



# The cost-effectiveness of homelessness programs: a first assessment

# Volume 2 – appendices

authored by

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## **ACRONYMS**

ABS Australian Bureau of Statistics

AIHW Australian Institute of Health and Welfare

CAP Crisis Accommodation Program

DCD Department for Community Development (Western Australia)

DCP Department for Child Protection (Western Australia)

DCS Department of Corrective Services (Western Australia)

DHW Department of Housing and Works (Western Australia)

DV Domestic Violence

HILDA Household, Income and Labour Dynamics in Australia

NDC National Data Collection

NDCA National Data Collection Agency

PAG Project Advisory Group

PRSAP Private Rental Support and Advocacy Program
SAAP Supported Accommodation Assistance Program

SHAP Supported Housing Assistance Program

TASS Transitional Accommodation and Support Service

WA Western Australia

WHOQOL-BREF World Health Organization Quality of Life (BREF Australian

Version)

# 1 APPENDIX A HOMELESSNESS PROGRAMS IN WESTERN AUSTRALIA: SUPPLEMENTARY TABLES

Table A1: SAAP clients and support periods, WA, 2002-03 to 2005-06

	2002-03	2003-04	2004-05	2005-06
Number of agencies operating in WA	125	130	129	127
Support periods				
Client support periods	14950	13800	14550	12750
Accompanying children support periods	8050	7900	8650	8300
Clients and Accompanying Children				
Clients	9300	8450	8850	8350
Accompanying children	6000	5900	6100	5400
Median age (Clients)	30	30	30	31
Per cent of clients with more than one support period	27.5	27.2	26.6	24.6
Gender of Clients per cent)				
Male	42.2	33.8	32.5	32.3
Female	57.8	66.2	67.5	67.7
Total	100.0	100.0	100.0	100.0
Cultural and Linguistic Diversity of Clients (per	r cent)			
Indigenous Australians	17.7	38.7	38.6	40.7
Other Australian-born	68.1	45.4	44.6	44.2
People born overseas	14.2	14.5	16.7	15.1
Total	100.0	98.6	99.9	100.0
Cultural and Linguistic Diversity of the WA pop	oulation (10	years and o	ver) (per ce	ent)
Indigenous Australians	3.2	3.0	3.0	3.0
Other Australian-born	67.5	64.8	64.8	64.8
People born overseas	29.3	32.2	32.2	32.2
Total	100.0	100.0	100.0	100.0
Support Periods by Client Group (per cent)				
Male alone, under 25	11.2	10.8	10.4	11.1
Male alone, 25+	25.1	20.3	16.9	17.3
Female alone, under 25	11.3	10.9	11.3	12.6
Female alone, 25+	22	22	20.4	19.9
Couple, no children	1.6	1.8	2.1	2.1
Couple with children	2.1	3.1	4.2	4.0
Male with children	0.6	0.6	0.6	0.6
Female with children	25.3	29.7	32.7	32.1
Other	0.7	0.9	1.3	0.3
Total	99.9	100.1	99.9	100
Support Periods by Primary Target Group (per				
Young people	15.2	17.3	19.5	19.1
Single men only	22.1	19.7	10.2	10.4
÷				

Single women only	2.4	2.6	2.2	2.7
Families	4.2	3.5	3.1	3.6
Women escaping domestic violence	41.5	45.6	46.8	44.8
Cross-target/ multiple/ general	14.5	11.4	18.2	19.5
Total	99.9	100.1	100	100.1

Source: Homeless People in SAAP, SAAP National Data Collection, Annual Report, Western Australia Supplementary Tables for the years 2002-03 to 2005-06.

Note: Estimates have been weighted by the NDCA to account for agency non-participation and client non-consent.

Table A2a: SAAP support periods: main reason for seeking assistance, WA, 2002-03 to 2004-05

Main reason for seeking assistance	2002-03	2003-04	2004-05
Usual accommodation unavailable	10.9	11.6	15.0
Time out from family/other situation	5.6	8.1	8.0
Relationship/family breakdown	10.5	7.4	7.9
Interpersonal conflict	2.8	3.2	3.4
Physical/emotional abuse	3.0	6.4	6.1
Domestic/family violence	22.1	27.9	26.6
Sexual abuse	8.0	0.4	0.4
Financial difficulty	8.9	5.6	7.2
Gambling	0.3	0.0	0.0
Eviction/previous accommodation ended	11.2	7.2	6.6
Drug/alcohol/substance abuse	5.0	6.8	3.2
Emergency accommodation ended	1.4	0.7	0.7
Recently left institution	1.6	1.2	1.2
Psychiatric illness	1.6	1.0	1.1
Recent arrival to area with no means of support	5.5	5.4	5.7
Itinerant	3.0	3.0	2.8
Other	5.8	4.0	4.0
Total	100.0	100.0	100.0

Source: AIHW (2006c), Homeless People in SAAP, SAAP National Data Collection, Annual Report, Western Australia Supplementary Tables 2000-01 to 2004-05.

Note: Estimates have been weighted to account for agency non-participation and client non-consent.

Table A2b: SAAP support periods: main reason for seeking assistance, WA, 2005-06

Main reason for seeking assistance	2005-06
Time out from family/other situation	9.4
Relationship/family breakdown	10.3
Interpersonal conflict	2.4
Sexual abuse	0.5
Domestic/family violence	33.1
Physical/emotional abuse	3.4
Gambling	0.1
Budgetary problems	1.4
Rent too high	0.5
Other financial difficulty	4.8
Overcrowding issues	1.9
Eviction/asked to leave	5.5
Emergency accommodation ended	1.3
Previous accommodation ended	4.3
Mental health issues	1.1
Problematic drug/alcohol/substance abuse	2.9
Psychiatric illness	0.9
Other health issues	1.0
Gay/lesbian/transgender issues	
Recently left institution	1.2
Recent arrival to area with no means of support	5.2
Itinerant	2.5
Other	6.1
Total	100.0

Source: Homeless People in SAAP, SAAP National Data Collection, Annual Report, Western Australia Supplementary Tables 2005-06

Note: Estimates have been weighted to account for agency non-participation and client non-consent.

Table A3: SAAP clients, presenting reason for seeking assistance, wave 1 client survey (per cent) (n=104)

				Main Presenting Reason for Seeking Assistance (n=94)			
	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SAAP-DV and single women	SAAP- single men	SAAP-families & general	
Time out from family/other situation	13.5	21.3	26.3	2.9	6.7	0.0	
Relationship/family breakdown	51.4	19.1	21.1	5.7	11.1	7.1	
Interpersonal conflict	29.7	4.3	15.8	5.7	2.2	7.1	
Sexual abuse	13.5	0.0	10.5	0.0	0.0	0.0	
Domestic/family violence	81.1	0.0	26.3	71.4	0.0	7.1	
Physical/emotional abuse	67.6	8.5	31.6	8.6	4.4	7.1	
Gambling	0.0	4.3	10.5	0.0	4.4	0.0	
Budgeting problems	8.1	14.9	21.1	0.0	0.0	0.0	
Rent too high	5.4	6.4	0.0	0.0	2.2	0.0	
Other financial difficulty	21.6	23.4	26.3	0.0	2.2	7.1	
Overcrowding issues	8.1	2.1	42.1	0.0	2.2	7.1	
Eviction/asked to leave	16.2	17.0	42.1	5.7	11.1	14.3	
Emergency accommodation ended	2.7	12.8	10.5	0.0	4.4	0.0	
Previous accommodation ended	5.4	23.4	26.3	0.0	11.1	7.1	
Mental health issues	13.5	14.9	15.8	0.0	0.0	0.0	
Problematic drug/alcohol/substance use	13.5	25.5	10.5	0.0	2.2	0.0	
Psychiatric illness	2.7	4.3	0.0	0.0	0.0	0.0	
Other health issues	0.0	8.5	5.3	0.0	2.2	0.0	
Gay/lesbian/transgender issues	0.0	0.0	0.0	0.0	0.0	0.0	
Recently left Institution	2.7	6.4	0.0	0.0	6.7	0.0	
Recent arrival to area with no means of support	0.0	8.5	10.5	0.0	6.7	7.1	
Itinerant	2.7	0.0	10.5	0.0	0.0	7.1	
Other	2.7	25.5	15.8	0.0	20.0	21.4	
Total				100.0	100.0	100.0	

Table A4: SAAP clients, needs identified, support and referrals provided, wave 1 client survey (per cent) (n=101)

	Needs Identified			Support Provided			Referrals Provided		
	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SAAP- DV and single women	SAAP- single men	SAAP- families & general
SAAP/CAP accommodation	94.6	88.6	80.0	86.5	88.6	65.0	5.4	6.8	15.0
Assistance to obtain/maintain short-term accommodation	29.7	27.3	5.0	18.9	31.8	0.0	2.7	0.0	0.0
Assistance to obtain/maintain medium-term accommodation	27.0	15.9	21.1	18.9	15.9	15.0	0.0	0.0	0.0
Assistance to obtain/maintain independent living	37.8	20.5	25.0	32.4	22.7	20.0	10.8	6.8	5.0
Assistance to obtain/maintain government allowance	32.4	25.0	15.0	29.7	27.3	10.0	8.1	6.8	10.0
Employment and training assistance	8.1	4.5	15.0	2.7	4.5	5.0	0.0	2.3	5.0
Financial assistance/material aid	62.2	50.0	55.0	62.2	43.2	50.0	2.7	22.7	20.0
Financial counselling and support	29.7	9.1	65.0	24.3	9.1	40.0	5.4	2.3	10.0
Incest/sexual assault support	2.7	0.0	20.0	2.7	0.0	10.0	0.0	0.0	5.0
Domestic/family violence support	73.0	0.0	35.0	62.2	0.0	20.0	5.4	0.0	15.0
Family/relationship support	24.3	11.4	60.0	24.3	11.4	35.0	0.0	2.3	10.0
Emotional support	75.7	61.4	70.0	67.6	63.6	45.0	2.7	2.3	5.0
Assistance with gambling problem	2.7	4.5	20.0	2.7	2.3	5.0	0.0	0.0	10.0
Living skills/personal development	18.9	4.5	55.0	13.5	4.5	40.0	0.0	0.0	5.0
Assistance with legal issues/court support	37.8	22.7	45.0	18.9	20.5	15.0	18.9	4.5	10.0
Advice/information	78.4	70.5	70.0	64.9	68.2	45.0	2.7	6.8	5.0
Retrieval/storage/removal of personal belongings	37.8	6.8	15.0	24.3	2.3	15.0	5.4	2.3	10.0
Advocacy/liaison on behalf of the client	56.8	27.3	65.0	51.4	27.3	40.0	0.0	9.1	0.0
Psychological services	8.1	4.5	5.0	10.8	4.5	5.0	0.0	6.8	0.0
Specialist counselling services	24.3	6.8	25.0	16.2	2.3	10.0	2.7	6.8	10.0
Psychiatric services	8.1	2.3	5.0	0.0	2.3	0.0	2.7	4.5	0.0
Pregnancy support	2.7	0.0	0.0	2.7	0.0	0.0	2.7	0.0	0.0

	Needs Ident	Needs Identified			Support Provided			Referrals Provided		
	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SAAP- DV and single women	SAAP- single men	SAAP- families & general	
Family planning Support	0.0	2.3	5.0	0.0	2.3	0.0	0.0	2.3	5.0	
Drug/alcohol support or intervention	16.2	22.7	30.0	13.5	20.5	5.0	5.4	6.8	5.0	
Physical disability services	0.0	2.3	0.0	0.0	2.3	0.0	0.0	0.0	0.0	
Intellectual disability services	0.0	0.0	5.0	0.0	0.0	0.0	0.0	0.0	0.0	
Culturally specific services	5.4	0.0	20.0	5.4	0.0	5.0	0.0	0.0	0.0	
Interpreter services	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Assistance with immigration services	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Health/medical services	35.1	29.5	40.0	16.2	29.5	15.0	13.5	4.5	15.0	
Meals	56.8	86.4	35.0	51.4	95.5	30.0	0.0	4.5	15.0	
Laundry/shower facilities	86.5	86.4	10.0	78.4	95.5	10.0	0.0	4.5	5.0	
Recreation	40.5	47.7	20.0	37.8	81.8	10.0	0.0	2.3	5.0	
Transport	62.2	4.5	50.0	54.1	4.5	45.0	0.0	0.0	20.0	
Other – first	10.8	6.8	20.0	10.8	6.8	20.0	0.0	0.0	10.0	
Other – second	5.4	0.0	10.0	5.4	0.0	10.0	0.0	0.0	5.0	

Table A5: SAAP clients' children, needs identified, support and referrals provided, wave 1 client survey (per cent) (n=28)

	Needs identified		Support p	provided	Referrals provided		
	SAAP- DV and single women	SAAP- general & families	SAAP- DV and single women	SAAP- general & families	SAAP- DV and single women	SAAP- general & families	
SAAP/CAP accommodation	94.1	90.9	82.4	36.4	5.9	9.1	
School liaison	47.1	45.5	41.2	18.2	17.6	0.0	
Child care	64.7	0.0	52.9	0.0	17.6	9.1	
Help with behavioural problems	35.3	27.3	23.5	18.2	17.6	27.3	
Sexual/physical abuse support	11.8	18.2	11.8	0.0	0.0	0.0	
Skills education	23.5	27.3	17.6	0.0	0.0	9.1	
Structured play/skill development	35.3	18.2	35.3	9.1	0.0	9.1	
Access arrangements	17.6	0.0	11.8	0.0	17.6	0.0	
Advice/information	58.8	36.4	58.8	9.1	0.0	0.0	
Advocacy	47.1	27.3	47.1	9.1	0.0	0.0	
Specialist counselling	47.1	36.4	29.4	9.1	35.3	9.1	
Culturally specific services	11.8	36.4	11.8	9.1	0.0	0.0	
Health/medical services	29.4	45.5	17.6	0.0	17.6	0.0	
Meals	41.2	9.1	35.3	9.1	0.0	9.1	
Showers/hygiene	70.6	9.1	70.6	9.1	0.0	9.1	
Recreation	70.6	36.4	70.6	18.2	0.0	27.3	
Transport	70.6	36.4	64.7	27.3	0.0	9.1	
Other – first	0.0	9.1	0.0	9.1	0.0	9.1	
Other – second	0.0	0.0	0.0	0.0	0.0	0.0	

Table A6: SHAP clients, 2004-05 to 2005-06

	2004-05				2005-06			
	1 July 20 Decembe	004 – 31 er 2004 (1)	1 January 2005	1 January 2005 – 30 June 2005		05 – 31 er 2005 (3)	1 January 2006 – 30 June 2006 (4)	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Number of SHAP clients								
Aboriginal	256	75.3	235	67.9	242	68.0	202	70.4
Non-Aboriginal	84	24.7	111	32.1	114	32.0	85	29.6
Total	340	100.0	346	100.0	356	100.0	287	100.0
Length of Time on the Program								
0-6 months	138	40.6	208	55.8	140	42.6	110	40.0
7-9 months	50	14.7	62	16.6	58	17.6	45	16.4
10-12 months	47	13.8	37	9.9	48	14.6	34	12.4
13-18 months	29	8.5	28	7.5	41	12.5	41	14.9
19 months plus	47	13.8	38	10.2	42	12.8	45	16.4
Unknown	29	8.5	0	0.0				0
Total	340	100.0	373	(2) 100.0	329	(2) 100.0	275	(2) 100.0
Regional Breakdown of Referrals	and Clients	S						
<u>Metropolitan</u>								
Referrals	116	55.5	110	47.4	79	46.7	80	53.3
Clients	149	43.8	144	41.6	135	37.9	124	43.2
South-West and Southern								
Referrals	44	21.1	44	19.0	35	20.7	23	15.3
Clients	63	18.5	74	21.4	77	21.6	56	19.5
Remainder WA								
Referrals	49	23.4	78	33.6	55	32.5	47	31.3
Clients	128	37.6	128	37.0	144	40.4	107	37.3
<u>Total</u>								
Referrals	209	100.0	232	100.0	169	100.0	150	100.0
Clients	340	100.0	346	100.0	356	100.0	287	100.0

	2004-05				2005-06			
	1 July 2004 – 31 December 2004 (1)		1 January 2005	1 January 2005 – 30 June 2005		1 July 2005 – 31 December 2005 (3)		2006 – 30 6 (4)
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Homeless Advisory Service								
Referrals	15							
Clients	15							
Outcome of Referrals in Reporting	Period							
Accepted on to the program			207	67.6	202	67.3	105	66.9
Tenant declined to participate			10	3.3	22	7.3	13	8.3
Accepted on to the waiting list			23	7.5	31	10.3	21	13.4
On assessment			45	14.7	12	4.0	10	6.4
Agency considered the tenant unsuitable			12	3.9	4	1.3	4	2.5
Alternative support program/ agency in place			5	1.6	14	4.7	0	0.0
Referred to another agency			0	0.0	9	3.0	0	0.0
Tenant vacated prior to assessment			4	1.3	6	2.0	4	2.5
Total			306	(3) 100.0	300	(3) 100.0	157	(3) 100.0

Source: DHW SHAP agency six monthly reports.

Notes (1) For the June-December 2004-05 reporting period, the estimates include clients from three special SHAP projects: the SHAP Homeless Advisory Service Tenant Support Service, an intensive family support program and a community housing headleasing special project. For all other reporting periods, the estimates exclude the first two of these projects except in the case of the July-December 2005 estimates where estimates for the community housing headleasing project are yet to be included in the figures.

- (2) The number of clients listed for the time spent on the program item exceeds/falls short of the total number of clients on the program.
- (3) The number of clients for which a referral outcome is reported exceeds the number of client referrals in the reporting period.
- (4) Estimates for the 1 January 2006 to 30 June 2006 reporting period are incomplete. Not all agencies have used the same reporting structure leading to some inconsistencies in the estimates.

Table A7: Needs identified, support provided, referrals arranged, SHAP and PRSAP clients, wave 1 client survey, (n=53)

	Needs id	entified	Support	Provided	Referrals	Arranged
		Private rental		Private rental		Private rental
	SHAP	support	SHAP	support	SHAP	support
Visits to tenants and family	100.0	91.9	93.8	81.1	12.5	13.5
Advice/information	93.8	94.6	93.8	86.5	0.0	16.2
Assist resolve problems identified by Homeswest, landlord or real estate agent	75.0	81.1	75.0	75.7	12.5	13.5
Assist resolve dispute with Homeswest, landlord or real estate agent	25.0	67.6	18.8	64.9	0.0	8.1
Financial assistance/material aid	62.5	75.7	43.8	62.2	37.5	45.9
Financial counselling and support	56.3	48.6	31.3	37.8	37.5	35.1
Assist obtain/maintain Centrelink/government allowance	50.0	27.0	37.5	18.9	12.5	5.4
Employment and training assistance	6.3	10.8	6.3	5.4	6.3	5.4
Domestic/family violence support	12.5	18.9	12.5	18.9	0.0	2.7
Family/relationship support inc. child management	37.5	21.6	37.5	21.6	6.3	0.0
Living skills/home skills/personal development	31.3	16.2	31.3	16.2	6.3	0.0
Assistance with legal issues/court support	12.5	27.0	12.5	18.9	0.0	8.1
Advocacy/liaison on behalf of client	31.3	40.5	31.3	37.8	6.3	5.4
Liaison with schools with respect to children	0.0	5.4	0.0	5.4	0.0	2.7
Liaison with child care agencies/workers with respect to children	0.0	2.7	0.0	2.7	0.0	5.4
Services provided to children	6.3	2.7	6.3	2.7	6.3	0.0
Department for Community Development liaison family reunification	12.5	2.7	12.5	0.0	0.0	2.7
Drug/alcohol support/rehabilitation/intervention	31.3	10.8	25.0	5.4	0.0	0.0
Health/medical services	31.3	10.8	18.8	10.8	18.8	2.7
Mental health assessments	6.3	10.8	6.3	8.1	0.0	5.4
Mental health support services	25.0	16.2	18.8	13.5	12.5	10.8
Drug/alcohol support services	12.5	10.8	6.3	2.7	6.3	0.0
Education and TAFE services	6.3	10.8	0.0	8.1	0.0	0.0
Yard mowing/rubbish collection	25.0	13.5	18.8	8.1	12.5	2.7
Organisation of restraining orders	6.3	2.7	6.3	0.0	0.0	2.7
Transport referrals to other agencies	6.3	54.1	6.3	45.9	6.3	2.7
Other	0.0	13.5	0.0	10.8	0.0	5.4

Table A8: Private rental support and advocacy program (PRSAP) clients

	2004-05				2005-06			
	1 July 20 Decembe		1 Januar 30 June 2	,	1 July 20 Decembe		1 Januar 30 June 2	y 2005 to 2006
				Per		Per		Per
	Number	Per cent	Number	cent	Number	cent	Number	cent
Number of Cases								
Couple and dependent children – households	66	18.6	78	18.8	96	18.1	111	17.8
Couple – households	14	3.9	15	3.6	13	2.5	19	3.0
Female single person and dependent children – households	139	39.2	176	42.4	233	44.0	262	42.0
Male single person and dependent children – households	37	10.4	25	6.0	22	4.2	12	1.9
Female single person – households	61	17.2	53	12.8	68	12.9	99	15.9
Male single person – households	30	8.5	51	12.3	79	14.9	104	16.7
Extended family – households	4	1.1	7	1.7	14	2.6	15	2.4
Unrelated individuals – households	4	1.1	0	0.0	0	0.0	2	0.3
Others – households	0	0.0	10	2.4	4	0.8	0	0.0
Total	355	100.0	415	100.0	529	100.0	624	100.0
Number of Cases Closed in the Reporting Period	248		257		315		396	
Number of One-off Contacts	23		627		655		639	
Number of Individual Clients (adults)								
Male	398	42.7	277	43.1	228	35.7	268	34.3
Female	533	57.3	365	56.9	411	64.3	514	65.7
Unspecified	132	14.2	30	4.7	5	0.8	0	0.0
Total	931	100.0	642	100.0	639	100.0	782	100.0
Aboriginal	93	10.0	49	7.6	100	15.6	99	12.7
Non-Aboriginal	838	90.0	593	92.4	539	84.4	683	87.3
Total	931	100.0	642	100.0	639	100.0	782	100.0

	2004-05				2005-06			
	1 July 2004 – 31 December 2004			1 January 2005 – 30 June 2005		1 July 2005 – 31 December 2005		y 2005 to 2006
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Source of Referral								
Department for Community Development	24	5.9	6	3.7	20	6.3	19	5.1
Real estate company	101	24.7	23	14.3	23	7.2	29	7.8
Owner/manager	1	0.2	1	0.6	7	2.2	6	1.6
Department of Housing and Works	8	2.0	12	7.5	4	1.3	4	1.1
Department of Corrective Services	5	1.2	2	1.2	4	1.3	3	8.0
Local community groups	74	18.1	67	41.6	103	32.2	84	22.6
Self	113	27.6	30	18.6	103	32.2	153	41.1
Other sources	83	20.3	20	12.4	56	17.5	74	19.9
Total	409	100.0	161	100.0	320	100.0	372	100.0
Number of households who received services of different types								
One-to-one in-home practical assistance/skill building activities	91		226		496		432	
Skill building	1		228		294		207	
Information and referrals	204		237		527		383	
Referral/linkage to other services	72		124		392		274	
Negotiation	222		394		429		356	
Tenancy advice/information/support/education	372		450		744		760	
Emergency relief	109		290		386		351	
Counselling	78		155		136		87	
Other	61		242		500		694	

