&quot;Okay&quot; While I could have made more progress, I did ok in connecting with different kinds of support, I have some connections/connections/support.</td>
</tr>
<tr>
<td>4</td>
<td>&quot;Doing well&quot; I made good progress towards feeling connected/supported in different ways in my life, and feel pretty good about my connections/support.</td>
</tr>
<tr>
<td>5</td>
<td>&quot;Doing great&quot; I made great progress/am well connected to the supports and/or people I want in my life.</td>
</tr>
</tbody>
</table>

Comments about why?

8. Thinking about your goals for your health (managing any illnesses, looking after yourself and living a healthy lifestyle), how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&quot;Could be a lot better&quot; I don't feel I made much progress towards managing my health/my health needs me to do more to look after it.</td>
</tr>
<tr>
<td>2</td>
<td>&quot;Could be better&quot; My progress was not what I'd like it to be but not the worst it could be/my health could be better if I managed it better.</td>
</tr>
<tr>
<td>3</td>
<td>&quot;Okay&quot; While I could have made more progress, I did ok in finding ways to manage my health and live a healthy lifestyle/my health is ok.</td>
</tr>
<tr>
<td>4</td>
<td>&quot;Doing well&quot; I made good progress towards dealing with my health and being as healthy as I can be/I am doing pretty well at looking after my health.</td>
</tr>
<tr>
<td>5</td>
<td>&quot;Doing great&quot; I made great progress/feel confident I can keep myself healthy.</td>
</tr>
</tbody>
</table>

Comments about why?

9. Thinking about your goals for your mental and emotional health (e.g. feeling pretty good about yourself, managing any mental health issues, confident self-identity etc), how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&quot;Could be a lot better&quot; I don't feel I made much progress towards managing my mental health and emotional wellbeing/am not in a good mental-emotional state.</td>
</tr>
<tr>
<td>2</td>
<td>&quot;Could be better&quot; My progress was not what I'd like it to be but not the worst it could be/my mental and emotional wellbeing could be better.</td>
</tr>
<tr>
<td>3</td>
<td>&quot;Okay&quot; While I could have made more progress, I did ok in finding ways to manage/improve my mental health and emotional wellbeing/I feel ok at the moment.</td>
</tr>
<tr>
<td>4</td>
<td>&quot;Doing well&quot; I made good progress towards managing my mental health and having positive emotional wellbeing/I feel pretty good.</td>
</tr>
<tr>
<td>5</td>
<td>&quot;Doing great&quot; I made great progress/feel confident about managing my mental health and having positive emotional wellbeing.</td>
</tr>
</tbody>
</table>

Comments about why?
10. Thinking about your goals for healthy relationships (eg family, friends, children, workers), how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don't feel like I made much progress towards having positive healthy relationships/my relationships could be a lot better.</td>
<td>My progress was not what I'd like it to be but not the worst it could be/I could be doing more to improve/manage my relationships.</td>
<td>While I could have made more progress, I did ok in finding ways to have positive healthy relationships with others in my life/My relationships are ok.</td>
<td>I made good progress towards developing and keeping positive healthy relationships/My relationships are pretty good at the moment.</td>
<td>I made great progress/I feel confident I can have positive healthy relationships in my life.</td>
</tr>
</tbody>
</table>

Comments about why?

11. Thinking about your goals for participating in working, studying, meaningful/enjoyable activities, feeling like you belong to a community, how did you go with achieving these goals?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don't feel I made much progress/I don't participate in work, study or other meaningful activity in my life.</td>
<td>My progress was not what I'd like it to be but not the worst it could be/I'd like to participate more in work, study or other meaningful activity in my life.</td>
<td>While I could have made more progress, I did ok in finding ways to reach my work, study or other meaningful activities goals/I have ok participation in these things.</td>
<td>I made good progress towards my study, work or other meaningful activity goals/I am participating in things pretty well at the moment.</td>
<td>I made great progress/I feel like a am actively participating and achieving my goals</td>
</tr>
</tbody>
</table>

Comments about why?

12. Overall – How are you at the moment?

<table>
<thead>
<tr>
<th>“COULD BE A LOT BETTER”</th>
<th>“COULD BE BETTER”</th>
<th>“OKAY”</th>
<th>“DOING WELL”</th>
<th>“DOING GREAT”</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Comments about why?

13. Is there any general feedback you would like to give us about what worked well or what could be improved about the SYT program?
14. Please share a story about the most significant change that has happened for you/in your life, overall, since you started getting support from the SYT program

MY STORY:


If my story had a title it would be:


What helped/contributed to this change?


Confidentiality:

- Can we share parts/all of your story (without your personal details) with funders/other services to show what we have learned about supporting young people to achieve positive change? Yes ☐ No ☐

- Can we share parts/all of your story (without your personal details) with others for the purpose of fundraising or publicity that helps us to keep helping young people? Yes ☐ No ☐

SIGNATURE: ________________________________
Appendix 9: SYT statement of income and expenditure

The following financial information is drawn from OASIS acquittals for the SYT initiative.

<table>
<thead>
<tr>
<th>Date</th>
<th>Income</th>
<th>Other income</th>
<th>Total income</th>
<th>Salaries and wages</th>
<th>Other expenditure</th>
<th>Total expenditure</th>
<th>Surplus/ loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>30/09/16</td>
<td>$130,433.00</td>
<td></td>
<td>$130,433.00</td>
<td>$94,432.96</td>
<td>$36,811.13</td>
<td>$131,244.09</td>
<td>-$811.09</td>
</tr>
<tr>
<td>31/12/16</td>
<td>$158,152.00</td>
<td></td>
<td>$158,152.00</td>
<td>$111,265.07</td>
<td>$47,595.85</td>
<td>$158,860.92</td>
<td>-$708.92</td>
</tr>
<tr>
<td>31/03/17</td>
<td>$158,149.00</td>
<td></td>
<td>$158,149.00</td>
<td>$107,188.97</td>
<td>$48,272.02</td>
<td>$155,460.99</td>
<td>$2,688.01</td>
</tr>
<tr>
<td>30/06/17</td>
<td>$158,149.00</td>
<td></td>
<td>$158,149.00</td>
<td>$122,641.00</td>
<td>$31,261.00</td>
<td>$153,902.00</td>
<td>$4,247.00</td>
</tr>
<tr>
<td>30/09/17</td>
<td>$158,148.99</td>
<td>$1,475.17</td>
<td>$159,624.16</td>
<td>$123,459.32</td>
<td>$29,119.86</td>
<td>$152,579.18</td>
<td>$7,044.98</td>
</tr>
<tr>
<td>Total</td>
<td>$763,031.99</td>
<td>$1,475.17</td>
<td>$764,507.16</td>
<td>$558,987.32</td>
<td>$193,059.86</td>
<td>$752,047.18</td>
<td>$12,459.98</td>
</tr>
</tbody>
</table>
AHURI Research Centres

AHURI Research Centre—Curtin University
AHURI Research Centre—RMIT University
AHURI Research Centre—Swinburne University of Technology
AHURI Research Centre—The University of Adelaide
AHURI Research Centre—The University of New South Wales
AHURI Research Centre—The University of South Australia
AHURI Research Centre—The University of Sydney
AHURI Research Centre—University of Tasmania