Table A9: Needs and support provided, referrals arranged, TASS and re-entry clients, wave 1 client survey (n=15)

		Pre-Release		Post-Release	
	Needs Identified	Support provided by agency prior to release	Support provided by other services prior to release	Support provided by agency post- release	Post- release Referral Arranged
Advice/information, general	83.3	86.7	13.3	86.7	20.0
Assistance to obtain/maintain short-term or crisis accommodation	66.7	60.0	6.7	73.3	13.3
Assistance to obtain/maintain medium-term accommodation	26.7	14.3	0.0	33.3	6.7
Assistance to obtain/maintain independent accommodation	60.0	53.3	13.3	60.0	13.3
General support planning	80.0	86.7	0.0	80.0	6.7
Maintain/obtain Centrelink/government payments	73.3	60.0	33.3	46.7	13.3
Advocacy/liaison on behalf of the client	60.0	60.0	13.3	60.0	13.3
Employment and training	73.2	20.0	13.3	66.7	20.0
Numeracy and literacy training	0.0	0.0	0.0	0.0	0.0
Family/relationship support	33.3	20.0	0.0	20.0	0.0
Parole support	46.7	46.7	6.7	40.0	13.3
Assistance with legal issues/court support	20.0	6.7	0.0	26.7	0.0
Financial assistance/material aid	66.7	26.7	6.7	66.7	26.7
Financial counselling and support	40.0	20.0	6.7	46.7	13.3
Transport	53.3	13.3	0.0	53.3	6.7
Driver's licence	26.7	13.3	6.7	33.3	20.0
Life skills development and mentoring	0.0	20.0	6.7	40.0	0.0
Medication in relation to a drug problem	6.7	0.0	0.0	13.3	0.0
Drug/alcohol support/intervention	53.3	33.3	6.7	60.0	20.0
Health/medical services – physical	20.0	6.7	6.7	26.7	6.7
Health/medical services – mental health	6.7	0.0	6.7	6.7	6.7
Counselling to address domestic violence	6.7	0.0	6.7	6.7	0.0
Support to TASS/Re-Entry Link client to date – Other	7.1	0.0	0.0	14.3	0.0

Table A10: TASS and re-entry link, wave 1 client survey

Length of sentence (weeks) (n=14)	
– Mean	112
– Median	91
Total time in jail over the lifetime (weeks) (n=14)	
– Mean	241
– Median	188
Number of separate occasions in jail (n=13)	
– Mean	4.2
– Median	3
Accommodation circumstances immediately following release from pris (n=15)	on (per cent)
Friends/acquaintances/relatives	6.7
TASS-assisted accommodation	40.0
Non-TASS targeted assisted accommodation for ex-prisoners	13.3
Other government or non-government related accommodation programs	40.0
Requires stable accommodation to obtain access to or custody of children cent) (n=10)	(per 46.2
Release provisions of the client (per cent) (n=15)	
Finite sentence	13.3
CEO parole	13.3
Parole	66.7
Other	6.7

- 2 APPENDIX B CLIENT SURVEY: CLIENT SOCIO-DEMOGRAPHIC BACKGROUND, NEEDS AND OUTCOMES
- B1 Client socio-demographic background

Table B1: Socio-demographic characteristics, wave 1 client survey

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re-entry	Total
Gender (per cent) (n=179)							
Female	100.0	0.0	59.1	68.8	74.4	0.0	50.8
Males	0.0	100.0	40.9	31.3	25.6	100.0	49.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Median age of the client (n=178)	35.5	35	34	36.5	36	32.5	34.5
Australian-born (per cent) (n=179)	65.8	75.0	95.5	87.5	66.7	81.3	75.4
Aboriginal (per cent) (n=174)	29.7	13.3	40.9	25.0	20.5	6.7	22.4
Family type of the presenting unit (per cent) (n=179	<b>)</b>						
Single person	52.6	95.8	31.8	37.5	25.6	93.8	58.1
Couple	0.0	2.1	0.0	6.3	5.1	0.0	2.2
Single with child(ren)	47.4	0.0	27.3	37.5	56.4	6.3	29.6
Couple with child(ren)	0.0	0.0	40.9	12.5	12.8	0.0	8.9
Other family type	0.0	2.1	0.0	6.3	0.0	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Highest post-school educational qualification of the	e client (per cent) (l	n=164)					
No post-school qualification	41.7	31.8	85.7	53.3	55.6	25.0	47.6
Trade certificate	5.6	45.5	14.3	20.0	8.3	33.3	21.3
Diploma	8.3	4.5	0.0	6.7	8.3	8.3	6.1
Degree	13.9	0.0	0.0	0.0	11.1	0.0	5.5
Other post-school qualification	30.6	18.2	0.0	20.0	16.7	33.3	19.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Living arrangements around the age of 14 (per cen	t) (n=170)						
Both own mother and father	33.3	63.8	33.3	33.3	53.8	41.7	47.1
Own mother or father and stepmother/stepfather	11.1	6.4	4.8	13.3	12.8	16.7	10.0
Mother/father only	25.0	10.6	4.8	13.3	12.8	8.3	13.5
Foster parents	5.6	0.0	0.0	6.7	2.6	8.3	2.9
Living with friends/acquaintances or other relatives	11.1	8.5	23.8	20.0	15.4	8.3	13.5

Living alone	8.3	0.0	14.3	0.0	0.0	0.0	3.5
Living in an institutional/residential setting	2.8	2.1	9.5	6.7	0.0	8.3	3.5
Sleeping rough	2.8	2.1	9.5	6.7	2.6	0.0	3.5
Other	0.0	6.4	0.0	0.0	0.0	8.3	2.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table B2: Income, labour force status and education and training enrolment status, wave 1 client survey

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re- entry	Total
Main income source on entry into support (per cent) (	(n=173)						
No Income	0.0	12.5	5.3	0.0	2.6	7.7	5.2
No income but registered/awaiting benefit	2.6	0.0	0.0	0.0	0.0	0.0	0.6
Government income support payments	86.8	64.6	89.5	100.0	92.3	92.3	83.8
Wages/salary/own business	2.6	20.8	5.3	0.0	5.1	0.0	8.1
Spouse/partner's income	2.6	0.0	0.0	0.0	0.0	0.0	0.6
WorkCover/compensation	2.6	0.0	0.0	0.0	0.0	0.0	0.6
Other sources	2.6	2.1	0.0	0.0	0.0	0.0	1.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Level of client's own individual gross weekly income	(per cent) (n=	168)					
No income	2.7	12.8	5.3	0.0	2.7	16.7	6.5
Less than \$200	5.4	14.9	5.3	6.3	2.7	8.3	7.7
\$200-399	59.5	51.1	57.9	56.3	51.4	33.3	53.0
\$400-599	21.6	12.8	15.8	37.5	37.8	41.7	25.0
\$600-799	10.8	6.4	15.8	0.0	2.7	0.0	6.5
\$800 and over	0.0	2.1	0.0	0.0	2.7	0.0	1.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Labour force status on entry into support (per cent) (	n=169)						
Employed full-time	0.0	14.6	0.0	0.0	5.3	0.0	5.3
Employed part-time	2.7	10.4	10.5	13.3	18.4	0.0	10.1
Unemployed	27.0	41.7	42.1	20.0	47.4	83.3	40.8
Not in the Labour Force	70.3	33.3	47.4	66.7	28.9	16.7	43.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re- entry	Total
Main income source on entry into support (per c	ent) (n=179)						
No Income	0.0	12.5	4.5	0.0	2.6	6.3	5.0
No income but registered/awaiting benefit	2.6	0.0	0.0	0.0	0.0	0.0	0.6
Government income support payments	86.8	64.6	90.9	100.0	92.3	93.8	84.4
Wages/salary/own business	2.6	20.8	4.5	0.0	5.1	0.0	7.8
Spouse/partner's income	2.6	0.0	0.0	0.0	0.0	0.0	0.6
WorkCover/compensation	2.6	0.0	0.0	0.0	0.0	0.0	0.6
Other sources	2.6	2.1	0.0	0.0	0.0	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Level of client's own individual gross weekly inc	ome (per cent) (n=	174)					
No income	2.7	12.8	4.5	0.0	2.7	13.3	6.3
Less than \$200	5.4	14.9	4.5	6.3	2.7	26.7	9.2
\$200-399	59.5	51.1	59.1	56.3	51.4	26.7	52.3
\$400-599	21.6	12.8	18.2	37.5	37.8	33.3	24.7
\$600-799	10.8	6.4	13.6	0.0	2.7	0.0	6.3
\$800 and over	0.0	2.1	0.0	0.0	2.7	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Labour force status on entry into support (per ce	ent) (n=175)						
Employed full-time	0.0	14.6	0.0	0.0	5.3	0.0	5.1
Employed part-time	2.7	10.4	13.6	13.3	18.4	0.0	10.3
Unemployed	27.0	41.7	40.9	20.0	47.4	86.7	41.7
Not in the labour force	70.3	33.3	45.5	66.7	28.9	13.3	42.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re- entry	Total
How long since the client last worked for pay for two v	veeks or mor	e (per cent	(n=170)				
Currently working	5.4	19.1	15.0	6.7	18.9	7.1	13.5
Within a year	16.2	55.3	15.0	26.7	16.2	21.4	28.2
1-2 years ago	18.9	8.5	5.0	6.7	16.2	42.9	14.7
More than 2 years	54.1	17.0	55.0	40.0	43.2	28.6	38.2
Never held a job	5.4	0.0	10.0	20.0	5.4	0.0	5.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Enrolled in education and training programs (per cent	) (n=174)						
Not enrolled in education or training programs	91.7	97.9	95.5	100.0	78.9	25.0	85.6
Education and training courses – school, TAFE, universities	5.6	0.0	0.0	0.0	10.5	6.3	4.0
External study or education/training courses in prison	0.0	0.0	0.0	0.0	0.0	68.8	6.3
Other training or study option	2.8	2.1	4.5	0.0	10.5	0.0	4.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table B3: Residential location and mobility, wave 1 client survey

	SAAP- DV and Single Women	SAAP- Single Men	SAAP- Families & General	SHAP	Private Rental Support	TASS and Re- entry	Total
Does the client have a family home that they are	presently i	not living	in? (per cei	nt) (n=175)	)		
No	75.7	29.8	61.9	93.8	92.3	80.0	67.4
Yes, domestic violence restriction order in place	13.5	2.1	28.6	6.3	2.6	13.3	9.1
Yes, but conflict with family makes difficult to return	5.4	27.7	0.0	0.0	2.6	0.0	9.1
Yes, but released from prison, difficult to return	0.0	4.3	0.0	0.0	0.0	0.0	1.1
Yes, but cost or distance barriers	0.0	21.3	0.0	0.0	0.0	0.0	5.7
Yes, but wish to be independent	2.7	12.8	9.5	0.0	2.6	6.7	6.3
Yes, other reason	2.7	2.1	0.0	0.0	0.0	0.0	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
The number of times the client has moved in the	last 2 year	rs (n=171)					
None	2.7	4.3	18.2	40.0	25.6	25.0	15.2
One move	10.8	10.9	9.1	6.7	20.5	8.3	12.3
2 moves	21.6	10.9	22.7	6.7	23.1	33.3	18.7
3 – 5 moves	35.1	39.1	27.3	40.0	30.8	25.0	33.9
6 – 10 moves	21.6	21.7	18.2	6.7	0.0	0.0	13.5
More than 10 moves	8.1	13.0	4.5	0.0	0.0	8.3	6.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
The number of times children have moved school	ol in the las	st two year	rs (of client	s with chi	ldren) (per	cent) (n=7	6)
None	22.2	60.0	42.9	83.3	60.0	66.7	50.0
One move	16.7	20.0	7.1	16.7	12.0	33.3	14.5
Two moves	16.7	0.0	14.3	0.0	20.0	0.0	13.2
3 – 5 moves	38.9	10.0	21.4	0.0	8.0	0.0	17.1
6 – 10 moves	5.6	10.0	14.3	0.0	0.0	0.0	5.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

### **B2** Client needs

The *Client Survey* uses a modified version of the Thomson Goodall needs assessment form (Thomson Goodall Associates Pty Ltd 2003) to present information on client needs. Assessment of client need is caseworker based and is determined on the basis of whether clients require intensive and/or ongoing support to meet a particular need.

The needs specified in the *Client Survey* are based on those listed in the Thomson Goodall form, together with an additional item on sexuality and gender issues. The specified needs are:

- → Housing:
- → Experiences of violence;
- → Income and money management issues;
- → Health, nutrition and hygiene;
- → Access to appropriate services;
- → Behaviour which is challenging to others;
- Personal safety and wellbeing;
- → Sexuality and gender issues;
- → Mental health issues:
- → Alcohol and other drug use which impairs health and the ability to live independently;
- → Disability issues;
- → Accompanying children.

The Thomson Goodall form was modified by adding a number of sub-items to certain specified needs (and excluding a small number of other sub-items), and including the following caseworker assessment items:

- → A client's needs, capabilities and support rating; a value of 1 indicated that the client was unable to manage, meet or resolve the need while, an assessment of 5 indicated that the client was able to manage, meet or resolve the need (1-5 rating):
- → Establishment of client goals/plan of action;
- → Whether the agency has/will be provided/providing support to the client; whether the client has been/will be referred to another agency to receive support;
- → Whether resource constraints at an agency or system-wide level impede progress in meeting the client's needs;
- → Whether the client expressed a contrary view of the agency's need assessment;
- → Whether the client wishes to receive support.

The *Client Survey* also included a 'retrospective' needs assessment sheet to be filled in by caseworkers who were unable to make an assessment of the needs of clients on entry to the program or who recognised at a future point that their initial assessment was incomplete in some way. In the present report, we restrict ourselves to an examination of the prevalence of needs requiring intensive and/or ongoing support across the various homelessness program categories.

As indicated in Table B4, a significant majority of clients (70 per cent) are assessed as requiring intensive and/or ongoing support to obtain/maintain appropriate housing. The

main housing indicators for which clients were assessed as requiring such support included:

- → Financial issues:
- → Difficulties in accessing low cost rental accommodation due to lack of supply;
- → History of housing tenancy problems;
- → Housing eviction and termination notices;
- → Difficulties accessing private/public rental accommodation due to access barriers;
- → Multiple/long-term primary homelessness;
- → Problems arising from extended family and friends staying over.

Caseworkers assessed around half of all clients (47.9 per cent) as requiring intensive and/or ongoing support with income and money management issues. The main indicators included budgeting difficulties, outstanding debts, inadequate income and alcohol and drug misuse. Around 60 per cent of SAAP-DV and Single Women client respondents were assessed as requiring ongoing and/or intensive support with experiences of violence, with the key violence indicators being rape, sexual assault and sexual abuse. Around 20 to 25 per cent of clients were assessed as requiring intensive and/or ongoing support in each of the remaining needs categories.

The Thomson Goodall Associates Pty Ltd (2003) study of high and complex needs in SAAP services provided evidence of the prevalence of clients who presented with a multiplicity of needs requiring intensive and/or ongoing support. A similar picture emerges in the present analysis. For those clients assessed as requiring ongoing and/or intensive support with respect to their needs, 15.0 per cent were assessed as requiring ongoing and/or intensive support with only one major need, 23.1 per cent with two major needs and 21.1 per cent with three major needs (see Table B5). The median number of major needs requiring intensive and/or ongoing support was three, with the mean number of needs being 3.3. Around 40 per cent of clients were assessed as requiring intensive and/or ongoing support across four or more major needs. This evidence suggests that a relatively high number of homelessness program clients present with multiple needs requiring intensive and/or ongoing support. SAAP-DV and Single Women client respondents were more likely than others to require intensive and/or ongoing support across six and seven major needs categories.

Table B4: Major category needs requiring ongoing and/or intensive support, wave 1 client survey (per cent)

						•	
	SAAP-DV and single women	SAAP- single men	SAAP- families & general	SHAP	Private rental support	TASS and re-entry	Total
Does the client require intensive and/or on	going suppo	rt to obtail	n/maintain app	propriate h	ousing? (n=1)	71)	
Yes	76.3	42.2	63.2	93.8	76.9	78.6	67.8
No	23.7	55.6	36.8	6.3	20.5	14.3	30.4
Client needs unclear at this point	0.0	2.2	0.0	0.0	2.6	0.0	1.2
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Major component needs	notices, dif barriers, m family and f	ficulties ac ultiple/long- riends stay	housing tenan cessing privaterm primary ing over, other	e/public re homelessne significant	ntal accommo ess, problems need.	dation due	to access
Does the client require intensive and/or on	going suppo	rt with exp	erience(s) of	violence (n	=172)		
Yes	60.5	8.9	36.8	12.5	15.4	13.3	25.6
No	39.5	91.1	42.1	87.5	84.6	86.7	72.1
Clients needs unclear at this point	0.0	0.0	21.1	0.0	0.0	0.0	2.3
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Major component needs	Rape and s	exual assa	ult, sexual abu	se			
Does the client require intensive and/or on	going suppo	rt with inc	ome and mon	ey manage	ment issues (	(n=171)	
Yes	34.2	31.8	40.0	62.5	71.8	50.0	46.8
No	63.2	63.6	60.0	25.0	28.2	42.9	49.7
Client needs unclear at this point	2.6	2.3	0.0	6.3	0.0	7.1	2.3
No assessment undertaken	0.0	2.3	0.0	0.0	0.0	0.0	0.6
Client declined an assessment on this issue	0.0	0.0	0.0	6.3	0.0	0.0	0.6

Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
Major component peeds	Budgeting	difficulties,	outstanding	debts,	inadequate	income, alcohol	and drug		
Major component needs  Does the client require intensive and/or or	misuse.	ort with hos	Ith nutrition	and hy	raiono (n=17A	7)			
-	23.7	20.0	47.6	25.0	91ene (11=17 <del>4)</del> 10.3	13.3	24.0		
Yes							21.8		
No	76.3	77.8	52.4	75.0	89.7	86.7	77.6		
Client needs unclear at this point	0.0	2.2	0.0	0.0	0.0	0.0	0.6		
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
Major component needs									
Does the client require intensive and/or on	going suppo	ort with acc	essing appro	priate s	services (n=1	71)			
Yes	37.8	15.6	31.6	18.8	25.6	20.0	25.1		
No	62.2	84.4	68.4	81.3	71.8	66.7	73.1		
Client needs unclear at this point	0.0	0.0	0.0	0.0	2.6	13.3	1.8		
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
Major component needs	Court/criminal legal issues								
Does the client require intensive and/or on	going suppo	ort associat	ed with beha	viour w	hich is chall	enging to others	(n=171)		
Yes	5.3	13.3	31.6	6.3	5.1	7.1	10.5		
No	94.7	84.4	68.4	87.5	94.9	92.9	88.3		
Client needs unclear at this point	0.0	2.2	0.0	0.0	0.0	0.0	0.6		
No assessment undertaken	0.0	0.0	0.0	6.3	0.0	0.0	0.6		
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
Major component needs									
Does the client require intensive and/or or	going suppo	ort with pers	sonal safety	and we	llbeing (n=17	<i>(</i> 1 <i>)</i>			
Yes	29.7	17.8	15.8	37.5	23.1	20.0	23.4		
No	64.9	77.8	78.9	56.3	76.9	73.3	72.5		

Client needs unclear at this point	5.4	2.2	5.3	0.0	0.0	6.7	2.9			
No assessment undertaken	0.0	2.2	0.0	6.3	0.0	0.0	1.2			
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0			
Major component needs	Social iso	Social isolation, abuse/exploitation by others								
Does the client require intensive and/or on	going supp	ort with sex	kual/gender	issues (n=17	71)					
Yes	8.1	0.0	0.0	0.0	0.0	0.0	1.8			
No	91.9	100.0	100.0	93.8	100.0	100.0	97.7			
Client needs unclear at this point	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
No assessment undertaken	0.0	0.0	0.0	6.3	0.0	0.0	0.6			
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0			
Major component needs										
Does the client require intensive and/or on	going supp	oort with me	ntal health i	issues (n=17.	3)					
Yes	26.3	11.1	10.0	37.5	17.9	20.0	19.1			
No	73.7	88.9	80.0	56.3	79.5	73.3	78.0			
Client needs unclear at this point	0.0	0.0	10.0	0.0	2.6	6.7	2.3			
No assessment undertaken	0.0	0.0	0.0	6.3	0.0	0.0	0.6			
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0			
Major component needs	Needs no	Needs not being effectively managed								
Does the client require intensive and/or of	ongoing su	pport with a	alcohol/drug	g use that in	npairs health	and the ab	ility to live			
<i>independently (n=173)</i> Yes	10.5	20.0	20.0	18.8	10.3	40.0	17.3			
No	86.8	20.0 77.8	75.0	75.0	87.2	40.0	78.0			
		2.2					76.0 4.6			
Client needs unclear at this point	2.6		5.0	6.3	2.6	20.0				
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0			
Major component needs	Daily livin	Daily living significantly affected by substance misuse.								

Does the client require intensive and/or on	going supp	port with dis	ability issue	es (n=173)			
Yes	10.5	8.9	5.0	12.5	0.0	20.0	8.1
No	86.8	91.1	95.0	81.3	100.0	80.0	90.8
Client needs unclear at this point	2.6	0.0	0.0	6.3	0.0	0.0	1.2
No assessment undertaken	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Major component needs							
Does the client require intensive and/or on	going supp	port with acc	companying	children (n=	:170)		
Yes	23.7	0.0	40.0	25.0	31.6	7.1	20.0
No	76.3	100.0	55.0	75.0	65.8	92.9	78.8
Client needs unclear at this point	0.0	0.0	0.0	0.0	2.6	0.0	0.6
No assessment undertaken	0.0	0.0	5.0	0.0	0.0	0.0	0.6
Client declined an assessment on this issue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Major component needs	Effects of witnessing/experiencing family violence. Disruption/trauma in family relationships, misses school often.						

Table B5: Number of major category needs requiring significant and/or intensive support, wave 1 client survey (per cent)

	SAAP-DV and Single Women	SAAP- Single Men	SAAP- General & Families	SHAP	Private Rental Support	TASS and Re- entry	Total
Client needs assessments (n=181)							
Clients for whom no needs assessment was undertaken for the survey, whose needs were unclear at the point of survey completion across all needs items or who declined an assessment (n=181)	5.3	32.0	13.6	0.0	10.3	6.3	14.4
Clients who are reported as not experiencing any of the specified needs requiring intensive and/or ongoing support (n=181)	0.0	2.0	0.0	0.0	5.1	6.3	2.2
Clients who are reported as experiencing one or more specified needs requiring intensive and/or ongoing support (n=181)	94.7	66.0	86.4	100.0	84.6	87.5	83.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Respondent clients with one or more reported major category needs	s requiring or	ngoing and	d/or intensi	ve suppor	t (per cent)	) (n=151)	
1	13.9	24.2	21.1	0.0	12.1	21.4	15.9
2	22.2	30.3	10.5	31.3	21.2	14.3	22.5
3	16.7	21.2	10.5	25.0	30.3	28.6	21.9
4	16.7	12.1	31.6	18.8	6.1	21.4	15.9
5	5.6	12.1	10.5	12.5	18.2	7.1	11.3
6	13.9	0.0	10.5	12.5	6.1	7.1	7.9
7	11.1	0.0	5.3	0.0	6.1	0.0	4.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Mean number of needs	3.6	2.6	3.5	3.5	3.4	3.0	3.3
Median number of needs	3	2	4	3	3	3	3

# **B3** Client outcomes

Table B7: Accommodation transitions, wave 1 and three-month/exit waves client survey (per cent) (n=80), (a)(b)

	Accomn	nodation	immediately p	prior to the support p	eriod				
	No shelter	shelter accommodation residential		SAAP/CAP or other emergency accommodation	Private rental accommodation	Public housing	Other accommodation	Total	
Accommodatio	n status – И	Vave 1 Su	rvey						
No shelter									
Row %	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.
Column %	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.
Temporary acc	ommodation	n (e.g. wit	h relatives or	friends)					
Row %	0	0.0	66.7	0.0	0.0	33.3	0.0	0.0	100.
Column %	0	0.0	10.5	0.0	0.0	2.8	0.0	0.0	3.
Institutional/res	sidential acc	ommoda	tion (e.g. hosp	pital, jail)					
Row %	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.
Column %	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.
SAAP/CAP or o	ther emerge	ency acco	mmodation						
Row %	6	5.7	40.0	16.7	10.0	16.7	6.7	3.3	100.
Column %	66	6.7	63.2	83.3	60.0	13.9	28.6	25.0	37.
Private rental a	ccommodat	ion							
Row %	2	2.9	11.8	0.0	2.9	82.4	0.0	0.0	100.
Column %	33	3.3	21.1	0.0	20.0	77.8	0.0	0.0	42.
Public housing									
Row %	7	'.1	7.1	0.0	14.3	28.6	42.9	0.0	100.
Column %	33	3.3	5.3	0.0	40.0	11.1	85.7	0.0	17.
Other accommod	ation								
Row %	0	0.0	0.0	0.0	25.0	0.0	0.0	75.0	100.
Column % Total	0	0.0	0.0	0.0	20.0	0.0	0.0	75.0	5.

Row %	3.8	23.8	7.5	6.3	45.0	8.8	5.0	100.0
Column %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Accommodation .	at the point of the	three-month/exit s	urvey					
No shelter								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Temporary accord	nmodation (e.g. wi	th relatives or frien	nds)					
Row %	0.0	20.0	40.0	20.0	20.0	0.0	0.0	100.0
Column %	0.0	5.3	33.3	20.0	2.8	0.0	0.0	6.3
Institutional/resid	lential accommoda	ntion (e.g. hospital,	jail)					
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SAAP/CAP or oth	er emergency acco	ommodation						
Row %	5.9	58.8	11.8	5.9	11.8	0.0	5.9	100.0
Column %	33.3	52.6	33.3	20.0	5.6	0.0	25.0	21.3
Private rental acc	commodation							
Row %	0.0	16.7	5.6	2.8	72.2	2.8	0.0	100.0
Column %	0.0	31.6	33.3	20.0	72.2	14.3	0.0	45.0
Public housing								
Row %	0.0	11.1	11.1	0.0	22.2	55.6	0.0	100.0
Column %	0.0	5.3	16.7	0.0	5.6	71.4	0.0	11.3
Other accommod	lation							
Row %	12.5	12.5	0.0	0.0	37.5	0.0	37.5	100.0
Column %	33.3	5.3	0.0	0.0	8.3	0.0	75.0	10.0
Total								
Row %	3.8	23.8	7.5	6.3	45.0	8.8	5.0	100.0
Column %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the Three month/Exit Waves.

Table B8: Accommodation transitions, wave 1 and 12-month wave, client survey (per cent) (n=36), (a)(b)

	Accommod	dation immediately	prior to the suppo	rt period				
	No shelter	Temporary accommodation (e.g. with relatives or friends)	Institutional / residential accommodation (e.g. hospital, jail)	SAAP/CAP or other emergency accommodation	Private rental accommodation	Public housing	Other accommodation	Total
Accommodation	status – Wav	e 1 Survey						
No shelter								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0
Temporary acco	mmodation (e	e.g. with relatives of	r friends)					
Row %	0.0	66.7	0.0	0.0	33.3	0.0	0.0	100
Column %	0.0	16.7	0.0	0.0	8.3	0.0	0.0	8
Institutional/resi	dential accon	nmodation (e.g. hos	spital, jail)					
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0
SAAP/CAP or oti	her emergend	y accommodation						
Row %	11.8	58.8	11.8	11.8	5.9	0.0	0.0	100
Column %	100.0	83.3	100.0	100.0	8.3	0.0	0.0	47
Private rental ac	commodation	1						
Row %	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100
Column %	0.0	0.0	0.0	0.0	75.0	0.0	0.0	25
Public housing								
Row %	0.0	0.0	0.0	0.0	20.0	80.0	0.0	100
Column %	0.0	0.0	0.0	0.0	8.3	100.0	0.0	13
Other accommodation								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
Column %	0.0	0.0	0.0	0.0	0.0	0.0	100.0	5
Total								

	Accommod	dation immediately	prior to the suppo	rt period				
	No shelter	Temporary accommodation (e.g. with relatives or friends)	Institutional / residential accommodation (e.g. hospital, jail)	SAAP/CAP or other emergency accommodation	Private rental accommodation	Public housing	Other accommodation	Total
Row %	5.6	33.3	5.6	5.6	33.3	11.1	5.6	100.0
Column %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Accommodation	on at the point of	of the twelve montl	h wave					
No shelter								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Temporary acc	ommodation (e	e.g. with relatives o	r friends)					
Row %	0.0	16.7	16.7	0.0	33.3	0.0	33.3	100.0
Column %	0.0	8.3	50.0	0.0	16.7	0.0	100.0	16.7
Institutional/res	sidential accom	nmodation (e.g. hos	spital, jail)					
Row %	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0
Column %	0.0	8.3	0.0	0.0	0.0	0.0	0.0	2.8
SAAP/CAP or o	ther emergenc	y accommodation						
Row %	16.7	83.3	0.0	0.0	0.0	0.0	0.0	100.0
Column %	50.0	41.7	0.0	0.0	0.0	0.0	0.0	16.7
Private rental a	ccommodation							
Row %	6.7	33.3	6.7	0.0	53.3	0.0	0.0	100.0
Column %	50.0	41.7	50.0	0.0	66.7	0.0	0.0	41.7
Public housing								
Row %	6.7	33.3	6.7	0.0	53.3	0.0	0.0	100.0
Column %	50.0	41.7	50.0	0.0	66.7	0.0	0.0	41.7
Other accommo								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column % <i>Total</i>	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

	Accommod	commodation immediately prior to the support period									
	No shelter	Temporary accommodation (e.g. with relatives or friends)	Institutional / residential accommodation (e.g. hospital, jail)	SAAP/CAP or other emergency accommodation	Private rental accommodation	Public housing	Other accommodation	Total			
Row %	5.6	33.3	5.6	5.6	33.3	11.1	5.6	100.0			
Column %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0			

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the 12-month Waves.

Table B9: Income level transitions, wave 1 and 3-month/exit waves, client survey (per cent) (n=81), (a)(b)

	Weekly g	ross inco	me of the	client on	entering	the servi	ce	
	No Income	Less than \$200	<i>\$200-</i> 399	\$400- 599	\$600- 799	\$800- 899	\$900- 999	Total
Income level at t	the point of	the three	month/ex	kit survey	•			
No income								
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Less than \$200								
Row %	0.0	0.0	100.0	0.0	0.0	0.0	0.0	100.0
Column %	0.0	0.0	11.9	0.0	0.0	0.0	0.0	6.2
<i>\$200-399</i>								
Row %	2.4	0.0	59.5	33.3	4.8	0.0	0.0	100.0
Column %	33.3	0.0	59.5	50.0	50.0	0.0	0.0	51.9
<i>\$400-599</i>								
Row %	3.6	10.7	32.1	46.4	3.6	3.6	0.0	100.0
Column %	33.3	100.0	21.4	46.4	25.0	100.0	0.0	34.6
\$600-799								
Row %	25.0	0.0	50.0	25.0	0.0	0.0	0.0	100.0
Column %	33.3	0.0	4.8	3.6	0.0	0.0	0.0	4.9
\$800-899								
Row %	0.0	0.0	100.0	0.0	0.0	0.0	0.0	100.0
Column %	0.0	0.0	2.4	0.0	0.0	0.0	0.0	1.2
\$900-999								
Row %	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0
Column %	0.0	0.0	0.0	0.0	25.0	0.0	0.0	1.2
Total								
Row %	3.7	3.7	51.9	34.6	4.9	1.2	0.0	100.0
Column %	100.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the Three month/Exit surveys.

Table B10: Income level transitions, wave 1 and the 12-month wave, client survey (per cent) (n=37), (a)(b)

	Weekly	gross in	come o	f the clie	ent on e	ntering	the serv	vice		
-	No Income	Less than \$200	<i>\$200-</i> <i>399</i>	<i>\$400-</i> <i>599</i>	\$600- 799	\$800- 899	\$900- 999	\$1000- 1599	\$1600 and over	Total
Income level at	the point	of the	12-mont	h Wave						
No income										
Row %	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Column % Less than \$200	50.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.7
Row %	0.0	0.0	50.0	0.0	50.0	0.0	0.0	0.0	0.0	100.0
Column % <i>\$200-399</i>	0.0	0.0	4.8	0.0	50.0	0.0	0.0	0.0	0.0	5.4
Row %	0.0	0.0	64.7	29.4	5.9	0.0	0.0	0.0	0.0	100.0
Column % <b>\$400-599</b>	0.0	0.0	52.4	50.0	50.0	0.0	0.0	0.0	0.0	45.9
Row %	8.3	8.3	58.3	25.0	0.0	0.0	0.0	0.0	0.0	100.0
Column % <b>\$600-799</b>	50.0	50.0	33.3	30.0	0.0	0.0	0.0	0.0	0.0	32.4
Row %	0.0	0.0	33.3	66.7	0.0	0.0	0.0	0.0	0.0	100.0
Column % <b>\$800-899</b>	0.0	0.0	4.8	20.0	0.0	0.0	0.0	0.0	0.0	8.1
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column % <i>\$900-999</i>	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Row %	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Column % <i>\$1000-1599</i>	0.0	50.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.7
Row %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Column % <b>\$1600 and over</b>	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Row %	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Column %	0.0	0.0	4.8	0.0	0.0	0.0	0.0	0.0	0.0	2.7
Total										
Row %	5.4	5.4	56.8	27.0	5.4	0.0	0.0	0.0	0.0	100.0
Column %	100.0	100.0	100.0	100.0	100.0	0.0	0.0	0.0	0.0	100.0

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the 12-month Wave.

## 3 APPENDIX C: CLIENT SURVEY, CLIENT UTILISATION OF HEALTH AND JUSTICE SERVICES

A key point of interest in the present research is whether, and, to what extent, the provision of support and accommodation services to clients produces downstream benefits to government by reducing outlays elsewhere and increasing revenues. In short, does the provision of homelessness support improve government budget outcomes elsewhere. In this appendix, we briefly present findings on the utilisation of health and justice facilities in the year prior to the support period. Comparisons between the service utilisation outcomes of the homeless program client population and the general population is undertaken in Chapter 7 of the report, which also considers the cost impact of this differential.

Table C1 presents findings on health service utilisation while Table C2 does likewise in terms of the utilisation of justice services and facilities.

The vast majority of *Client Survey* respondent clients (82.7 per cent) had some contact with the health system of one kind or another in the year prior to their current support period. The most common form of contact was general practitioner consultations; around 80 per cent of all respondent clients had at least one GP consultation in the year prior to their support period. GP consultations are lower for the two male-only program categories, SAAP-Single Men and TASS and Re-entry Link, than the female-only or mixed gender program categories. This division in service utilisation rates between women and men is repeated across most of the health service utilisation categories. The median number of GP consultations for the year for the mixed and female-only program categories is 6-9 or 10 or more consultations, depending on the program.

Close to half of all client respondents had at least one medical specialist consultation in the year prior to support. Those who do see medical specialists typically see them 2-5 times or 10 times or more in the year prior to support. Medical specialist consultations are highest for clients of SAAP-DV and Single Women services, PRSAP services and SHAP services. Contact with other health service professionals is considerably lower than for GPs and medical specialists.

A little over 50 per cent of respondent clients experienced a casualty or emergency visit in the year prior to support, around half of whom made more than one visit. Visits to casualty and emergency were the highest for the SAAP-Families and General services category. Some 16.5 per cent of respondent clients made 2-5 visits to casualty and emergency, a further 5.8 per cent made 6-9 visits, and 6.6 per cent made 10 or more visits. Close to half of all respondents (47.1 per cent) spent at least one night in hospital in the year prior to receiving support; 27.5 per cent spent one night in hospital, 16.7 per cent spent 2-5 nights in hospital and a small number spent more than five nights in hospital. The median number of nights spent in hospital of those that stayed for at least one night was three nights. Around a third of client respondents used an ambulance on at least one occasion, with 10 per cent doing so between two and five times.

Table C2 provides evidence on respondents' interaction with the justice system in the year prior to support. The incidence of assaults, thefts and robberies which result in police contact/investigation is high across all program categories, with close to 40 per cent of client respondents reporting at least one such incident. The prevalence of such incidents for clients of SAAP-DV and Single Women services is particularly high, reflecting the high proportion of such clients whose major presenting reason for support is domestic and family violence. In the case of SAAP-DV and Single Women client respondents, 15.6 per

cent report one contact with police relating to such an incident, 28.1 per cent report two to five contacts, and 12.5 per cent report six to nine contacts. The prevalence of assaults and robberies occasioning police contact or investigation is also relatively high in the SAAP-Families and General services category and for SHAP client respondents.

A different pattern of interaction with the justice system is evident in the case of persons stopped by the police in the street where prevalence rates are highest for the SAAP-Single Men client group. They are also high for other categories, most notably, SAAP-Families and General services. In the case of SAAP-Single Men, 45.9 per cent of respondents report at least one incident of being stopped by the police in the street, 16.2 per cent between two and five times, 5.4 per cent six to nine incidents and 5.4 per cent report 10 or more incidents.

The prevalence of police apprehensions, being held overnight by the police and court appearances appears to be relatively high across the various client categories with the exception being PRSAP clients. Among PRSAP clients, around 90 per cent do not report incidents of this type for the 12 months prior to the beginning of the support period. Indeed, the pattern of justice interactions for this group, as compared to clients of other programs, provides further evidence that the PRSAP client group is different to that of other programs, a fact also evident in the homelessness histories where PRSAP study participants are less likely to have had past experiences of homelessness. The results are in line with the nature of the PRSAP as a homelessness prevention program in the private rental market.

Not surprisingly, given the nature of the TASS and Re-entry Link programs, the majority of clients report that they have been apprehended by the police, been held overnight by the police, and had court appearances over the year prior to the support period. Around a third of SAAP-Single Men and SAAP-Families and General services respondents report being apprehended by the police, being held overnight, and being to court over an incident during the 12 months prior to the beginning of the support period. Around a fifth of clients in these categories report multiple incidents of this type. A similar pattern of justice system interactions is evident for SAAP-DV and Single Women and SHAP clients, with the key point of difference being that apprehension rates are much lower than for the remainder of the SAAP service sector.

All clients in the TASS and Re-entry Link programs, by definition, have been in jail in the year prior to the beginning of the support period. Around a quarter of SAAP-Single Men services clients had also had at least one spell in jail in the 12 months prior to the beginning of the support period. This relatively large number of SAAP-Single Men services clients who have been in jail in the year prior to their current SAAP support period suggests that significant numbers of those leaving prison experience difficulties in obtaining accommodation in the year following exit from jail. An expansion of the TASS and Re-entry Link programs may help to further reduce the barriers experienced by those exiting jail in moving back into the community.

Tables C3 and C4 present estimates of the utilisation of health and justice services at the 3-month/Exit Wave follow-up point.

Table C1: Health Service usage in the year prior to the current support period, wave 1, client survey

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re-entry	Total
Health system contact of an	y kind (n=155)						
Yes	84.4	82.9	95.2	100.0	78.1	53.8	83.2
No	12.5	12.2	4.8	0.0	15.6	46.2	13.5
Not answering this question	3.1	4.9	0.0	0.0	6.3	0.0	3.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
General practitioner consult	ations (n=152)						
No contact	9.1	25.0	19.0	6.7	13.8	50.0	19.1
Once	6.1	15.0	9.5	6.7	3.4	14.3	9.2
2-5 times	18.2	32.5	19.0	13.3	31.0	7.1	23.0
6-9 times	30.3	12.5	23.8	6.7	27.6	14.3	20.4
10 times or more	36.4	15.0	28.6	66.7	24.1	14.3	28.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Medical specialist consultati	ions (n=140)						
No contact	48.4	64.9	52.9	50.0	48.1	64.3	55.0
Once	6.5	13.5	5.9	7.1	11.1	14.3	10.0
2-5 times	22.6	18.9	41.2	28.6	18.5	14.3	22.9
6-9 times	3.2	2.7	0.0	0.0	3.7	7.1	2.9
10 times or more	19.4	0.0	0.0	14.3	18.5	0.0	9.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Nurse and other health profe	essional worker consult	ations (n=141)					
No contact	45.2	60.0	63.2	33.3	48.1	42.9	50.4
Once	3.2	14.3	0.0	0.0	7.4	14.3	7.1
2-5 times	29.0	20.0	26.3	33.3	18.5	14.3	23.4
6-9 times	9.7	0.0	5.3	13.3	7.4	14.3	7.1

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re-entry	Total
10 times or more	12.9	5.7	5.3	20.0	18.5	14.3	12.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Home visits by doctors	, mental health and other hea	alth workers (n=14	<i>(0)</i>				
No contact	71.9	74.3	68.4	38.5	70.4	78.6	69.3
Once	0.0	8.6	0.0	0.0	7.4	0.0	3.6
2-5 times	12.5	11.4	21.1	30.8	11.1	7.1	14.3
6-9 times	9.4	2.9	5.3	30.8	11.1	0.0	8.6
10 times or more	6.3	2.9	5.3	0.0	0.0	14.3	4.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Other health worker col	ntacts (n=137)						
No contact	71.0	85.7	81.3	57.1	70.4	64.3	73.7
Once	9.7	8.6	0.0	0.0	7.4	0.0	5.8
2-5 times	6.5	2.9	18.8	21.4	11.1	14.3	10.2
6-9 times	3.2	0.0	0.0	7.1	7.4	14.3	4.4
10 times or more	9.7	2.9	0.0	14.3	3.7	7.1	5.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Casualty or emergency	visits (n=144)						
No contact	57.6	41.7	31.6	26.7	51.9	71.4	47.2
Once	21.2	38.9	31.6	26.7	18.5	14.3	26.4
2-5 times	15.2	13.9	10.5	40.0	14.8	14.3	16.7
6-9 times	0.0	2.8	21.1	6.7	11.1	0.0	6.3
10 times or more	6.1	2.8	5.3	0.0	3.7	0.0	3.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Outpatient at hospital of	or day clinic consultations (n:	=142)					
No contact	65.6	62.9	61.1	37.5	59.3	71.4	60.6
Once	6.3	22.9	11.1	0.0	18.5	7.1	12.7

	Wave 1 SAAP-DV and Single Women	Wave 1 SAAP- Single Men	Wave 1 SAAP- Families & General	Wave 1 SHAP	Wave 1 Private Rental Support	Wave 1 TASS and Re-entry	Total
2-5 times	9.4	8.6	11.1	50.0	7.4	14.3	14.1
6-9 times	9.4	5.7	16.7	0.0	7.4	0.0	7.0
10 times or more	9.4	0.0	0.0	12.5	7.4	7.1	5.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Stays in hospital of at le	east one night's duration (n=	143)					
No contact	53.1	50.0	33.3	43.8	70.4	71.4	53.8
Once	28.1	30.6	55.6	25.0	14.8	0.0	26.6
2-5 times	18.8	13.9	11.1	31.3	7.4	28.6	16.8
6-9 times	0.0	2.8	0.0	0.0	7.4	0.0	2.1
10 times or more	0.0	2.8	0.0	0.0	0.0	0.0	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of days in hos	pital (for those with one hosp	ital night or more,	) (n=35)				
Mean	5.0	5.3	13.0	22.3	1.7	9.5	10.3
Median	3.0	4.0	3.5	8.5	2.0	9.5	3.0
Ambulance services (na	=137)						
No contact	81.8	55.6	61.1	46.7	80.8	85.7	69.0
Once	12.1	27.8	33.3	26.7	11.5	0.0	19.0
2-5 times	3.0	13.9	0.0	20.0	3.8	14.3	8.5
6-9 times	0.0	0.0	5.6	6.7	0.0	0.0	1.4
10 times or more	3.0	2.8	0.0	0.0	3.8	0.0	2.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Source: Wave 1 Client Survey.

Table C2: Justice System usage in the year prior to the current support period, wave 1, client survey

	Wave 1 SAAP-DV and single women	Wave 1 SAAP- single men	Wave 1 SAAP- families & general	Wave 1 SHAP	Wave 1 private rental support	Wave 1 TASS and re-entry	Total
Contact with the police, the jus	<u>~</u>						
Yes	75.8	66.7	80.0	56.3	38.7	93.3	66.2
No	24.2	33.3	20.0	37.5	54.8	6.7	31.8
Not answering this question	0.0	0.0	0.0	6.3	6.5	0.0	1.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Victim of an assault/theft/robb	ery which resulted in p	oolice contact/inve	estigation (n=151)				
No contact	43.8	76.3	47.6	56.3	80.0	64.3	62.9
Once	15.6	15.8	23.8	25.0	20.0	28.6	19.9
2-5 times	28.1	7.9	23.8	6.3	0.0	7.1	12.6
6-9 times	9.4	0.0	4.8	12.5	0.0	0.0	4.0
10 times or more	3.1	0.0	0.0	0.0	0.0	0.0	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Stopped by the police in the st	treet (n=151)						
No contact	84.8	54.1	71.4	81.3	96.7	57.1	74.8
Once	3.0	18.9	14.3	6.3	0.0	35.7	11.3
2-5 times	9.1	16.2	0.0	6.3	0.0	0.0	6.6
6-9 times	3.0	5.4	4.8	6.3	0.0	0.0	3.3
10 times or more	0.0	5.4	9.5	0.0	3.3	7.1	4.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Stopped by the police in a veh	icle (n=151)						
No contact	72.7	51.4	47.6	50.0	73.3	64.3	60.9
Once	18.2	27.0	33.3	31.3	16.7	21.4	23.8
2-5 times	6.1	13.5	14.3	6.3	6.7	0.0	8.6
6-9 times	3.0	0.0	0.0	6.3	0.0	0.0	1.3
10 times or more	0.0	8.1	4.8	6.3	3.3	14.3	5.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Once     12.5     18.9     0.0     12.5     6.7       2-5 times     0.0     10.8     19.0     0.0     0.0       6-9 times     0.0     2.7     9.5     6.3     0.0	30.8 53.8	72.5
Once     12.5     18.9     0.0     12.5     6.7       2-5 times     0.0     10.8     19.0     0.0     0.0       6-9 times     0.0     2.7     9.5     6.3     0.0	53.8	
2-5 times 0.0 10.8 19.0 0.0 0.0 6-9 times 0.0 2.7 9.5 6.3 0.0		440
6-9 times 0.0 2.7 9.5 6.3 0.0		14.8
	0.0	5.4
	7.7	3.4
10 times or more 3.1 5.4 4.8 0.0 3.3	7.7	4.0
Total 100.0 100.0 100.0 100.0 100.0 1	0.00	100.0
Held overnight by the police (n=150)		
No contact 90.9 70.3 81.0 87.5 100.0	53.8	82.7
Once 6.1 18.9 0.0 6.3 0.0	23.1	8.7
2-5 times 3.0 5.4 14.3 0.0 0.0	15.4	5.3
6-9 times 0.0 0.0 0.0 6.3 0.0	0.0	0.7
10 times or more 0.0 5.4 4.8 0.0 0.0	7.7	2.7
Total 100.0 100.0 100.0 100.0 100.0 1	0.00	100.0
Been to court over an incident (n=150)		
No contact 63.6 61.1 61.9 62.5 86.7	35.7	64.7
Once 15.2 16.7 0.0 18.8 6.7	28.6	13.3
2-5 times 18.2 19.4 23.8 12.5 0.0	7.1	14.0
6-9 times 3.0 0.0 9.5 6.3 3.3	14.3	4.7
10 times or more 0.0 2.8 4.8 0.0 3.3	14.3	3.3
Total 100.0 100.0 100.0 100.0 100.0 1	0.00	100.0
Been in prison (n=150)		
No contact 100.0 73.0 85.7 93.8 96.7	0.0	81.3
Once 0.0 18.9 9.5 0.0 3.3	92.3	14.7
2-5 times 0.0 5.4 4.8 0.0 0.0	0.0	2.0
6-9 times 0.0 0.0 0.0 6.3 0.0	0.0	0.7
10 times or more 0.0 2.7 0.0 0.0 0.0	7.7	1.3
Total 100.0 100.0 100.0 100.0 100.0 1	0.00	100.0

	Wave 1 SAAP-DV and single women	Wave 1 SAAP- single men	Wave 1 SAAP- families & general	Wave 1 SHAP	Wave 1 private rental support	Wave 1 TASS and re-entry	Total
Been in detention/remand/					• • • • • • • • • • • • • • • • • • • •		
No contact	97.0	83.3	90.5	93.8	100.0	38.5	87.9
Once	0.0	13.9	4.8	0.0	0.0	53.8	8.7
2-5 times	3.0	2.8	4.8	0.0	0.0	0.0	2.0
6-9 times	0.0	0.0	0.0	6.3	0.0	0.0	0.7
10 times or more	0.0	0.0	0.0	0.0	0.0	7.7	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Made visits to or received	visits from justice officers	(n=149)					
No contact	84.8	88.6	85.7	87.5	93.3	35.7	83.2
Once	6.1	2.9	0.0	6.3	3.3	14.3	4.7
2-5 times	6.1	5.7	4.8	0.0	0.0	14.3	4.7
6-9 times	0.0	0.0	0.0	6.3	0.0	14.3	2.0
10 times or more	3.0	2.9	9.5	0.0	3.3	21.4	5.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number of nights over	er the last year that the clie	ent has been held	by the police (n=11)				
Mean	•						6.1
Median							1.0
Median  Total number of nights over	er the last year that the clie	ent has been in pri	ison (n=18)				
	er the last year that the clie	ent has been in pri	ison (n=18)				1.0
Total number of nights ove	er the last year that the clie	ent has been in pri	ison (n=18)				1.0 117.6
Total number of nights ove Mean	·	ŕ	, ,	rection facil	ity (n=12)		1.0 117.6
<b>Total number of nights ove</b> Mean Median	·	ŕ	, ,	rection facil	ity (n=12)		

Source: Wave 1 Client Survey.

Table C3: Health Service usage, wave 1 and three-month/exit waves, client survey (a)(b)

	Wave 1	Three month/exit waves	
	(Over previous 12 months)	(Period since the wave 1 Survey)	Difference (Follow-up – wave 1)
Health system contact of an	y kind (n=65)		
Yes	83.1	78.5	-4.6
No	13.8	20.0	6.2
Not answering this question	3.1	1.5	-1.5
Total	100.0	100.0	
General practitioner consult	tations (n=62)		
No contact	14.5	25.8	11.3
Once	11.3	19.4	8.1
2-5 times	21.0	35.5	14.5
6-9 times	17.7	6.5	-11.3
10 times or more	35.5	12.9	-22.6
Total	100.0	100.0	
Medical specialist consultat	tions (n=54)		
No contact	48.1	61.1	13.0
Once	9.3	11.1	1.9
2-5 times	27.8	18.5	-9.3
6-9 times	7.4	7.4	0.0
10 times or more	7.4	1.9	-5.6
Total	100.0	100.0	
Nurse and other health prof	essional worker	consultations (n=54)	
No contact	42.6	55.6	13.0
Once	9.3	13.0	3.7
2-5 times	29.6	18.5	-11.1
6-9 times	7.4	1.9	-5.6
10 times or more	11.1	11.1	0.0
Total	100.0	100.0	
Home visits by doctors, med	ntal health and d	other health workers (n=51)	
No contact	72.5	78.4	5.9
Once	2.0	5.9	3.9
2-5 times	17.6	7.8	-9.8
6-9 times	7.8	2.0	-5.9
10 times or more	0	5.9	5.9
Total	100.0	100.0	
Other health worker contact	ts (n=51)		
No contact	66.7	90.2	23.5
Once	3.9	2.0	-2.0
2-5 times	21.6	3.9	-17.6
6-9 times	5.9	0.0	-5.9
10 times or more	2.0	3.9	2.0
Total	100.0	100.0	

	Wave 1	Three month/exit waves	
	(Over previous 12 months)	(Period since the wave 1 Survey)	Difference (Follow-up – wave 1)
Casualty or emergency vi	isits (n=54)		
No contact	46.3	74.1	27.8
Once	27.8	14.8	-13.0
2-5 times	16.7	9.3	-7.4
6-9 times	0.0	1.9	1.9
10 times or more	9.3	0.0	-9.3
Total	100.0	100.0	
Outpatient at hospital or o	day clinic consulta	ntions (n=53)	
No contact	54.7	83.0	28.3
Once	11.3	7.5	-3.8
2-5 times	18.9	1.9	-17.0
6-9 times	9.4	3.8	-5.7
10 times or more	5.7	3.8	-1.9
Total	100.0	100.0	
Stays in hospital of at lea	st one night's dura	ation (n=52)	
No contact	48.1	90.4	42.3
Once	32.7	1.9	-30.8
2-5 times	19.2	5.8	-13.5
6-9 times	0.0	1.9	1.9
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Ambulance services (n=5	(2)		
No contact	75.0	92.3	17.3
Once	15.4	5.8	-9.6
2-5 times	5.8	1.9	-3.8
6-9 times	3.8	0.0	-3.8
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	

Source: Wave 1 Client Survey and Three Month/Exit Survey.

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the Three Month/Exit surveys.

Table C4: Justice System usage, wave 1 and three-month/exit waves, client survey, (a)(b)

	Wave 1 survey	Follow-up survey	Difference
	(Over previous 12 months)	(Period since the wave 1 Survey)	(Follow-up – wave 1)
Contact with the police, the justice system of	or the courts (n=6	4)	
Yes	64.1	32.8	-31.3
No	32.8	64.1	31.3
Not answering this question	3.1	3.1	0.0
Total	100.0	100.0	
Victim of an assault/theft/robbery which res	ulted in police co	ntact/investigati	on (n=58)
No contact	69.0	87.9	19.0
Once	20.7	5.2	-15.5
2-5 times	6.9	6.9	0.0
6-9 times	3.4	0.0	-3.4
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Stopped by the police in the street (n=59)			
No contact	74.6	86.4	11.9
Once	11.9	8.5	-3.4
2-5 times	6.8	1.7	-5.1
6-9 times	1.7	0.0	-1.7
10 times or more	5.1	3.4	-1.7
Total	100.0	100.0	
Stopped by the police in a vehicle (n=59)			
No contact	59.3	89.8	30.5
Once	23.7	10.2	-13.6
2-5 times	10.2	0.0	-10.2
6-9 times	0.0	0.0	0.0
10 times or more	6.8	0.0	-6.8
Total	100.0	100.0	
Apprehended by the police (n=59)			
No contact	74.6	96.6	22.0
Once	13.6	1.7	-11.9
2-5 times	5.1	1.7	-3.4
6-9 times	5.1	0.0	-5.1
10 times or more	1.7	0.0	-1.7
Total	100.0	100.0	
Held overnight by the police (n=59)			
No contact	86.4	98.3	11.9
Once	5.1	1.7	-3.4
2-5 times	6.8	0.0	-6.8
6-9 times	0.0	0.0	0.0
10 times or more	1.7	0.0	-1.7
Total	100.0	100.0	

Been to court over an incident (n=58)			
No contact	65.5	86.2	20.7
Once	10.3	6.9	-3.4
2-5 times	12.1	6.9	-5.2
6-9 times	8.6	0.0	-8.6
10 times or more	3.4	0.0	-3.4
Total	100.0	100.0	
Been in prison (n=59)			
No contact	65.5	98.3	32.8
Once	10.3	0.0	-10.3
2-5 times	12.1	1.7	-10.4
6-9 times	8.6	0.0	-8.6
10 times or more	3.4	0.0	-3.4
Total	100.0	100.0	
Been in detention/remand/correction facility (n=55)			
No contact	88.1	100.0	11.9
Once	10.2	0.0	-10.2
2-5 times	1.7	0.0	-1.7
6-9 times	0.0	0.0	0.0
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Made visits to or received visits from Justice office	rs (n=60)		
No contact	81.7	90.0	8.3
Once	5.0	3.3	-1.7
2-5 times	5.0	3.3	-1.7
6-9 times	3.3	3.3	0.0
10 times or more	5.0	0.0	-5.0
Total	100.0	100.0	

Source: Wave 1 client survey and three month/exit survey.

<sup>(</sup>b) Matched sample of respondents from wave 1 and the three month/exit waves.

Table C5: Health Service usage, wave 1 and the twelve month wave, client survey (a)(b)

	Wave 1	Twelve month wave	Difference
	(Over 12 prior to survey)	(Last 12 months)	(12-month – wave 1)
Health system contact of an	y kind (n=35)		
Yes	88.6	88.6	0.0
No	11.4	11.4	0.0
Not answering this question	0.0	0.0	0.0
Total	100.0	100.0	
General practitioner consult	tations (n=32)		
No contact	18.8	15.6	-3.1
Once	6.3	6.3	0.0
2-5 times	12.5	18.8	6.3
6-9 times	37.5	18.8	-18.8
10 times or more	25.0	40.6	15.6
Total	100.0	100.0	
Medical specialist consultat	ions (n=32)		
No contact	50.0	50.0	0.0
Once	9.4	6.3	-3.1
2-5 times	25.0	28.1	3.1
6-9 times	12.5	9.4	-3.1
10 times or more	3.1	6.3	3.1
Total	100.0	100.0	
Nurse and other health profe	essional worker co	onsultations (n=33)	
No contact	42.4	51.5	9.1
Once	15.2	6.1	-9.1
2-5 times	21.2	21.2	0.0
6-9 times	15.2	9.1	-6.1
10 times or more	6.1	12.1	6.1
Total	100.0	100.0	
Home visits by doctors, mei			
No contact	69.0	89.7	20.7
Once	3.4	3.4	0.0
2-5 times	10.3	0.0	-10.3
6-9 times	10.3	0.0	-10.3
10 times or more	6.9	6.9	0.0
Total	100.0	100.0	
Other health worker contact			
No contact	77.4	74.2	-3.2
Once	3.2	3.2	0.0
2-5 times	12.9	3.2	-9.7
6-9 times	6.5	6.5	0.0
10 times or more	0.0	12.9	12.9
Total	100.0	100.0	12.0
Casualty or emergency visi		100.0	

No contact	32.3	54.8	22.6
Once	32.3	12.9	-19.4
2-5 times	25.8	19.4	-6.5
6-9 times	9.7	9.7	0.0
10 times or more	0.0	3.2	3.2
Total	100.0	100.0	
Outpatient at hospital or day	clinic consultations (n=31)		
No contact	54.8	58.1	3.2
Once	9.7	9.7	0.0
2-5 times	22.6	19.4	-3.2
6-9 times	12.9	9.7	-3.2
10 times or more	0.0	3.2	3.2
Total	100.0	100.0	
Stays in hospital of at least of	one night's duration (n=32)		
No contact	43.8	56.3	12.5
Once	37.5	15.6	-21.9
2-5 times	18.8	15.6	-3.1
6-9 times	0.0	3.1	3.1
10 times or more	0.0	9.4	9.4
Total	100.0	100.0	
Ambulance services (n=30)			
No contact	76.7	80.0	3.3
Once	13.3	6.7	-6.7
2-5 times	10.0	13.3	3.3
6-9 times	0.0	0.0	0.0
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	

Source: Wave 1 Client Survey and Three Month/Exit Survey.

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the Twelve Month Wave.

Table C6: Justice System usage, wave 1 and the twelve month wave, client survey, (a)(b)

	Wave 1	Twelve Month Wave	Difference
	(Over 12 prior to survey)	(Last 12 months)	(12-Month – Wave 1)
Contact with the police, the justice system	m or the courts (n	=33)	
Yes	78.8	66.7	-12.1
No	21.2	33.3	12.1
Not answering this question	0.0	0.0	0.0
Total	100.0	100.0	
Victim of an assault/theft/robbery which i	esulted in police	contact/investi	gation (n=35)
No contact	60.0	88.6	28.6
Once	25.7	2.9	-22.9
2-5 times	8.6	8.6	0.0
6-9 times	5.7	0.0	-5.7
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Stopped by the police in the street (n=35)	1		
No contact	80.0	82.9	2.9
Once	14.3	8.6	-5.7
2-5 times	0.0	2.9	2.9
6-9 times	0.0	2.9	2.9
10 times or more	5.7	2.9	-2.9
Total	100.0	100.0	
Stopped by the police in a vehicle (n=34)			
No contact	55.9	73.5	17.6
Once	32.4	20.6	-11.8
2-5 times	5.9	5.9	0.0
6-9 times	0.0	0.0	0.0
10 times or more	5.9	0.0	-5.9
Total	100.0	100.0	
Apprehended by the police (n=34)			
No contact	70.6	82.4	11.8
Once	14.7	11.8	-2.9
2-5 times	5.9	5.9	0.0
6-9 times	5.9	0.0	-5.9
10 times or more	2.9	0.0	-2.9
Total	100.0	100.0	
Held overnight by the police (n=35)			
No contact	82.9	88.6	5.7
Once	8.6	5.7	-2.9
2-5 times	5.7	5.7	0.0
6-9 times	0.0	0.0	0.0
10 times or more	2.9	0.0	-2.9
Total	100.0	100.0	0.0

	Wave 1	Twelve Month Wave	Difference
	(Over 12 prior to survey)	(Last 12 months)	(12-Month – Wave 1)
Been to court over an incident (n=35)			
No contact	62.9	54.3	-8.6
Once	14.3	20.0	5.7
2-5 times	11.4	20.0	8.6
6-9 times	8.6	5.7	-2.9
10 times or more	2.9	0.0	-2.9
Total	100.0	100.0	
Been in prison (n=35)			
No contact	85.7	94.3	8.6
Once	14.3	2.9	-11.4
2-5 times	0.0	2.9	2.9
6-9 times	0.0	0.0	0.0
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Been in detention/remand/correction facility	ity (n=35)		
No contact	91.4	94.3	2.9
Once	8.6	2.9	-5.7
2-5 times	0.0	2.9	2.9
6-9 times	0.0	0.0	0.0
10 times or more	0.0	0.0	0.0
Total	100.0	100.0	
Made visits to or received visits from Just	ice officers (n=35	5)	
No contact	77.1	82.9	5.7
Once	8.6	2.9	-5.7
2-5 times	5.7	14.3	8.6
6-9 times	2.9	0.0	-2.9
10 times or more	5.7	0.0	-5.7
Total	100.0	100.0	

Source: Wave 1 Client Survey and Three Month/Exit Survey.

<sup>(</sup>b) Matched sample of respondents from Wave 1 and the Twelve Month Wave.

## 4 APPENDIX D: COMMUNITY CENTRE SURVEY, SUPPLEMENTARY TABLES

Table D1: Community centre client demographics, community centre survey 2006

	Frequency	Per cent		Frequency	Per cent
Client's Gender			Aboriginal or Torres Strait Islander		
Male	45	76	Yes	10	17
Female	11	19	No	3	5
Total (valid)	56	95	No Response	45	76
Missing	3	5	Total (valid)	58	98
Total	59	100	Missing	1	2
			Total	59	100
Client's Age					
26-35	11	19	Country of Birth		
36-45	24	41	Australia	46	78
46-55	13	22	Other countries	11	19
56-65	5	8	Total (valid)	57	97
66 and over	4	7	Missing	2	3
Total (valid)	57	97	Total	59	100
Missing	2	3			
Total	59	100	Educational Qualifications		
			No post-school qualification	33	56
Age when Client left School			Has post-school qualification	9	15
13 years and under	7	12	No response	6	10
14 years	5	8	Total (valid)	58	98
15 years	16	27	Missing	1	2
16 years	15	25	Total	59	100
17 years	5	8			
18 years or older	10	17	Major Physical Health Problems		
Total (valid)	58	98	Yes	18	42
Missing	1	2	No	20	47

	Frequency	Per cent
Total	59	100
Age when Client left Home		
Never left home	1	2
13 years and under	8	14
14 years	2	3
15 years	7	12
16 years	6	10
17 years	6	10
18 years or older	26	44
No response	1	2
Total (valid)	58	98
Missing	1	2
Total	59	100
Current Housing Status (a)		
No shelter	14	24
Crisis accommodation	1	2
Temporary accommodation	13	22
Institutional/residential living environment	1	2
Public housing	12	20
Long-term community housing	2	3
Private rental housing	5	8
Home owner/purchaser	2	3
No record for period	6	10
Total (valid)	56	95
Missing	3	5

	Frequency	Per cent
Missing/no response	5	12
Total	43	100
Drug or Alcohol Problems		
Yes	12	20
No	40	68
Drug problems only	1	2
Drug and alcohol problems	3	5
Total (valid)	58	98
Missing/no response	3	5
Total	59	100
Mental Health Issues		
Yes	24	41
No	31	53
Total (valid)	55	93
Missing/no response	4	7
Total	59	100
Homelessness in last 12 months		
No incidence of primary homelessness	33	55.9
Single long spell of homelessness	9	15.3
Multiple spells & less than 25 weeks total duration	8	13.6
Multiple spells & more than 25 weeks total duration	4	6.8
Total (valid)	54	91.5
Missing	5	8.5
Total	59	100.0

	Frequency	Per cent	Frequency	Per cent
Total	59	100		

Source: Community Centre Survey. Note: (a) Housing status in week 52 of the accommodation calendar.

Table D2: Client use of community centre services, community centre survey 2006

How often do you currently visit the centre?	Per cent	How long have you been coming to the centre?	Per cent	Total number of services used	Per cent
Every day it is open	36	Less than 1 year	15	0 to 2 services	12
Every few days	46	1-to less than 5 years	32	3 to 6 services	41
Around once a week	12	5-10 years	22	7 to 11 services	34
Around once a month	3	More than 10 years	31	12 to 18 services	14
Just when I need to sort out a problem	3	Total	100	Total	100
Total	100				

Table D3: Number of different types of assistance received at the community centre, community centre survey

	0 to 2	3 to 4	5 to 6	7 to 12	Total
Frequency	11	14	14	20	59
Per cent	19	24	24	34	100

Source: Community Centre Survey.

Table D4: Type of community centre services used by duration of primary homelessness over the last 12 months, community centre survey

	0 weeks	1 to 16 weeks	17 to 24 weeks	25 to 52 weeks
Meals	91.7	100	100	92.9
Recreation	63.9	25	80	78.6
Information	52.8	25	80	71.4
Showers*	38.9	50	100	92.9
Laundry	5.6	0	20	28.6
Counselling	27.8	0	20	42.9
Listens and works through problems*	30.6	0	80	50
Accommodation assistance*	27.8	50	60	71.4
Emergency relief	41.7	50	40	42.9
Writing letters/phone calls on my behalf	25	25	60	35.7
Haircuts	30.6	25	0	35.7
Financial and material assistance	11.1	0	0	28.6
Telephone/fax to access other services	30.6	0	60	50
Talk to staff about personal issues/problems*	41.7	0	80	71.4
Centrelink services*	22.2	0	60	64.3
		•		
Health services	27.8	0	20	50
Alcohol & drug problem support	8.3	0	20	35.7
Emergency relief	11.1	0	0	7.1
Legal support	5.6	0	20	7.1

<sup>\*</sup>Significant differences between groups (p .05)

Table D5: Type of community centre services used by primary homelessness spell pattern type (duration by number of spells) over the last 12 months, community centre survey

	No incidence of primary homelessness	Single long spell of homelessness	Multiple spells of homelessness
Meals	90.9	100	91.7
Recreation	60.6	78	58.3
Information	54.5	78	50
Showers*	39.4	100	75
Laundry*	6.1	44	8.3
Counselling	27.3	44	16.7
Listens and works through problems	30.3	56	41.7
Accommodation assistance*	30.3	89	58.3
Emergency relief	39.4	56	33.3
Writing letters/phone calls on my behalf	24.2	44	33.3
Haircuts	27.3	22	25
Financial and material assistance	12.1	33	8.3
Telephone/fax to access other services	33.3	67	25
Talk to staff about personal issues/problems	42.4	78	50
Centrelink services*	24.2	67	41.7
Health services	30.3	56	16.7
Alcohol & drug problem support	9.1	33	25
Emergency relief	12.1	11	0
Legal support	6.1	11	8.3

<sup>\*</sup> Significant differences between groups (p .05).

Table D6: Types of community centre services used by experiences of homelessness prior to the age 18 (per cent), community centre survey

		, ,				f life before ( (categorised	•
	0 to <60 per cent	60 <80 per cent	80 <100 per cent	100 per cent	0 per cent	0 >5 per cent	5-20 per cent
Meals	100	100	90	96	97	80	100
Recreation	100	80	50	74	73	80	75
Information	*88	100	50	39	45	80	88
Showers	88	80	60	39	48	60	88
Laundry	25	20	0	13	*15	20	88
Counselling	*50	80	20	13	30	20	63
Listens and works through problems	*75	60	20	22	*27	60	38
Accommodation assistance	*63	100	30	35	18	40	25
Emergency assistance	63	40	60	26	12	20	13
Writing letters/phone calls on my behalf	63	40	60	26	*27	20	75
Haircuts	38	20	30	13	42	40	88
Financial/material assistance	13	20	10	13	*27	40	75
Telephone/fax to access other services	*63	80	0	30	*39	20	88
Talk to staff about personal issues/problems	75	80	40	39	42	40	38
Centrelink services	*75	80	20	22	18	40	25
Health services	*63	80	0	30	21	40	50
Alcohol and drug problem support	*38	60	10	4	*6	0	75
Emergency relief	*0	40	0	4	3	0	25
Legal support	13	20	0	9	9	0	13

<sup>\*</sup>Significant differences between groups (p .05).

Table D7: Types of community centre services used by experiences of homelessness from the age of 18 (per cent), community centre survey

		Per cent of life since age 18 in permanent accommodation (categorised)			Per cent of life since age 18 in primary homelessness (categorised)			
	0 to >30 per cent	30 to > 70 per cent	70 to < 90 per cent	90 to 100 per cent	0 per cent	GT zero to less than 50 per cent	50 to 100 per cent	
Meals	100	88	100	90	13	25	6	
Recreation	80	75	78	62	64	70	83	
Information	*90	63	56	33	*29	59	83	
Showers	*70	63	89	29	*21	63	83	
Laundry	30	25	11	0	*0	11	50	
Counselling	40	50	22	14	7	30	67	
Listens and works through problems	60	38	22	19	7*	33	67	
Accommodation Assistance	*80	50	33	24	14*	44	83	
Emergency relief	62	40	60	26	36	44	50	
Writing letters/phone calls on my behalf	50	38	22	24	29	26	67	
Haircuts	20	50	22	19	29	22	17	
Financial/material assistance	30	25	0	5	7	7	33	
Telephone/fax to access other services	50	38	22	24	14	33	67	
Talk to staff about personal issues/problems	80	63	33	33	*21	48	100	
Centrelink services	*70	50	22	19	*14	33	83	
Health services	60	38	11	19	21	22	67	
Alcohol and drug problem support	*40	38	0	0	*0	11	50	
Legal support	20	13	0	5	7	7	17	

<sup>\*</sup>Significant differences between groups (p .05).

## 5 APPENDIX E COMMUNITY CENTRE SERVICE OUTPUTS AND CLIENTS' HISTORIES OF HOMELESSNESS

In this appendix, we examine the relationship between clients' histories of homelessness on the one hand and their use of services ('service outputs') on the other hand. The analysis uses a range of ways of viewing a client's experience of homelessness. They include:

- → Current homelessness (primary, secondary/tertiary);
- → The cumulative duration of primary homelessness in the last 12 months;
- → The pattern of spells of primary homelessness over the last 12 months;
- → Cumulative homelessness prior to the age of 18 and from the age of 18 onwards.

The second and third of these measures of homelessness over the last 12 months utilise the Community Centre Survey's accommodation calendar which details the housing/homelessness pathways of clients in the 12 months prior to the support period. From the accommodation calendar, it was possible not only to derive how long a person experienced any given accommodation state (such as no shelter), but also the number of times they moved into and out of any given accommodation state. In more formal terms, the calendar allowed us to calculate cumulative durations of homelessness and spells of homelessness. Durations were recorded as the total number of weeks in a given accommodation state over the last 12 months. Spells were defined as a continuous period in any of the nine accommodation states, and also as a continuous period in any of the three main homelessness/housing categories (primary homeless, secondary or tertiary homeless, other housing). For example, a person who was in no shelter for two months, then lived in temporary housing for 4 months and then lived in no shelter for 6 months would have experienced two spells of 'primary homelessness', and a total duration of eight months in primary homelessness. Putting the analyses of spells and durations together, we created variables that recorded clients' combined duration and spells of primary homelessness. A homeless status variable was created which recorded four distinct states of primary homeless over the last 12 months: No incidence of primary homelessness, Single long spell of homelessness, Multiple spells & less than 26 weeks total duration, and Multiple spells & 26 weeks or more total duration. In the final analysis, the latter two categories were collapsed into one due to sample size restrictions.

We would expect that those community centre clients who were currently experiencing primary homelessness would be significantly more likely than those who were not to use certain services such as showers, laundry, meals and use of telephone and fax. Table E1 presents findings on the use of community centre services by current homelessness status. For a range of services, there is no discernible difference between those in primary homelessness and those in other housing/homelessness categories. One notable area where no difference can be found is with respect to meals where all three groups (the primary homeless, those in secondary/tertiary homelessness and those in permanent accommodation) utilised meal services at the same high rate. Furthermore, while the raw frequencies appear to show that those who are without shelter use a range of services at a higher rate than those clients in secondary and tertiary homelessness and those in other housing categories, these differences are not statistically significant (p .05). When we produced contingency tables on types of services used by current housing status, we

found, using the Pearson's chi-square test (see Table E1) only a statistically significant difference (p .05) in the use of showers, Centrelink services and alcohol and drug problem support. Those currently experiencing primary homelessness were more likely to use these than those not experiencing primary homelessness. However, they were not significantly more likely to use laundry, counselling, accommodation assistance or health services. Furthermore, there was no significant difference in the mean number of distinct services used. The results indicate that current homelessness status appears to have a relationship to clients' patterns of service use but that at a statistically robust level these differences are limited to a relatively small set of services.

We further investigated the question of the use of community centres by considering the pattern of homelessness over the last 12 months. Two indicators were considered. The first is a duration only measure, the second considers both the number and duration of spells of homelessness and therefore considers the pattern of homelessness over the 12-month period. We found that while use of services does not appear to be strongly related to clients' current homelessness status, their experience of primary homelessness over the last 12 months does appear to be quiet strongly related clients' patterns of service use.

Table E1: Use of community centre services by current homelessness status

	Primary Homelessness	Secondary or Tertiary Homelessness	Other housing (including private & public rental housing)
Meals	92.9	93	95.5
Recreation	85.7	64	68.2
Information	64.3	71	36.4
Showers*	92.9	57	27.3
Laundry	28.6	7	4.5
Counselling	35.7	29	18.2
Listens and works through problems	50	36	27.3
Accommodation assistance	57.1	36	31.8
Emergency relief	35.7	43	45.5
Writing letters/phone calls on my behalf	35.7	36	22.7
Haircuts	28.6	29	27.3
Financial and material assistance	14.3	7	18.2
Telephone/fax to access other services	42.9	29	36.4
Talk to staff about personal issues/problems	64.3	50	45.5
Centrelink services*	64.3	14	22.7
Health services	35.7	21	31.8
Alcohol & drug problem support*	35.7	0	9.1
Emergency relief	7.7	7	13.6
Legal support	7.1	14	4.5

<sup>\*</sup> significant differences between groups (p .05)

Clients who had experienced 17 or more weeks of primary homelessness were significantly (p .05) more likely than those who had not to have obtained assistance with personal problems, used showers and obtained assistance with accommodation and accessing Centrelink services. On average, they also used a significantly higher number of services (see Table E2). Similarly, when we examined types of services used by clients' pattern of primary homelessness over the last 12 months taking into account both the number of spells and their duration (no incidence of primary homelessness, single long spell of homelessness, multiple spells of homelessness), we found that clients who had experienced a single long spell of homelessness had significantly higher use of showers, laundry, accommodation assistance and Centrelink services. Those who had multiple spells were less likely to use these, and those who had no experience of primary homelessness in the last 12 months were even less likely again to do so. Further, there were statistically significant differences in the mean number of different services used according to clients' pattern of primary of homelessness during the last 12 months. Those who experienced single long spells of primary homelessness used on average 10.7 different types of services, compared to an average of 6 among those who had not experienced primary homelessness in the last 12 months and an average of 6.7 among those who had experienced multiple spells (Table E2).1

Table E2: Number of community centre services used by experience of primary homelessness over the last 12 months

No of weeks in last 12 months in no shelter	Mean	N	Std. Deviation
0 weeks	5.8	36	3.55
1 to 16 wks	3.5	4	1.91
17 to 24 wks	9.0	5	3.08
25 to 52 wks	9.5	14	5.09
Total	6.8	59	4.21
Homelessness spell pattern type	Mean	N	Std. Deviation
No incidence of primary homelessness	6.0	33	3.56
Single long spell of homelessness	10.7	9	5.20
Multiple spells	6.7	12	4.05

Source: Community Centre Survey.

Turning now to an examination of longer-term experiences of homelessness, we begin with an examination of clients' experiences of homeless prior to the age 18. Early experiences of non-permanent accommodation (primary, secondary and tertiary homelessness) have a very strong impact on patterns of community centre service use. Clients who had not always lived in permanent accommodation prior to age 18 were significantly (P .05) more likely than others to use the following nine services: information, counselling, listens and works through problems, accommodation assistance, telephone/fax access to other services, Centrelink services, health services, alcohol and drug problem support, and emergency relief. There were also substantial and statistically significant differences in the mean number of services used. Clients who prior to age 18 had always lived in permanent accommodation on average used 5.1 services. Those who spent greater than zero but less than 60 per cent of their childhood/adolescence in permanent accommodation on average used 11 distinct services (see Table E3).

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<sup>&</sup>lt;sup>1</sup> On average, those who had a single long spell of primary homelessness were in no shelter for 44 weeks, while those who had multiple spells were in no shelter for an average of 23 weeks.

Clients who experienced primary homelessness prior to age 18 have a different pattern of service use compared to those who did not. A longer experience of primary homelessness prior to the age of 18 was related to higher usage rates for seven community centre services (listens and works through problems, telephone/fax to access other services, alcohol and drug problem support, counselling, writing letters/phone calls on my behalf, Centrelink services and accommodation assistance).

Table E3: Mean number of different services used by homeless before age 18

Per cent of life before age 18 in permanent accommodation*			Per cent of life before age 18 in primary homelessness**				
	Mean	N	Std. deviation		Mean	N	Std. deviation
0 < 60 per cent	11.0	8	4.24	0 per cent	6.0	33	4.11
60 <80 per cent	11.4	5	4.62	0 >5 per cent	6.6	5	3.78
80 <100 per cent	5.6	10	2.71	5 to 20 per cent	11.3	8	4.10
100 per cent	5.2	23	3.68	Total	7.0	46	4.46
Total	7.0	46	4.46				

\*significant differences between groups (P .000); \*\* significant differences between groups (P .01)

Source: Community Centre Survey.

Turning now to the relationship between use of community centre services and experiences of homelessness in adulthood, we see in Table E.4 that clients who had spent less of their adult lives in permanent accommodation were more likely to use five of the community centre services (information, showers, accommodation assistance, Centrelink Services, and alcohol and drug problem support). Clients who had longer experiences of primary homelessness in adulthood were also more likely to use these five services. Not surprisingly they were more also more likely to use three other community centre services: talk to staff about personal issues/problems, listens and works through problems, and laundry. This pattern of service use suggests that those who have long-term experiences of primary homelessness use community centres to deal with immediate personal needs (such as clean clothes, shelter, personal hygiene) and to deal with many different crises and difficulties in their lives, including drug and alcohol problems.

Table E4: Mean number of different community centre services used by experiences of homelessness from the age of 18, community centre survey 2006

Per cent of life after age 18 in permanent accommodation*			Per cent of life shelter (categor		nce	age 18 in no-	
	Mean	N	Std. deviation		Mean	N	Std. deviation
0 <60 per cent	9.4	18	5.10	0 per cent	4.1	14	2.51
60 <80 per cent	6.3	8	3.24	0 < 50 per cent	6.7	27	4.08
80 <100 per cent	5.3	23	3.21	50 to 100 per cent	11.8	6	4.49
100 per cent	6.5	10	3.44	Total	6.6	47	4.34
Total	6.9	59	4.21				

<sup>\*</sup> significant differences between groups (P .01)

Source: Community Centre Survey.

Clients who spent more of their adult lives in permanent accommodation on average used a smaller set of community centre services (see Table E3). Those who had spent between zero and 60 per cent of their lives in permanent accommodation on

average used nine distinct services, while those who had spent 100 per cent of their lives in permanent accommodation on average used six. At the same time, if we compare these results to the results above, we can see that a client's experiences of impermanent accommodation in childhood/adolescence appears to have a greater effect on their service use patterns than does experiences of impermanent accommodation in adult life. This is not surprising given that existing homelessness research indicates that impermanent accommodation in childhood is highly disruptive to children's learning and has very negative effects on their mental health.

Given that clients who had longer experiences of primary homelessness in adult life have substantially different patterns of service use compared clients without these experiences, it is also not surprising that on average they used a significantly (p .05) larger set of community centre services (p .05). Clients who had not experienced primary homelessness in adulthood on average used four services, while clients who had spent between 1 and 50 per cent of their adult life in primary homelessness on average used seven services. Those who had spent half or more of their adult life in primary homelessness on average used 12 services.

These bivariate results raise a number of questions about why long-term experiences of homelessness, and particularly early life experiences of homelessness, are strongly related to patterns of service use, while current homelessness status is not. One theory is that spending long periods of one's life in no shelter reduces clients' ability to assist themselves. Over time, they lose friendship networks, material resources and basic skills such as cooking, or if they are homeless in adolescence or childhood they may never obtain friendship networks, educational qualifications and skills in self-care. Thus, when these clients obtain accommodation, they still require a greater range of services than other clients. A second explanation is that clients who have longer lifetime experiences of primary homelessness also have a greater incidence of problems with addiction or mental or physical illness. On this view, the addictions and illnesses have compounded their difficulties in obtaining and sustaining housing (leading to longer lifetime experiences of homelessness) and these difficulties are related to a greater need for personal support, even when clients are in some form of housing. A fourth final explanation is that this result is an artifact of the way the data was collected, relying on point-in-time observations. In the survey, clients were simply asked how they had been assisted, without the specification of a time period. It is possible that those with longer lifetime histories of homelessness have visited the centre for many years and have, over a long period, accessed many different services, but were not accessing a large number of different services at the time of the survey. It is possible to examine if this was the case using the survey data.<sup>2</sup>

<sup>&</sup>lt;sup>2</sup> These issues are the subject of further inquiry. Further results will be presented in the Final Report forthcoming at the end of the year.

## 6 APPENDIX F COMMUNITY CENTRE CLIENT USE OF HEALTH AND JUSTICE SERVICES

Existing research indicates that persons experiencing primary homelessness on average under-utilise low cost health services such as GPs and over-utilise high cost health services such as hospitals and emergency rooms. Our results using the *Community Centre Survey* data were more complicated. At a statistically robust level, we found a positive relationship between higher average use of some low cost health services and current homelessness status, but we did not find a relationship between current homelessness status and use of higher cost health services. This relationship was inversed when we looked at use of health services by clients' longer-term experiences of homelessness. Furthermore, existing research on homelessness indicates that persons in primary homelessness have much higher rates of contact with the justice system than persons not experiencing primary homelessness. Our survey results confirmed this finding. This appendix provides an analysis of *Community Centre Survey* client use of health and justice services.

Community centre clients were asked if, in the last 12 months, they had had contact with a list of health and justice services: once, 2-5 times, 5-10 times, 10 times or more. So that we could calculate figures on clients' average use of these services, these figures were recoded to: '0', '1', '3.5', '7.5', and '10' times.

Beginning with *Community Centre Survey* clients' use of high cost health services, the data shows that there is a very large variance in use of such services (hospital, casualty, and ambulance) among clients who are currently experiencing primary homeless or who have done so in the last 12 months. Given this large variance and our relatively small sample size, we are unable to detect statistically significant differences between clients according their short-term experiences of primary homelessness. Given the high degree of diversity within the different groups and the relatively small difference in means, we estimate that it would be necessary to have a much larger sample to detect statistically significant differences in the average use of high cost health services between groups of clients experiencing primary, secondary, and tertiary homelessness. However, we are able to detect substantial and statistically significant differences in *Community Centre Survey* clients' use of high cost health services according to their long-term experiences of homelessness.

Specifically, we found that, on average, clients who were currently in primarily homelessness were not significantly more likely than clients who were not in primary homelessness to have had a hospital stay or to have visited casualty in the last 12 months. Likewise, there was no significant difference (p<0.10) between those who had experienced one week or more of primary homelessness in the last 12 months and those who had not. The frequency data from the *Community Centre Survey* indicates that clients experiencing primary homelessness were on average more likely to have had a hospital stay (one night or longer) in the last 12 months than the general population (average 1.9 stays compared to 0.1 stays). However, using formal hypothesis testing, this difference is not even close to being statistically significant.

The Community Centre Survey data indicates that there is substantial intra-group diversity in terms of use of high cost health services. On average in the last 12 months, clients who were currently experiencing primary homelessness had an average 1.96 stays in hospital, with a standard deviation of 3.1, and had visited casualty 1.9 times, with a standard deviation of 2.7. Those who were in secondary or tertiary homelessness had an average of 1.96 hospital stays, with a standard deviation of 3.3. Similarly, those who had one or more weeks of primary

homelessness in the last 12 months had in the last 12 months experienced an average 1.9 hospital stays with a standard deviation of 3.1 while those with zero weeks of primary homelessness had 1.3 hospital stays with standard deviation of 2.7. There was similar diversity in clients' use of ambulances. Again there was no significant (p<0.10) difference between clients experiencing primary homelessness and those who were not.

In contrast, when we examine use of high cost health services by clients' longer-term experiences of homelessness we observe much less diversity within groups and statistically significant differences between groups. Specifically, there were statistically significant differences between clients who had experienced primary homelessness in childhood/adolescence and those who had not. Clients who did not experience primary homelessness in childhood/adolescence on average had 0.5 hospital stays in the last 12 months with a standard deviation of 0.93. This is significantly different to the average of 1.6 stays among clients who had spent five to 20 per cent of their childhood/adolescence in primary homeless (with a standard deviation of 1.3). Furthermore, there is a significant difference in average visits to casualty according to clients' experiences of primary homelessness in childhood/adolescence. Clients who did not experience primary homelessness in their early life on average had 1.1 casualty visits, while those who had spent 5 to 20 per cent of their childhood/adolescence in primary homelessness had an average of 3.4 casualty visits. There were also highly significant (p<0.01) and substantial differences in average use of ambulances (an average of 0.36 to 2.6).

While it is very likely that there does exist some difference in the average use of high cost health services between persons who are and are not currently experiencing primary homelessness, we cannot detect a statistically significant difference between *Community Centre Survey* clients and the general Australian population or between different groups of clients. While it is possible these differences do exist, the *Community Centre Survey* data indicates that any relationship is weaker than the relationship between long-term experiences of homelessness in childhood/adolescence and clients' use of high cost health services.

Turning to lower cost health services such as GP, nurse/other worker, home visit and other health worker, we find that average use of some of these does vary significantly and substantially by current homelessness status. At the same time we find that use of these services does not vary significantly according to clients' longer-term experiences of homelessness. Community Centre Survey clients who were currently experiencing or had experienced primary homelessness in the last year on average had significantly less visits to a GP. Sixty-two per cent of clients who were currently in primary homelessness had not visited a GP in the last year, compared to 29 per cent of those who were in secondary/tertiary homelessness and 14 per cent of those who were in permanent housing. On average, they had 1.96 visits to a GP compared to clients in permanent housing who had 6.5 visits. The average visits by Community Centre Survey clients who are currently homeless is also lower than the average for the Australian population (4.21) but using formal hypothesis tests this difference is not significant. There was also a significant difference in clients' average use of home services according to their experiences of homelessness in the last year. There was no significant difference in average use of nurse/other worker or other health worker according to current homelessness status.

Given that clients' use of high cost services does vary significantly according to their longer-term experiences of homelessness, it is somewhat surprising that their use of lower cost services (GP, nurse/other worker, and home visit) does not. While the *Community Centre Survey* data shows that clients with similar long-term experiences

of homelessness are relatively similar in their use of high cost health services, it also shows that there is substantial variance in their use of lower cost health services.

Overall, in terms of statistically significant findings, these results indicate that experience of primary homelessness prior to age 18 is associated with more frequent use of high cost health services on average, but not with less frequent use of low cost health services. Conversely, current homelessness (or having been homeless in the last 12 months) is associated with higher average use of low cost health services, but not with significantly lower use of high cost health services. There are a number of possible explanations for these results, and these findings are the subject of ongoing investigations.

Community Centre Survey clients reported a high rate of contact with the justice system, with 61 per cent reporting contact with the police, courts and other aspects of the justice system over the last 12 months.<sup>3</sup> There were no significant (p< 0.01) differences in the overall rate of contact according to clients' current or lifetime experiences of primary homelessness. Nor was there a difference in clients' rate of victimisation (assault or theft) according to their current or lifetime experiences of primary homelessness. However, clients who were currently experiencing primary homelessness or who had done so in the last year, were significantly more likely to have been stopped by the police in the street, apprehended by the police, held overnight by the police, to have been in prison and to have been in detention. The standard deviations within each group were large; nevertheless, these differences between groups were significant. Clients who were experiencing primary homelessness were not more likely to have been stopped by the police in a vehicle, appeared in court in the last 12 months or to have had visits from a justice officer.

When we examined differences in contact with the justice system by lifetime experiences of primary homelessness we found even more significant differences between groups. Clients who had longer experiences of primary homelessness or adolescence/childhood reported higher average incidences of having been stopped by the police in the street, stopped by the police in a vehicle, apprehended by the police, held overnight by the police, and having appeared in court in the last 12 months. However, in terms of lifetime experiences, there was no significant difference in reported overall rate of contact, victimisation or having had visits from a justice officer. Those with longer experiences of primary homelessness in adulthood reported higher average spells in prison in the last 12 months.

Overall, these results suggest that primary homelessness is associated with higher rates of contact with justice services. Furthermore, they indicate that longer lifetime experiences of primary homelessness are associated with even higher rates of contact.

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<sup>&</sup>lt;sup>3</sup> Tables on use of justice services are not shown. For more details on use of justice services, see Chapter 7.

Table F1: Number of visits to a GP in the last 12 months, community centre survey

	Mean	N	Std. deviation
Current homelessness status *			
Primary homelessness	1.9615	13	3.31324
Secondary or tertiary homelessness	4.7500	14	3.94067
Other housing (inc private and public housing	6.5476	21	3.78122
Total	4.7813	48	4.09580
Weeks in primary homelessness in last 12 month	s (categorised	1) *	
0 weeks	6.4355	31	3.82697
1 to 52 wks	3.0455	22	3.67070
Total	5.0283	53	4.09081
Per cent of lifetime before age 18 in no shelter (ca	ategorised)		
0 per cent	4.5625	32	3.94468
0 >5 per cent	6.7000	5	4.68508
5 to 20 per cent	4.8125	8	4.46364
Total	4.8444	45	4.07155
Per cent of lifetime since age 18 in no-shelter (ca	tegorised)		
0	5.6429	14	4.07350
0 (GT) to less than 50 per cent	4.8846	26	4.16727
50 to 100 per cent	3.6667	6	4.21505
Total	4.9565	46	4.09719

<sup>\*</sup>significant at p< 0.01

Table F2: Number of visits to a specialist in the last 12 months

	Mean	N	Std. deviation
Current homelessness status			
Primary homelessness	2.3571	14	3.13435
Secondary or tertiary homelessness	1.2917	12	2.92682
Other Housing (inc private and public housing	2.2250	20	3.04991
Total	2.0217	46	3.00916
Weeks in primary homelessness in last 12 month	s (categorised	)	
0 weeks	2.3393	28	3.46157
1 to 52 wks	1.9348	23	2.67269
Total	2.1569	51	3.10723
Per cent of life before age 18 in no shelter (catego	orised) ***		
0 per cent	1.2879	33	2.36521
0 >5 per cent	3.7000	5	3.75167
5 to 20 per cent	3.1875	8	3.11606
Total	1.8804	46	2.76925
Per cent of lifetime since age 18 in no-shelter (ca	tegorised)		
0	2.1154	13	2.78503
0 (GT) to less than 50 per cent	1.7115	26	2.82550
50 to 100 per cent	1.8333	6	3.10913
Total	1.8444	45	2.78964

<sup>\*\*\*</sup>significant at p< 0.10

Table F3: Number of times a nurse/other worker visited in the last 12 months

	Mean	Ν	Std. deviation
Current homelessness status			
Primary homelessness	1.2857	14	2.66541
Secondary or tertiary homelessness	3.5000	13	4.30600
Other housing (inc private and public housing	2.3889	18	3.72020
Total	2.3667	45	3.64068
Weeks in primary homelessness in last 12 months (categ	orised)		
0 weeks	2.9444	27	3.85640
1 to 52 wks	1.4318	22	2.94915
Total	2.2653	49	3.52683
Per cent of life before age 18 in no shelter (categorised)			
0 per cent	2.2727	33	3.83057
0 >5 per cent	2.4000	5	3.18983
5 to 20 per cent	1.2857	7	1.57737
Total	2.1333	45	3.47458
Per cent of lifetime in no-shelter (categorised)			
0	1.2000	10	3.11983
0 (GT) to less than 50 per cent	2.3906	32	3.56898
50 to 100 per cent	2.5000	3	4.33013
Total	2.1333	45	3.47458

Table F4: Number of times a health worker visited me in the last 12 months

	Mean	N	Std. Deviation
Current homelessness status			
Primary Homelessness	.0000	14	.00000
Secondary or Tertiary Homelessness	2.0417	12	3.44739
Other Housing (inc Private and Public Housing	.7500	18	2.45099
Total	.8636	44	2.45983
Weeks in primary homelessness in last 12 months (categ	orised) *	**	
0 weeks	1.3269	26	3.06575
1 to 52 wks	.1591	22	.74620
Total	.7917	48	2.36516
Per cent of life before age 18 in no shelter (categorised)			
0 per cent	.8485	33	2.29974
0 >5 per cent	.0000	5	.00000
5 to 20 per cent	.0000	7	.00000
Total	.6222	45	1.99760
Per cent of lifetime since age 18 in no-shelter (categorise	ed)		
0	.2917	12	1.01036
0 (GT) to less than 50 per cent	.9423	26	2.51128
50 to 100 per cent	.0000	6	.00000
Total	.6364	44	2.01841

<sup>\*\*\*</sup>significant at p< 0.10

Table F5: Number of times in hospital in the last 12 months

	Mean	N	Std. deviation
Current homelessness status			
Primary homelessness	1.9643	14	3.15902
Secondary or tertiary homelessness	1.9615	13	3.31324
Other housing (inc private and public housing	.9211	19	1.93838
Total	1.5326	46	2.75359
Weeks in primary homelessness in last 12 months (	(categorised)		
0 weeks	1.3333	27	2.72453
1 to 52 wks	1.9783	23	3.15680
Total	1.6300	50	2.91864
Per cent of life before age 18 in no shelter (categoria	sed) **		
0 per cent	.9697	33	2.04229
0 >5 per cent	2.9000	5	4.21900
5 to 20 per cent	3.1250	8	3.67180
Total	1.5543	46	2.74515
Per cent of lifetime since age 18 in no-shelter (categ	gorised) ***		
0	1.2917	12	2.92682
0 (GT) to less than 50 per cent	1.4231	26	2.50476
50 to 100 per cent	2.0000	6	3.94968
Total	1.4659	44	2.77530
Per cent of lifetime in no-shelter (categorised)			
0	.4500	10	1.11679
0 (GT) to less than 50 per cent	1.5313	32	2.76189
50 to 100 per cent	4.8333	3	4.64579
Total	1.5111	45	2.76029

<sup>\*\*\*</sup>significant at p< 0.10

Table F6: Number of times in casualty in the last 12 months

	Mean	N	Std. deviation
Current homelessness status			
Primary homelessness	1.9643	14	2.73485
Secondary or tertiary homelessness	1.9286	14	2.27746
Other housing (inc private and public housing	1.3684	19	2.53225
Total	1.7128	47	2.48418
Weeks in primary homelessness in last 12 months (cat	egorised)		
0 weeks	1.7321	28	2.53305
1 to 52 wks	2.0217	23	2.88994
Total	1.8627	51	2.67596
Per cent of life before age 18 in no shelter (categorised	<i>)</i> **		
0 per cent	1.1212	33	1.81586
0 >5 per cent	2.7000	5	4.35316
5 to 20 per cent	3.4375	8	2.84652
Total	1.6957	46	2.48658
Per cent of lifetime since age 18 in no-shelter (categoria	sed)		
0	1.2083	12	2.95003
0 (GT) to less than 50 per cent	1.8704	27	2.25573
50 to 100 per cent	1.5833	6	2.93967
Total	1.6556	45	2.49960

<sup>\*\*</sup> differences significant at p < .05

Table F7: Number of times an outpatient in the last 12 months

	Mean	N	Std. deviation
Current homelessness status			
Primary homelessness	.2500	14	.93541
Secondary or tertiary homelessness	.7500	12	1.33995
Other housing (inc private and public housing)	.7105	19	2.38814
Total	.5778	45	1.75795
Weeks in primary homelessness in last 12 months (categ	orised)		
0 weeks	.7037	27	2.08594
1 to 52 wks	.5227	22	1.22938
Total	.6224	49	1.73964
Per cent of life before age 18 in no shelter (categorised)	+		
0 per cent	.6818	33	1.96381
0 >5 per cent	.7000	5	1.56525
5 to 20 per cent	.1429	7	.37796
Total	.6000	45	1.75680
Per cent of lifetime since age 18 in no-shelter (categorise	ed)		
0	.2692	13	.97073
0 (GT) to less than 50 per cent	.7692	26	2.11769
50 to 100 per cent	.0000	6	.00000
Total	.5222	45	1.70212

<sup>\*</sup> differences significant at p < .01

Table F8: Times in an ambulance in the last 12 months

	Mean	N	Std. deviation
Current homelessness status			
Primary homelessness	1.6071	14	2.66875
Secondary or tertiary homelessness	.6923	13	1.29965
Other Housing (inc private and public housing	.9000	20	2.39846
Total	1.0532	47	2.22934
Weeks in primary homelessness in last 12 months (categ	gorised)		
0 weeks	.6786	28	2.05126
1 to 52 wks	1.7609	23	2.88361
Total	1.1667	51	2.49533
Per cent of life before age 18 in no shelter *			
0 per cent	.3636	33	.88629
0 >5 per cent	2.7000	5	4.35316
5 to 20 per cent	2.5625	8	3.25618
Total	1.0000	46	2.22361
Per cent of lifetime since age 18 in no-shelter (categorise	ed)		
0	.7692	13	2.77350
0 (GT) to less than 50 per cent	.8846	26	1.76243
50 to 100 per cent	1.4167	6	3.00694
Total	.9222	45	2.22066

<sup>\*</sup> differences significant at p < .01

# 7 APPENDIX G CLIENT INTERVIEWS: PARTICIPANT RECRUITMENT

## G1 Sample size

Our initial aim, in respect of the in-depth client interviews, was to obtain a sample of 30 clients of the homelessness programs that are the subject of the study. The number 30 was arrived at on the understanding that this would provide the opportunity to hear about people's experiences from a variety of service target groups:

- → Single women;
- → Single men;
- → Couples with children with different family compositions;
- → Single parent families;
- → Women with/out children escaping domestic and family violence;
- → People leaving prison;
- → Those in public and private tenancies.

The research team developed a purposive sampling strategy to ensure that a cross-section of client experiences and service delivery types was included. The team took a proactive and assertive approach with agencies, discussing and explaining the project and the role of its qualitative component. Agencies were asked if they would assist by recontacting clients who had completed the *Client Survey* or the *Community Centre Survey* and enquiring if they were willing to participate in a qualitative interview. It was explained that this interview was different to the surveys in that it would incorporate a conversational format, exploring experiences of homelessness and attempts at getting help.<sup>4</sup> During this process, the qualitative researchers had extensive contact with agencies that had completed and returned surveys.

Table G1 provides a sample of the extent of contact undertaken in order to ensure participants were referred to the team for interview. (Agency types are not identified in order to protect the confidentiality of the agencies.) Despite the difficulties experienced in recruiting participants, the research team conducted thirteen individual interviews. These participants were drawn from the following areas:

- → Two community centres;
- → One women's refuge/domestic and family violence;
- → Five tenancy support programs (SHAP and PRSAP);
- → Five single men's crisis accommodation.

To supplement the data gained from the in-depth interviews, the research team analysed the qualitative responses in the *Client Survey* relating to the effectiveness of support and the potential outcomes that may have obtained had support not been provided. This analysis includes responses from 113 surveys from Wave 1 of the *Client Survey* and 55 responses from the Three-month and Exit waves. Data from these two sources (the in-depth client interviews and the *Client Survey*) provided the means to compare and cross-reference themes and to develop findings from a larger sample base.

<sup>&</sup>lt;sup>4</sup> It was also suggested that the interview would take less time (anticipated no more than one hour) than the survey, although subsequently it was evident from records kept of time taken to complete the *Client Survey* that most surveys were completed within an hour.

Table G1: Contact with agencies to promote participant recruitment

Number and type of contacts	Outcome	Comment						
Metropolitan agencies	Metropolitan agencies							
2 in person contacts, 20 phone and email messages	No participants referred	Agency extremely short-staffed over long period of time. Voiced strong commitment to the project, but due to staffing issues was unable to refer participants						
1 in person contact, 10 phone and email contacts	1 participant referred	Whilst researcher travelling to interview appointment, contacted by agency advising participant unable to make appointment. Unable to secure another appointment – no interview undertaken						
3 in person contacts, 5 phone calls	No participants referred	Agency undergoing restructure and significant staff turnover. Voiced commitment to referring participants, but noted that given their context, they were unable to dedicate time to approaching clients to participate in the research						
5 email and phone contacts	1 participant discussed – not referred	By the time the agency sought to refer, participant had left agency, without a forwarding address						
Rural and regional agencie	es							
7 phone and email contacts	1 x single male participant referred	Given travel distance, and high proportion of single males in qualitative sample, research team decided not to travel extended distance for one interview						
5 phone and 3 email contacts	No participants referred	Research team decided not to pursue further contact, given limited response from agency						
4 phone and email contacts	1 participant referred	Participant unexpectedly left WA, phone number provided to follow up for telephone interview; participant gave phone away – unable to undertake interview						

#### **G2** Ethical considerations

The qualitative team expressed and enacted commitment to ethical approaches towards research participants at all times. In order to ensure that the semi-structured interview guide elicited the data sought, whilst simultaneously protecting participants from harm, the guide was validated by the PAG at various stages of development. This provided the qualitative team with the opportunity to ensure that 'best fit' language was used and any sensitivities could be addressed.

At the commencement of interviews, researchers asked participants to identify the language they wished to use to best describe their experience of homelessness. This language was then employed throughout the interview, in order to mirror the lived experience of the participant.

Particular attention was given to exploring the role of the qualitative interviews in relation to the overall project with the interviewees and support staff. The importance of informed consent and the right to withdraw without consequence were emphasised, with examples of how participants might choose to enact this. A further area of ethical concern was also discussed with the interviewees in relation to emotional triggers or

potential risks to the participant. Darlington and Scott (2002: 27-8) discuss the importance of researchers assessing any potential risk to participants and responding in a timely and professional manner. They highlight the fact that assessment of risk is complex, given it is often dependent on the individual 'characteristics of the client and the psychological significance of the data being sought'. The research team ensured that appropriate support networks were available to participants and that they could use for debriefing purposes, if required after interviews.

## G3 Approach

Thematic analysis was undertaken of interviews and comments contained in the survey material. Participants were offered the option of having their interviews taped and transcribed or notes taken. To address this variation in the type of data captured, the qualitative team decided to reconstruct the transcripts into narratives or stories of the participants' lives. This technique draws on the tenets of narrative theory which highlights the importance of narrative for forging our sense of identity and as a means of connection to particular communities (Roche and Sadowshy 2004). These narratives aimed to provide clear accounts of first and subsequent experiences of homelessness, attempts at getting assistance, actual assistance received and the impact of not being assisted.

In addition to the above topic areas, other relevant data was provided by participants, including their experiences of service delivery and other life experiences. In order to honour the stories of participants, we include the narrative of each response to the qualitative questions contained in the *Client Survey* at Appendix H.

The process undertaken by researchers to thematically analyse data involved:

- The qualitative team meeting to read and analyse transcripts, research notes and narrative accounts:
- The generation of broad themes, with specific attention to costs, outcomes and consequences of homelessness;
- Comparing the interview themes to the themes in the survey comments;
- Comparing client comments and caseworker comments in order to highlight similarities and differences.

The process of creating categories and assigning them to selected data (Darlington and Scott 2002, p. 144; see also Stringer and Dwyer 2005; Atkinson and Delamont 2005) acknowledges that capturing the experience and meaning of others necessarily involves interpretation. In the context of this project, the researchers acknowledge that the analysis of transcripts and narratives does not ensue from a neutral or 'objective' position. Rather, the purpose of creating categories and structuring the qualitative material is based on the view that the content and themes derived from the experiences of this group of people provides insight into reducing the possibility of further episodes of homelessness.

# 8 APPENDIX H CLIENT AND CASEWORKER OPEN-ENDED RESPONSES FROM THE CLIENT SURVEY

Table H1: Wave 1 survey comments

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from happened? What do you think the conseque client), your (the client's) family and those been available?		
Caseworker	Client	Caseworker	Client	Program
May possibly be on the street, health would have deteriorated, no access to agencies for support and would have no plan in place to move forward with life.		Client is happy with assistance with accommodation. Would or may have been homeless if agency did not offer him accommodation.		SAAP Men, Women and Couples
More settled, calmer and given opportunity to assess what has been happening in his life. Look forward to the future with confidence.		Would have done or seriously considered self-harm which would have devastated family and friends.		SAAP Men, Women and Couples
	If I didn't receive support I would probably be living on the streets or squatting in empty buildings. I really want to get a place of my own		Would have been suicidal, depressed and not felt wanted by anyone.	SAAP Men, Women and Couples
Client was offered Independent Living Program, however declined due to future plans of travelling interstate.				SAAP Men, Women and Couples
Accommodation, counselling, transport	Accommodation, counselling.	Moved forward with problems	Depression, safety risk	SAAP Family Accommodation Service
Provided client with:1. Crisis accommodation area. 2. FDV specific counselling. 3. referral service = legal/counselling. 4. Action/support plan. 5. Supportive follow-up counselling.	Provided a lot of help to me in all aspects of my life. Support into the future – as a back-up.	The client may have harmed herself which would have impacted on her daughter, if the above support was not provided	I think that I may have caused harm to myself.	SAAP Family Accommodation Service

In what ways has the service helpe you think the service may assist yo time and in the future?		If you (the client) hadn't received help from happened? What do you think the consequ client), your (the client's) family and those i been available?		
Caseworker	Client	Caseworker	Client	Program
Housing – Homeswest	Crisis accommodation, meals, transport, referred to other agencies, counselling		No shelter/food or none of above [Crisis accommodation, meals, transport, referred to other agencies, counselling]	SAAP Family Accommodation Service
Client was assisted by: 1. Providing short-term crisis accommodation. 2. Providing crisis counselling and referral service.	Accommodation. Crisis counselling.	Consequences would have included: 1. health compromised, epilepsy may have increased due to stress. 2. Continued talking by partner.	Concern for safety would have increased anxiety to high levels and may have triggered epilepsy and need for increased antidepressants	SAAP Family Accommodation Service
	Accommodation, counselling, referral		Suicidal	SAAP Family Accommodation Service
The family had a long-term homeless history. Have been and are being housed in a supportive program. The family have had their needs identified and are working positively in addressing them.		They would have been homeless, re- offending and using, children in care, parents doing prison time.		SAAP Family Accommodation Service
Assisting family by providing SAAP accommodation and support. Assessing needs individually as well as collectively. Providing links to other services when necessary. Provision of counselling, mentoring and practical support. Every chance that this family would have remained homeless.	XXXX have been here for me through [dealings with] Homeswest.	Family would have been homeless. Increased conflict with the justice system, including other members being incarcerated. Increased usage of illicit drugs and substances. Possible increase in violence and anti-social behaviour. Dollar cost to society very high with three siblings incarcerated and one currently on bail. Paralleled by increased social and health costs.	Homeswest may not have listened or helped me.	SAAP Family Accommodation Service
	XXXX – Well they have done a lot of things for me and my family. They helped us with accommodation better than any other services.		XXXX – If they didn't help us, it would be a lot different situation – getting our kids back and getting a good lifestyle.	SAAP Family Accommodation Service
By providing supportive accommodation for the family to have unification through XXXX and	XXXX has helped us maintain our appointments, helping with programs and housing.		Things like housing and getting our children back, getting back in mainstream.	SAAP Family Accommodation Service

	n what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present ime and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program	
XXXX. To provide a tenancy history to re-establish a history with [illegible].					
The family has had the longest tenure in a property ever. They were supported to identify and begin to address issues such as sexual abuse, incest, gambling in an empowering way, also work positively with the children and each other. They have achieved and are working towards meeting their goals.	We would've been homeless and greatly misunderstood in the housing sector. The service has provided more than housing. The service provided counselling for our family, encouraged us to be part of our children's lives more and paying bills	The service has been and is currently instrumental in the family being housed and providing support to work towards having long-term housing and links in the community to support the family.	No housing (homeless). Drifting away from our family commitments. Having no interest in paying our bills. Losing faith in ourselves.	SAAP Family Accommodation Service	
Provided accommodation, information, support and material aid. Engaged services to address the needs of the children which have been previously unaddressed. Assisting to develop an environment of safety and stability.	Already – housing, clothing, financial assistance, support from worker. Future – children's holiday program, obtaining stable housing.	The family would have remained homeless, likely living in their family car. Behaviour of children may have further deteriorated. Extended family relations would have been further strained as family would regularly 'crash' with other family members – led to arguments and relationship breakdown. Extra demand on refuge and temporary housing services with no real change/progress. Children may have ended up in care due to mother's inability to cope.	I would have lost custody of my children. Devastating for my children to be taken from me, for me and my kids. Pressure on my family to help me.	SAAP Family Accommodation Service	
Client not aware of rights as not renting through real estate agent. Needed linking in with ER [Emergency Relief] agencies. Client lives in substandard property.	The service has helped me with so many aspects of my situation since working with me. Advice on my housing problems, assistance with transport, and a very kind ear to listen to me with my problems.	Client has some serious health problems and needs transport assistance plus emotional support. Felt that no-one could assist her but now is more empowered.	I have been under so much pressure with my landlady that without this service I would have been on the street with my dog and my belongings.	SAAP Family Accommodation Service	
The service has provided the family with a stable home and ongoing support. This has enabled the eldest child to start school close to where they are living. The client has been able to get his furniture and belongings out of storage. The client	It has helped me mentally just to get my kids into a stable house and being able to have a routine so they can develop. Mentally for me it's been a lot better having my own space instead of sharing with other people. Where I am now is	The client had already self-referred to XXXX [approx.] 12 months ago and is receiving counselling and support with them also. At the time he was homeless and drinking. He then received care of his three children. He was unable to access emergency [accommodation], family would have	My daughter probably would still be missing school on days I couldn't afford the fuel for the car. My mental health would be a lot worse as I was pretty unstable at times when things got to me more. My family and I would still be living in a lounge room and	SAAP Family Accommodation Service	

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
is also receiving support through XXXX, in particular with counselling and general assistance. The service will assist the family with looking at future housing options and help with accessing these.	just perfect for my situation and I couldn't have a better place to live.	continued to live in very inadequate accommodation with no access to bathroom facilities. The client is working towards reconciling with his partner – this is unlikely to happen without the stability of the home. The children were becoming increasingly anxious, and would have required counselling.	dining room, all squashed in with no bathroom facilities during the day.	
Housing advice, talking things through, case planning. She needs assistance in establishing routine for housework, pre-planning for school costs etc.	Help us with whatever we needed  – with housing and that. If we need food vouchers they help out.	She would have stayed with family in overcrowded conditions. Children without education. Relationships strained.	Probably in and out of my family's house and hostels	SAAP Family Accommodation Service
The service has helped the client by providing a safe, stable environment. He has street smarts and would have got what he needed one way or another – however, this may not have been legal, safe or could have caused other family members anguish.	XXXX has provided me with much- needed [accommodation]. Also assistance with emergency food vouchers, financial assistance and travel costs. Also some verbal [counselling]	He could have turned back to substance abuse. He would have let his temper end him up in trouble. This would have caused family if not breakdown at least unrest. The community could have had an unstable person committing crime.	If XXXX had not provided me with such great support I most probably would be in jail or would have committed suicide by now.	SAAP Family Accommodation Service
Service has provided stable housing and emotional support. We have constructed a support plan in which we have looked at financial issues, parenting, education and training. Referral made for the Sky program for children.	This service has helped me and my children by providing me with a home and people who help me out as far as looking for work or study. Being there when I have problems that I need help or advice with.	Client believes that she would have sunk further into depression. She believes that her children would have suffered also.	I would have been totally dependant on my mother for somewhere to stay. They have given me a house for me and my kids which will lead to me getting a Homeswest house in the future. My family are in a much more stable environment than we would have been if we did not receive help	SAAP Family Accommodation Service
	Help with transport when in crisis.  More time to spend with caseworker if needed		·	SAAP Family Accommodation Service
Client would have had to stay in a dangerous situation. Client and children would have had to sleep in the bus if there was no emergency	* No more questionnaires. Support. Roof over head when needed.	Physical violence resulting in bruises and swollen mouth/eye. Children would have witnessed violence.	Sleeping rough in parks	SAAP Family Accommodation Service

In what ways has the service helpe you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you client), your (the client's) family and those in the community had support been available?			
Caseworker	Client	Caseworker	Client	Program	
accommodation.					
	Giving me and my family somewhere warm and safe to stay! Giving my partner work has helped us save money so we can get home to our other children.		I would be stuck in WA for a long time with nowhere to live	SAAP Family Accommodation Service	
It has given the client a chance to asses his current situation and has also provided stability. This is important for the client as he needs to organise a plan on what to do next.	Stability and a safe environment	Client does not want to make a comment	Would have dealt with the situation no matter what.	SAAP Single Men	
Due to the client's circumstances on arrival, it has given him time to assess the situation and start making decisions on what his next step will be. It has provided him a chance to access community organisations to assist him with the predicament that he finds himself in.	If support had not been available I think I would be very stuck. That it has been available it has given me some more options to start anew.	Client would have contacted family eventually/	As above [If support had not been available I think I would be very stuck. That it has been available it has given me some more options to start anew.]	SAAP Single Men	
	Might still be living in my car		Might still be living in my car	SAAP Single Men	
	General help. Would have been mixed up with the wrong people.		Might have been in more trouble	SAAP Single Men	
	Support: Help manage finances. Counselling support. Interaction with other people. Without support: homeless, no money, insecurity		As above [Support: Help manage finances. Counselling support. Interaction with other people. Without support: homeless, no money, insecurity]	SAAP Single Men	
XXXX has helped the client with emergency accommodation, emotional support and some time out to sort out his situation and discuss options with support workers and other staff. Depending on whether the client is still valid for	Food and bed in clean and comfortable surrounds	The client most likely would be on the streets if he hadn't received accommodation here. The client is already unhappy with the situation he is in, so if he was on the streets he would feel a lot more messed up and perhaps consider suicide. He would not resort to crime.	Very likely to have done myself in	SAAP Single Men	

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
Newstart he might not be able to stay here any longer because he can't afford it. A lot of trade jobs (that the client is qualified for) require the client to have a car which he doesn't. The employment agency staff haven't been very helpful at all because they don't give the client enough time and patience to explain his situation properly therefore come to the wrong conclusion. Client feels frustrated with the lack of proper support he has been given and feels overwhelmed with his situation when he is faced with it alone.				
This service has been of great assistance to the client whilst having a broken leg. He might be able to use a service like this if a crisis situation happens in the future.		The client would have looked for other emergency accommodation elsewhere, otherwise probably would have ended up on the streets because he doesn't know any friends or family in Perth.		SAAP Single Men
Accommodation, emotional and moral support, good food, able to wash clothes for free. Good atmosphere where people care!	Having a roof over my head is a good thing and if they are always here I will always have one when I need one.	accommodation here. He has no photo ID to get into hostels/pub hotels etc as well as a bad renting history so has very limited places to stay. The client does not think living on the streets would dramatically affect his life because he feels he would still be able to work, wash clothes at laundromat, have a shower at train station, City Rest or somewhere else, and eat with the money he gets from working full-time.	Homelessness, living on street	SAAP Single Men
XXXX have prevented the client from sleeping on the streets. Helped with future aspects of accommodation as he has been in temporary accommodation for a long time	Bed and help with rental properties	Client would be homeless if he hadn't been provided with accommodation at XXXX because he had already tried everywhere else.	In jail I believe	SAAP Single Men

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
XXXX have helped the client with accommodation and time to think about sorting things out. He has been provided with drug and alcohol counselling and emotional support.		The client may be in jail if he hadn't been provided with support here.		SAAP Single Men
XXXX have helped the client out of prison, accommodation, meals, a bit of emotional support and being nice. They have also provided drug and alcohol counselling with the on-site counsellor. Also referred him to a medical centre for health issues.		The client feels that he would be back in jail if he didn't find emergency accommodation like XXXX, as his parole conditions only allow him to live in certain situations. The client has already been in jail for six years so his family would not have been significantly affected if he had to go back for a while.		SAAP Single Men
XXXX has helped the client get involved with the Commonwealth Employment Service. Provided with clothes. Assistance with paying rent. Accommodation and good food.	Rental credit, CES [Commonwealth Employment Service].	Would have gone to another homeless shelter. The client has needed accommodation here because he has done damage to his back at work, consequently not been able to work and not had enough money to pay rent and ended up at a crisis accommodation place		SAAP Single Men
Provided accommodation. XXXX have provided emotional support, a place to stay when there was nowhere else and gave him home and a will to live when he was ready to give up life. Client has also gained friends at XXXX. He has been provided with services from Centrelink representative and will receive drug and alcohol counselling soon.	See page 41 [Provided accommodation. XXXX have provided emotional support, a place to stay when there was nowhere else and gave him home and a will to live when he was ready to give up life. Client has also gained friends at XXXX. He has been provided with services from Centrelink representative and will receive drug and alcohol counselling soon.]	Client would have committed suicide. He does not believe he would not have committed criminal activities	[Drawing of noose]	SAAP Single Men
Food and accommodation. The client does not feel that his situation needs changing at present therefore cannot be assisted with gambling, drinking, money management	Provided food and accommodation	Client would have been on street. Consequences would have been no bed, lack of food and mental state would have been questioned, criminal activity would have come to the fore.	Homeless, forage for food, criminal acts.	SAAP Single Men

	what ways has the service helped you (the client) already? How do not think the service may assist you (the client) during the present happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?			
Caseworker	Client	Caseworker	Client	Program
problems.  XXXX have been a great support for the client by putting him in the Independent Living Program, providing him with somewhere to stay when mental health condition was not going well, and emotional and financial support, e.g. organising his bills to be paid by automatic debit.		If the client hadn't received assistance he would have gone to live in the bush (as he has done once before). The client feels as though suicide might have been an option he might have taken if he hadn't been provided with support from XXXX		SAAP Single Men
Emergency accommodation and food. XXXX will help the client in the immediate future by providing stable accommodation for at least a few weeks while he sorts out future aspects of his life – finding an ongoing job so he can find a home and provide for his kids.	Yes they are very good here Gave me stable base	The client would've found it quite a lot harder if he hadn't found some type of emergency accommodation to find a job again and get into a regular routine. XXXX is a great base to provide basic necessities of life.	Stayed at sons in XXXX Still would have got there	SAAP Single Men SAAP Single Men
The staff are willing to listen and give advice. They are non-judgemental and always try to help. Helped in finding services including Nextstep. Some alcohol and drug counselling.	It has helped me by putting me in touch with the relevant agencies to help me deal with my drug addiction. It can help me in future by being supportive and help me to access any other agencies if need be.	The client may be in prison if he had not been provided with assistance here. This would have upset his family and cost the community money.	I would either be in jail now or deliberately tried to overdose.	SAAP Single Men
The client has been assisted with accommodation here twice when plans have changed regarding work and he has nowhere else to stay.	Client has only been here for five days so has not received extensive assistance.	Client would have been forced to stay in a hotel and pay a lot more than he wanted to.		SAAP Single Men
Accommodation – without a wait to stay here. A place to stay where meals are provided. The client has poor health due to living on the streets, smoking and	Yes the have allowed me the best night's sleep in a long time.	Client probably would have got pneumonia from sleeping on the cold streets. The client does not keep in contact with his family any more	Without support so far given, I would be one dead person.	SAAP Single Men

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
building/construction type jobs that have affected his health				
XXXX have helped the client by providing cleaner and safer accommodation than the previous place. Coordinators have helped him look for apartments/a stable place to live when he leaves here (unsuccessful so far). XXXX will continue to provide assistance for him until he finds more suitable accommodation.		He would have had to live in dodgy boarding houses if accommodation had not been provided here. This would not have impacted other areas of his life because he is used to living in temporarily accommodation lately.		SAAP Single Men
XXXX have helped the client with emergency accommodation. They have helped him deal with his problems, contact family to let them know where he is, as well as provide guidance and emotional support during the breakdown of his family situation. Referred to Inner City when suicide contemplated		Client may have committed suicide from being overwhelmed by his problems or committed a crime or become homeless.		SAAP Single Men
Accommodation. Client has learnt how to budget his money better. He has also learnt how to get along with other people better at XXXX.		The client thinks he would be in jail now if he hadn't received support or accommodation here. His family would probably be impacted negatively if this happened		SAAP Single Men
Provided accommodation. Helped him get back on track again with drinking problems and financial problems.	By getting my act together [illegible word] get a house or flat in the near future.	Would have slipped back into drug taking. Would have affected the relationship he has with his children's mum and his two children. He might have not been able to see his children any more if his drug/alcohol problems had become worse	Would have slipped further back into drugs and alcohol	SAAP Single Men
The client has only been here for one day so has not received any services as yet. Client would like to use photocopier/fax at XXXX. Would also like to get back his medication	Provide accommodation			SAAP Single Men

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
and prescriptions as well as some rent money owing to him from XXXX [previous accommodation].				
Accommodation, emotional support from coordinator when needed. Assistance with health/medical problems after being on the streets, assistance to find alternative accommodation when asked to leave.	If there weren't any places like XXXX to offer assistance there would be a lot more chaos in the city of Perth.	The client thinks he might be in jail if he hadn't found accommodation here. Not willing to answer the second part.	Jail	SAAP Single Men
Providing short-term accommodation and basic needs when homeless.	Client plans to find an independent place to live and doesn't expect accommodation services to be needed by him in the future.	The client does not have family alive except for two sons who he doesn't have much contact with. If he wasn't provided with emergency accommodation he would go and live in the bush by himself.	The client does not have family alive except for two sons who he doesn't have much contact with. If he wasn't provided with emergency accommodation he would go and live in the bush by himself.	SAAP Single Men
Accommodation during crisis situation. No waiting period.	Accommodation so I could get a job and keep it.	If the client had not found somewhere else than here he would have looked for emergency accommodation elsewhere. The client does not feel that it would have impacted the community/family/society if he hadn't been provided with accommodation here. My Notes: The client seemed very determined to find accommodation. I think he would have found somewhere else if not here.	I would probably still be sleeping on the street and not have a Job.	SAAP Single Men
The client has been provided with accommodation, a bed and meals. He has only been here for a short period so hasn't received assistance in other areas. The client seems unhappy with his life altogether so I think he should have some counselling in the future.		The client thinks he would be in jail if he hadn't stayed at XXXX. The room mate he stayed with through XXXX was not suitable to live with so he had limited options.		SAAP Single Men
Client was living in his car before coming to our crisis accommodation.	With accommodation and meals	If the client had not received assistance during his emotional period (losing job and	Would have had to find alternative arrangements from government	SAAP Single Men

In what ways has the service helpe you think the service may assist yo time and in the future?				
Caseworker	Client	Caseworker	Client	Program
It has helped him here because he had nowhere else to go at the time of being homeless. XXXX will help the client take some time out after a hectic and emotional situation to think about where to go next whilst not having to worry about food and money as accommodation at XXXX is cheap and includes meals.		house due to emotional breakdown) he might have attempted suicide. The client does not think that his family need to know where he is.	agencies	
They gave me a place to stay whilst I was in an emotionally drained state – they accepted my behaviour – which at times can be slightly erratic – and therefore I feel safe and secure I am in an environment – where I feel a strong urge to stay off drugs therefore giving me an ability to get clean and feel better and see a more positive side of myself than I have for a while. I am also like 100% happier from communal mixing.	[Note on page] XXXX thinking about what to say	If I wasn't allowed to stay I probably would cruise around in my car, take drugs, mix with the wrong people, lose my sense of reality, see life through paranoid eyes at a time when I really need to be straight – I might have ended up with NO XXXX [son] and in Graylands [Perth psychiatric hospital] this time. I have my child and I'm a good mother.		SAAP Single Men
XXXX were aware that the client had come from rehab and they accepted this, which meant a lot to the client. Some counselling. Meals, warm bed. The client does not feel that he will need crisis accommodation in the future.	The service has helped me by giving me a warm safe environment to live whilst also helping with my short-term goals regarding being aware of drinking problem.	The client would have stayed at his parents' house if he had not been able to stay at XXXX, although he would have felt uncomfortable as a grown man living with his parents. The client does not feel he should be working or looking for a job at this stage of his alcoholism and needs to focus on just staying sober	I would have been living with mum and dad again	SAAP Single Men
Somewhere secure to stay without being hassled to leave. Able to ask staff for help if need to. Client has been provided with drug and alcohol counselling. He was also assisted to get in touch with Centrelink to maintain government payments.		Maybe on the streets. Had to look for further accommodation. Client may have started using more drugs if he was living on the streets.		SAAP Single Men

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
Client has had problems with alcohol and getting in trouble with the law in the past. He feels as though he is doing very well now and on track to looking after himself, although he does not know where he will be going after he leaves XXXX. XXXX has helped the client as he feels living here is safe, and because there are rules he won't do anything stupid, e.g. come back drunk. The client also feels other residents here have helped him do the right thing.	You know you can get help when you need it	The client tells me his mother is happy that her son is living here because she knows where he is and is less likely to get into trouble. If the client had not been provided with assistance here he thinks he probably would still be staying at XXXX. The client does not think his actions would have affected the community if he couldn't stay here because he is focused on keeping his job (once his foot gets better) and staying on track.	Put family under stress	SAAP Single Men
Accommodation, nice people to talk to, great support from staff – A roof over his head after being evicted from house – because of not being on the lease. XXXX had been a great place for this client as he can receive short-term accommodation at a cheap price while waiting to go into hospital for his XX replacement.	If the client had not received assistance he would have tried to find cheap accommodation elsewhere in Perth. Otherwise he would have had to fly to XXXX to live with his parents – This would be the last resort to fly to XXXX as he is an independent person and doesn't like to ask for help from his parents because they have already helped him out so much in the past.	I would have relied on my parents as a last resort	I would more than likely be OK (see above)	SAAP Single Men
XXXX have helped the client with a place to live when he is at risk of homelessness. He is happy with the meals and treatment at XXXX. Living here has given the client some time to think about his life, the choices he is making and where they will lead to.	I have been provided a more stable environment and this has made me happier and to an extent healthier	Things would have [spiralled] out of control if he hadn't been provided with assistance here. The client feels he can be very reckless and disruptive to the community if his life is not under control. If he hadn't been provided with assistance here he would be homeless and an alcoholic.	I may have ended up in jail or still on the streets getting unwell.	SAAP Single Men
XXXX has helped the client with emergency accommodation after being kicked out of the house he	Just a roof over my head	The client might have had to live on the streets for a few days until he found alternative accommodation if accommodation	Walked the streets	SAAP Single Men

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
was living in with friends, because there was too many		had not been provided. The client's family would not have been affected because he doesn't see them any more. Temporary working conditions make it hard for him to find stable accommodation as his job involves moving around Western Australia a lot.		
Compared to other crisis accommodation XXXX is the best place he's stayed at. XXXX have provided good meals, everyone is friendly. The coordinator is helping the client contact WA Apartments to get him a place to live.	See pg 41 (W1C95) [Compared to other crisis accommodation XXXX is the best place he's stayed at. XXXX have provided good meals, everyone is friendly. The coordinator is helping the client contact WA Apartments to get him a place to live.]	The client really doesn't want to end up on the streets so would have tried hard to find alternate accommodation. The client feels his family wouldn't care if something bad happened to him.	as above [See pg 41 (W1C95) The client really doesn't want to end up on the streets so would have tried hard to find alternate accommodation. The client feels his family wouldn't care if something bad happened to him.]	SAAP Single Men
Continuing housing and support	given housing and continually receiving housing	The client may have ended up homeless if accommodation had not been provided for him. His health, wellbeing, job and financial situation would have been significantly affected! Family would have been devastated if their XXXX year old son had become homeless	another homeless guy no biggee	SAAP Single Men
XXXX helped the client with cheap accommodation. XXXX has helped client to understand his problems and how best to address so as to resolve.	Keep roof over head – food in tummy	Extremes of duress. Trying to get to clear understanding of prevailing issues in relation to own problems compounded by, if XXXX wasn't available, having to survive day to day.	No roof over head. No food in tummy.	SAAP Single Men
Cheap accommodation, including food. Tried to assist with gambling issues but client did not want to receive help. St Barts also provided health/medical assistance and government assistance.	Provided cheap accommodation and food	The client would have found accommodation elsewhere but he would have had to pay a lot more. If he ran out of money he would have had to sleep in his car a few nights until he found alternative accommodation (accommodation is available at his work)	It would've taken longer to find somewhere to stay	SAAP Single Men
Client was given safe accommodation support through legal issues with a Violence		This client was threatened with death and this would have been ongoing and is still going on with death threats now.		SAAP Women

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from happened? What do you think the consequ client), your (the client's) family and those been available?	ences might have been for you (the	
Caseworker	Client	Caseworker	Client	Program
Restraining Order in and selling property. Attending domestic violence group nine weeks. Client now given safe long-term accommodation.				
Giving lots of support and security to this client. Knowing there was full-time support.	Much-needed emotional support and security. Provided an explanation of my rights and services available to me and assistance in obtaining these things.	(1) Stayed in unsafe accommodation. (2) Last was asking for help from the client's daughter.	Continued to stay in unsavoury and unsafe accommodation to the point where I would/could possibly become very depressed and/or destitute whereupon I would have needed assistance from my eldest daughter.	SAAP Women
This client had been in our agency for 20 years. She was given long-term accommodation and support the whole time.	Without this agency I would have been homeless. This agency has given me a permanent home for 22 years. Now with my ill health this service has helped me find accommodation in a retirement village due to my blindness.	This client, if our support was not given, would have to live with her son who is an alcoholic and abusive and very violent.	I would have been homeless.	SAAP Women
We gave this client safe accommodation, without our agency this client could have been homeless, and [helped] with the severe injuries needing medical attention over the past four weeks. Also this client needed some emergency relief.	If this service was not available to me I would be sleeping on the street. This service can assist me by putting me in contact for other help. Having someone to talk to and help steer me in the right direction that will better my life.	This client would have been left on the streets. She had no support from her family.	If this service had not been available I would have been forced to return to a violent situation and suffered more assaults and abuse.	SAAP Women
Stabilised accommodation and provided safety	The service from the women's refuge centre has been excellent. If support was not available I would have stayed on the streets and slept in the car. Self-harm due to the hopelessness of the situation.	The client's mental health would have got worse and they could have ended up in hospital.	Consequences would have been disastrous as my elderly mother is depending on me to look after her as I have no other family. She is still waiting for me to receive proper accommodation.	SAAP Women
Client would have been homeless, and also needed a safe house to stay in until such time as the family put some rules and made the house	The service provided a safe place for me when there was nowhere else to go.	Client was in great danger with her life after her brother kept visiting the family home where she lived. The brother is a drug user and becomes very violent.	If not for this service, I would have come to a bad end, either on the streets or in my previous situation. Others may have been hurt by myself	SAAP Women

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
safe for client before going home.			in my previous situation.	
Arrived with no income, now on Special Benefit. Helped the client collect belongings. Ongoing support with getting a Violence Restraining Order in place with a lawyer through Legal Aid. Long-term housing. Attending domestic violence group each week for six weeks	I arrived with no income, now on Special Benefit. They have helped me collect my belongings through police escort. Ongoing support with setting a Violence Restraining Order in place with a lawyer through Legal Aid. Long-term housing. Attending domestic violence group each week for six weeks. I feel more confident and safe in life to come	Would have to return to the client's parents in XXXX	I would have no alternative but to return to my parents in XXXX	SAAP Women
This client forced to leave family home. Stayed at our agency. Support and transport given to go to a Homeswest appeal. Has now been granted wait turn listing with Homeswest. This client will stay in a long-term house from our agency until Homeswest accommodation becomes available.	XXXX gave me accommodation when I had nowhere else to go due to domestic disputes. This included meals, before coming here I was having trouble having enough money for food. I now have access to a social worker who will help me get priority assistance from Homeswest and all the staff here have given me counselling as needed. Without XXXX I would have been out on the streets, so I am extremely grateful for their assistance.	This client would have become mentally unwell. Her condition would have become worse if she stayed in the family home. This client would not have attended the Homeswest appeal and may not have been on the wait turn listing with Homeswest.	Because I have been diagnosed with obsessive compulsive disorder, if I hadn't received assistance from XXXX I believe my mental and emotional health would have badly deteriorated.	SAAP Women
	More confidence, reassurance of stepping in the right direction. Understanding my goals. Appreciation of the services		Still in a conflict situation.	SAAP Women
Our service has provided safe accommodation for the client for approximately six weeks. Have provided continued emotional support and counselling, as well as referrals and advocacy with other	Have had plenty of support and am happy to know that the support will continue.	This supported period is the first time the client has sought help for domestic violence issues. We have given her the opportunity to make major changes and have connected her with multiple supports; counselling for her and her children re DV and her alcohol	I would be dead by now and my boys would be devastated.	SAAP Women

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
agencies. Client attends one of our support groups and we are her lead agency in XXXX.		misuse; and encouraged client to pursue legal processes against ex-partner. Client had been living on isolated property with extreme DV and would have been unable to access any services if not for our accommodation service		
Provided safe and secure accommodation. Staff present 24hours providing peace of mind for this female client. Offered a lot of emotional support. Advocacy on behalf of client. Attended lawyers' appointments and court hearings with client. Provided recreation and leisure activities which have helped build self-esteem, self-worth and assist emotional healing. Been a source of friendship for the client.	Service has become like my family. They have listened to me to my problems. They talk to me, make me feel better, that things are not as bad as they could be. They stand by me. Accompany me to lawyer's appointments. Give me friendship. I would be lost without this service. They will be there for me in the future.	The client would have had to return to an unsafe environment suffering further physical, emotional and mental abuse as she had no other place to go besides the women's refuge. Client may have had to go back into hospital due to mental health issues as a result of domestic violence. Police services would have had to attend an incident again at her home. Her elderly mother would have experienced further stress and anxiety about her daughter's safety and wellbeing.	I would have had to return home to my husband and been physically and mentally abused. I would have been an emotional and physical wreck. I would have been very unsafe but I would have never asked the police again as I don't trust them any more due to negative circumstances.	SAAP Women
Helped with client's issues. Homelessness would have continued		No family support		SAAP Women
[section filled in by client – has been entered in w1d16]	[Note on page] XXXX thinking about what to say. [They gave me a place to stay whilst I was in an emotionally drained state – they accepted my behaviour – which at times can be slightly erratic – and therefore I feel safe and secure I am in an environment – where I feel a strong urge to stay off drugs therefore giving me an ability to get clean and feel better and see a more positive side of myself than I have for a while I am also like 100% happier from communal mixing.]	[section filled in by client – has been entered in w1d16]	[If I wasn't allowed to stay I probably would cruise around in my car, take drugs, mix with the wrong people, lose my sense of reality, see life through paranoid eyes at a time when I really need to be straight – I might have ended up with NO XXXX [son] and in Graylands this time. I have my child and I'm a good mother.]	SAAP Women

In what ways has the service helped you think the service may assist yo time and in the future?				
Caseworker	Client	Caseworker	Client	Program
Discussions with client re observed lack of personal boundaries (parent and child) resulted in client seeking out TAFE course 'Relationship Rescue – setting boundaries in relationships'. Child referred to DVCCS (DV Children's Counselling Service) due to her experiences of direct and indirect abuse from father and stepbrother. Anxiety management strategies discussed and provided. Support with Family Court legal issues re contact with father. Support with application for priority housing (DHW)	The refuge (crisis) service here has provided my young daughter and I safe and pleasant self-contained temporary crisis accommodation. The refuge staff continue to encourage us in practical areas and emotional too. Staff provide info on other agencies (legal, housing, health, counselling) and local community (social) activities. Each resident is provided with their own caseworker, thus providing reassuring one on one (familiar) support, this personally I have experienced as positive, kind and most helpful. My daughter is provided easy access to support via a pleasant 'child sensitive' counsellor. At present time I hope all the above support remains ongoing until our exit.	Client appears very capable and has been proactive in picking up on suggestions and referral from workers. However, client also requires strong approval/support from workers that she is 'on track'. She is in need of stable, secure accommodation and if that goal can be achieved she has a good chance of turning her life around. The impact on her and her daughter of having to move (home and school) has the potential to be damaging and long lasting if not addressed.	Should the above support/services not have been available and my daughter and I not been provided crisis accommodation etc, we might well have had to remain in the abusive/violent situation, remaining as ongoing victims, subjected to the perpetrator's behaviour with grave consequences to our physical and psychological health – a grim and uncertain future. Therein from my own perceptive, until the community sees family violence/abuse for what it is, we all lose, not just the victim, the child, the parents, the grandparents, the whole family and the perpetrator. The rippling effects of domestic violence are enormous. I also believe the law is making slow progress to better reflect these DV effects and the law tends to lag behind social issues and change.	SAAP Domestic Violence
XXXX has assisted client with medium-term accommodation in the community appropriate for her and her children. Once she moves into Homeswest housing XXXX will assist with moving her and will also provide furniture and white goods and household goods.	If I hadn't been given medium-term housing I'd have nowhere to live and of course the rent is very low which helps financially. Have also helped me get into Homeswest priority housing list. Counselling	Client would have been seriously injured. She and her children would have suffered psychological damage.	If I hadn't been given housing by the refuge, I'm sure I would have been seriously injured or killed because I would have had to stay with my husband.	SAAP Domestic Violence
Was given short-term crisis accommodation and assistance with getting long-term accommodation with Homeswest. Will assist with furniture and household goods.	Helped me to get accommodation with Homeswest, also in a lot of positive ways like being strong and independent and not relying on my family.	Would probably have been forced to stay with other family members which would have been difficult with two children.	Would have had to find somewhere to stay with relatives, if had gone back to XXXX he would have hurt me.	SAAP Domestic Violence

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?  If you (the client) hadn't received help from the service what might happened? What do you think the consequences might have bee client), your (the client's) family and those in the community had been available?		ences might have been for you (the		
Caseworker	Client	Caseworker	Client	Program
Refuge provided short-term crisis accommodation and material assistance. Stored effects temporarily when client left.	Continued help with shelter, material resources, counselling and assistance in getting a private rental.	Strong possibility client would have been seriously injured.	Would have stayed in an abusive relationship; possibility I would have committed suicide.	SAAP Domestic Violence
XXXX has provided crisis accommodation, material aid and support with government agencies and health care facilities. Will continue with these activities.	Being in the refuge means I can sleep at night and am safe. It's helped with housing through Homeswest and financially through Centrelink. Helped me with emergency relief and food. Refuge staff could help me move when the time comes	Client could have been seriously injured, possibly resulting in loss of unborn baby.	Would have got hurt in the end, would have constantly got dragged around Perth.	SAAP Domestic Violence
The refuge assisted this client with crisis accommodation for her and her XXXX children and provided initial material assistance. Our childcare facility was used extensively whilst the client attended court, DIMA, Centrelink etc. and has subsequently provided medium-term housing until the client locates a suitable private rental.	Provided crisis accommodation, court action (VRO) [Violence Restraining Order], health care coordination, made telephone calls on my behalf; have helped with immigration, information and practical assistance	Strong likelihood of both client and her children being seriously injured, possibility of clinical depression resulting. This would have resulted in enormous cost to the community in terms of medical assistance and psychological help.	The DV and abuse would have escalated, psychologically I would have had huge problems, may have suffered from depression.	SAAP Domestic Violence
XXXX provided short-term crisis accommodation and material assistance to client and child.	The refuge has helped me find housing and is helping with furniture. Has provided clothing. Has helped to talk to workers.	Client had already been seriously injured by perpetrator – more serious injuries might have resulted.	Would be out on the streets and wouldn't have a house or furniture. Would have ended up hurt.	SAAP Domestic Violence
XXXX assisted client with short-term crisis accommodation and assistance to gain Homeswest housing and financial aid. Liaison with school for son. Financial and material aid. Counselling and transport.	I have a stable home now and because it's cheaper than private rental I can save some money for when we move into the Homeswest house. Gave me emergency food and clothing. Have had counselling. Will support in future with counselling. Will help move into new home with furniture removal. Will be able to do a	Both client and son would have been seriously injured.	Probably would have had no home and got very, very hurt from my exboyfriend. I wouldn't have got a house from Homeswest	SAAP Domestic Violence

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
	parenting course.			
Provided safe accommodation which she wouldn't have otherwise had. Basic material, emotional and psychological support. Crisis counselling. Service helps to provide assistance in obtaining medium to long-term accommodation for self and pets. Relationship counselling regarding estranged partner and daughter.	The service has provided accommodation without which I would have been homeless. They have supported me emotionally and helped me through depressed moments and helped make necessary financial and relocation arrangements. They organised police support to regain my possessions and liaised with various departments on my behalf, especially when I was feeling overwhelmed.	Homeless, physical harm, psychological/emotional damage.	I would have become depressed which would have made it even more difficult to rectify my situation. I may have resorted to hospitalisation, especially if my alcohol problem increased.	SAAP Domestic Violence
The service offered a safe place to stay. The service can attempt to assist with seeking long-term accommodation.	Supported her. Helped her better her overall life. Not judgemental. Take her as she is. Support letter. Help her with her house issues. The workers have been there for her 100%. Support her in all avenues but at the same time respect her personal space.	Returned to violent partner. Further ongoing domestic violence which would be detrimental to her mental and physical wellbeing.	Probably a wreck. Been in a controlling situation still. Wouldn't have gotten back self-esteem, independence. Would have still had a terrible outlook on life. Very, very helpful [hopeful] about the future. Has dreams and aspirations.	SAAP Domestic Violence
Provided crisis accommodation, could have become homeless as client left previous accommodation due to violence. Primary action goal was to assist client to achieve independent or public housing accommodation options as client declines a need for assistance/support on violence issues as has accessed own counselling options. Client contravened 'dry house' policy – not to drink alcohol or bring onto premises – and was asked to leave,		Client would have become homeless therefore vulnerable to further experiences of violence/abuse/exploitation and/or returning to previous accommodation option where violence was perpetrated. As client was asked to leave she may still be vulnerable to homelessness, returning to previous unsafe accommodation option or other vulnerabilities associated to/with own physical/anxiety issues, alcohol use and/or homelessness		SAAP Domestic Violence

In what ways has the service helpe you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?			
Caseworker	Client	Caseworker	Client	Program	
referred to another short-term crisis accommodation					
Service has provided crisis accommodation thus alleviating homelessness as an issue. Has referred client to other services for support and assistance. Provided some material assistance in emergency financial relief. Support also provided re alcohol issues.		Without emergency accommodation the client may quite likely have returned to a violent situation with her partner as the previous accommodation option was with partner. If remaining in a violent relationship, the depressive condition the client identified experiencing would likely have been exacerbated. Also likely that without some service support and if still in violent relationship, alcohol issues would have become exacerbated.		SAAP Domestic Violence	
Client received crisis accommodation. Client is receiving basic counselling/support to explore issues of DV and past sexual assault, may require referral. Client has been referred to non- government service to follow up on own self-healing strategies (reiki, kinesiology, massage). Client also receiving art therapy session at this service.		Possible homelessness due to requiring to leave another SAAP service. Also possible client may have found self in unsafe situation/accommodation without crisis accommodation needs being fulfilled. History of depression/anxiety – may have been exacerbated without having crisis accommodation fulfilled and subsequent basic counselling/support leaving DV circumstances		SAAP Domestic Violence	
Immediate crisis accommodation removed client from immediate and ongoing risk of violence. Support to identify client (and prioritise) her needs and a place/space to create action plan to meet these. Support client to create action plan to find a 'safe' future (from vulnerability to violence from 'sleeping rough')	Helped me mentally, physically and emotionally.	Sleeping rough leaves females vulnerable to violence by nature of this accommodation option. The client actually feels this service may very well have prevented her death from last episode of violence due to living arrangement. Without support, likely client would not be able to develop and action plan to develop strategies for future 'safe' life/accommodation options (free from violence).	Probably would have ended up dead.	SAAP Domestic Violence	
Support with obtaining public housing. DHW declined to list as	This service has provided me and my child a temporary home, the	Would have been denied public housing. Difficulty in accessing private rental. Learning	I escaped domestic violence and if I didn't I would have been in the	SAAP Domestic Violence	

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from happened? What do you think the conseque client), your (the client's) family and those i been available?	ences might have been for you (the	
Caseworker	Client	Caseworker	Client	Program
priority because client had left area (regional country town) where abuse occurred. Agency in process of appealing this decision. Support with parenting; client had been using physical means (smacking etc) to enforce good behaviour. Supporting client with other means of discipline. Supporting client in employment training.	refuge is assisting me with permanent accommodation and with basic financial [assistances], budgeting	more appropriate ways to deal with child's behaviour. Discipline sometimes given in anger.	situation still. Consequences: my son's schooling would have deteriorated, I would not be doing a course to better my life, for my son's future.	
Support with parenting, dealing with stress of caring for child with behavioural difficulties. Self-esteem support –has a poor self-image, particularly in her ability to parent.	The staff are very supportive and caring. There are lots of support networks too and I have also helped give back support agencies	Continued inappropriate and unhealthy ways of responding to child's needs, which if continued could lead to adolescent behaviour problems and on into adulthood.	I would have been killed or put in a correction facility	SAAP Domestic Violence
Informed her on pathways out of domestic violence. Encouraged her to set goals. Informed on services available to assist. Acknowledged her independence. Provided safety and stability. Referrals for housing, income, childcare, health service. Assistance to get VROs and support in Family Court matter.		Without financial counselling could have been without financial support. Children at risk of further abuse. Unsafe. Lose contact with children.		SAAP Domestic Violence
Within initial 48 hours of accessing service: safe/secure accommodation. Referral for DV counselling for son. Client received first counselling session.  Appointment arranged to address physical and mental health needs. Child enrolled in school and began attending. Information provided on personal safety, DV and family violence, and sexual assault/violence resources.	The system has been great with getting me out of potential harm and finding accommodation that is safe	Client and her child were at risk of continued family violence which would have continued to put their physical and mental health in extreme jeopardy. Client may have had various complications with her current pregnancy. Client would not have been able to access the necessary medication needed to treat her mental health diagnosis. Child would have continued to be absent from school. The family would have remained homeless and unable to access basic safe, secure and adequate shelter. The above are	If I didn't receive help it could have been a lot worse for my mental/physical health, my child would have wound up with child services.	SAAP Domestic Violence

In what ways has the service helper you think the service may assist yo time and in the future?				
Caseworker	Client	Caseworker	Client	Program
		only a few of the imminent dangers faced by this family. In the long term, if it could not receive support and assistance, the outcome could/would have been catastrophic.		
Provided safe accommodation. Provided counselling. Referral and support to obtain financial entitlements. Info on housing options. Referral for legal advice.		Client was provided with respite from relationship of control and violence allowing time to reflect and re-establish control of decision making. Was able to make plans and decisions for the future and use her substantial skills in purposeful and meaningful ways		SAAP Domestic Violence
1. Emotional support 2. Children's specialist workers 3. Through contacts has secured community housing for client. 4. Assistance with the realisation that the youngest child of the family has special difficulties. 5. Emergency relief. 6. Support with special supported schooling.	Helped me with safety and a place to live, and financially, and helped me find a new house.	The family would have been long-term homeless or living with domestic and family violence.	Would have been seriously physically injured or dead.	SAAP Domestic Violence
J		Taking me to DHW, supporting me at interviews. Linking me in with other housing options. Helped me with my children – support, school. We would have been homeless out on the street or I would have gone back to XXXX to family violence. I want to go to TAFE and learn better English, achieve something for myself or get a cleaning job.	We would have been homeless out on the street	SAAP Domestic Violence
1.Safe and supported environment for herself and her children because of escaping domestic violence. 2. Emergency food vouchers and assistance to gain crisis payment. 3. Advocacy support to seek and acquire housing. 4. Emotional	They have given me temporary room till I get somewhere permeant. They have and pass on the relevant information I need. They need more access to housing especially for families and others to start a better life.	Continued exposure to physical and emotional domestic violence for the client and her three children. Long-term detrimental effect on the wellbeing of the children, particularly the small ones, as research has shown that they are greatly affected by exposure to domestic and family violence.	I would either be in DV relationship or living on the streets.	SAAP Domestic Violence

In what ways has the service helpe you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
support for client and support for children in the children's program.				
	Crisis care welfare		Nil	SAAP Domestic Violence
[Response client not agency] Somewhere to live and my mental health and housing issues.	It kept me off the streets and ongoing outreach support	[Response client not agency] Still in my car on streets	Still living in my car and my son could have been taken away	SAAP Domestic Violence
Financial aid and counselling. Explore new housing. Negotiate termination notice.	The service has helped myself and children in securing rental premises, and continued support throughout the ongoing months has been an encouraging and very helpful service to us. I've appreciated the support and advice this service offers and have also come to learn a great deal.	Homeless	I couldn't begin to imagine where myself and family would've ended up if not for the support, advice, encouragement and unconditional time support workers spent with us. Thank you all for believing in us and I hope this great service to our community continues to help others like myself. Thank you to all who've supported us.	Private Rental Support and Advocacy Program
Helped client to set up and maintain housing appropriate for family needs, e.g. WA NILS (No Interest Loan) for washing machine. Supported client to attend to other agency appointments and involvements. Continued to support client in the reunification of children as this affects tenancy also.	To house me and my children. Leave me stable!	Tenant would not have stable or safe/appropriate accommodation for herself and children. This would have far reaching consequences for mother and children's health, mental health. Also would have effects on all relationships and add a strain to other services and agencies that would need to be engaged with family on a long-term basis to deal with the many effects of homelessness	I may not have had anywhere to stay (in unsuitable accommodation/circumstances) with a newborn and two other children.	Private Rental Support and Advocacy Program
Client was very stressed about loss of income and arrears. Emotional support, given advice on tenancy law, negotiation with property manager. Assist with finance, ER,	They will deal with my landlord and give me advice on how to proceed with issues	Breakdown in communication with property manager may have led to eviction. Difficulty having access to private rentals due to rent increase and competitiveness of market. May have led to homelessness		Private Rental Support and Advocacy Program
problem solving. Skills to say no to family. Safety awareness. Selfesteem and valuing self. Improved		Client would have ended up living on the streets with children.		Private Rental Support and Advocacy Program

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
security of housing, building feelings of connectedness to community.				
Advocate with property manager. Educate and prepare client for court appearance re tenancy. Arrange for ER and financial counselling.	Helping me – getting rental arrears sorted and finances back on track. Tell me the right avenues and services to get support.	Would have been evicted – difficulty entering new tenancy due to bad history/expensive and competitive market. Mother and child displaced from community and possibly homeless.	I would be on the street without the service.	Private Rental Support and Advocacy Program
Negotiated with property manager to stop eviction process. Financial counselling and support to address underlying issues.	If I get into financial difficulties again with lack of employment and have problems paying rent etc., this service might be able to mediate between those entities for me to set up payment plans etc. to stop or defer any permanent action until I can get back on track. Also provide contacts for other assistance.	Loss of housing, possible entry on tenant database	Without this service, I would have lost my lease and become homeless. I would have had to find finance to store my furniture etc which would have resulted in making life more difficult for me. The ability to find employment would also been affected without a permanent address, putting me in further financial difficulties.	Private Rental Support and Advocacy Program
Organised rental arrears repayment so that tenant would not go on database. Ended one tenancy to begin new more suitable housing for family. Info and support to address financial issues.	It has been very helpful. They helped me to get out of debt and helped us find a new place so we didn't get blackmarked in the real estate industry	Database entry impacting on future private rental access. Rental arrears in new property due to old recurring debts.		Private Rental Support and Advocacy Program
Challenging minimisation of domestic violence. Stabilising tenancy. Establishing links with key services. Improving care for child.	Rents for repayments. Help with bills. Talk with DCD.	Tenancy – eviction. Child – placed in care	Stopped eviction	Private Rental Support and Advocacy Program
Advocate/negotiate with property manager. Assisted real estate to set up Centrepay to make paying rent easier for client. Assisted client to get financial aid. Educated client about eviction process/tenancy act. Assisted with financial management.	We got money off XXXX.  Negotiating with real estate and asking if they can help me in any other ways.	Client would have been evicted with a poor tenancy history. May have not been able to access another tenancy due to the history/lack of funds/competitive rental market. May have caused overcrowding/pressure on family if she moved in.	If I did not get any help I would have been evicted.	Private Rental Support and Advocacy Program
Has motivated client to take	The service has helped me by	Client may not have repaid arrears which	If I did not have this I may have been	Private Rental Support

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
responsibility and arrange for repayments in regards to arrears.	giving someone to listen and talk to and support.	were fairly substantial, and as a single mother of three may have faced terrible obstacles in finding new accommodation should she have faced eviction.	evicted from my rental housing.	and Advocacy Program
Client has issues with real estate and existing debts plus arrears, plus health problems. As a single mother she needed support and assistance to link in with appropriate agencies and manage money more efficiently.		Client faced possible eviction and was very emotional and unsure of options. She now has inter-agency support and is aware of who can help, plus she is independently responsible for paying rent on time. Without our intervention she may have been a lot worse off and placed huge stress on other services not equipped to cope with such a crisis.		Private Rental Support and Advocacy Program
ER for utilities. Negotiate with real estate for payment plan. Advice on dealing with alcohol use.		Eviction. Disconnection of utilities.		Private Rental Support and Advocacy Program
Negotiated for ER to connect power, and payment plan with Synergy. ER for food.		Client would not have had power to house for her and her children for some considerable time.		Private Rental Support and Advocacy Program
ER for utilities and negotiated power reconnection with Synergy. Negotiated payment plan with real estate to prevent court action over arrears. Referred client to counselling. ER for food.	I have paid my arrears on my rent and bought the rent up to date. I have paid the arrears on my electricity and am currently paying off my new bill. I have got a job. The service will make sure that I continue doing what I am doing and stay on top of it.	Eviction. Social Isolation. Loss of contact with children.	Had I not had the assistance I would not have been able to cope financially or emotionally. I would have been on the street with nowhere to live. I would not have had any food or the confidence to find a job	Private Rental Support and Advocacy Program
Negotiations with landlord for payment plan to clear arrears and prevent eviction going ahead. Assisting client with Centrepay for rent. Obtaining ER to help clear arrears. Working on budget. Referral to financial counselling	The service has been a huge help in negotiating with my landlord and by paying some arrears to allay the situation. It helped a lot to have someone step into the breach.	Eviction within a matter of weeks. Client would lose custody/care of children if eviction made her homeless – they would go to care of father.	I wouldn't have been able to get another rental home, my kids would have to go into their father's care, my life would be a total disaster. My neighbours would miss me and the kids, especially the elderly woman and single mum.	Private Rental Support and Advocacy Program

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
Maintain connection of utility and acquire ER towards bills for same. Negotiated with Telstra re payment plan. Referral to parenting program for home visits. Referral to counselling program for children. ER for food. Assistance with obtaining immediate Centrelink benefit.		Rent arrears and possible NTV. Ongoing problems with children after relationship break-up would have worsened without appropriate referrals and support.		Private Rental Support and Advocacy Program
	XXXX helped me get back on Centrelink payments. She also helped me deal emotionally with my sons being locked up in detention		I probably would have committed suicide	Private Rental Support and Advocacy Program
Clients had problems in the first year in Australia due to lack of knowledge of culture and no English language skills. Lack of knowledge re use of phone and cost, also lack of knowledge on the use of transport etc. Clients received information relevant to their needs some initial help with finances etc and they are now settled and quite happy.		Ongoing confusion, large bills causing anxiety and depression on top of trauma they experienced before coming to Australia. Family would not have settled as quickly or as positively.		Private Rental Support and Advocacy Program
The client's problems occur because he is a refugee with no English language or knowledge of laws re private rental – transport issues, about direct debit, banking etc – house maintenance and so on. As client learns, so his problems lessen, but since there is a lot of discrimination against African and Middle Eastern families because of the above problems their lives do not get easier.		The family would have been homeless and would have suffered much more. Since there are six children and the wife was pregnant, the children would have had many problems.		Private Rental Support and Advocacy Program

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
This client was being discriminated by landlord and real estate agents. She was asked to pay for new curtains and other cleaning issues that had been there before she moved in. I supported client in her application to the Magistrates Court. This was a very empowering experience for her because she felt that she was being heard and that she was treated fairly.		Client would not have gone to court, she would have felt totally disempowered and would have thought that she had no rights in this Australian culture. Client is now working part-time, studying and managing very successfully.		Private Rental Support and Advocacy Program
More aware of other agencies available and importance of dealing with debt and immediate and past problems. Client needs encouraging and prompting.	The service has helped restore my confidence and given back goals and a sense of hope. This means heaps.		I believe I would have given up	Private Rental Support and Advocacy Program
Client has addressed problems instead of ignoring because of pressure or inability to cope. Has become aware of ER agencies and their assistance programmes. Is completely aware of urgency in paying rent on time and the problems that ensue if not.	In future I will check things out thoroughly, eg. bank statements and finances, and not fall into arrears without prior knowledge	Client had multiple problems and was struggling to address each one. She had a court day for rent arrears and was scared of consequences. Client has managed nearly all of identified issues in a short period of time and will overcome situation successfully	Would have really been depressed and probably had tenancy revoked	Private Rental Support and Advocacy Program
Client informed of rights in regards to private rental tenancy. Is more assured and confident		Client benefited hugely from being linked in to our services. Was quite isolated. Is on a tight budget so needed help with food if she was going to continue paying rent. Also needed transport assistance because of new born.		Private Rental Support and Advocacy Program
This is their first time in Australia from Sudan and they are presently learning English. He is very motivated and responsible but requires assistance in the way of advice and advocacy and		Because their income does not really meet their expenditure needs, there may have been accumulated debts, disconnection of utilities and/or lack of basic requirements. They were also very interested in their rights as tenants to prevent their inability to		Private Rental Support and Advocacy Program

In what ways has the service helped you (the client) already? How do you think the service may assist you (the client) during the present time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
introduction to available services and resources. This will enable the family to be more resourceful in future.		understand from being exploited.		
Client was in significant debt. Linked to financial advice and supported through the bankruptcy process to alleviate stress from hassle from creditors. Link to mental health service. Address social anxiety and support re stress of going to landlord to pay rent. Assist with emergency relief. Educate re community services	The service is helping me learn more about spending money. How to have priorities with rent over other bills. Also to pay the other bills and still have enough for food etc. I did not know what help was available before XXXX started helping me. It has been a huge relief knowing that I am not alone.	Level of debt would have increased significantly. Would have had to leave home – stress re children/family being disconnected from community where their school/family are. Mental health issues would have remained largely unaddressed – consequences may be serious	If I had not had the help from XXXX I feel I would have had to leave the rental home I am now in. My three children and I would have found it very hard to find another house. This is in a very convenient position which we like so much.	Private Rental Support and Advocacy Program
Stabilised tenancy. Debt management. Financial assistance. Links with support services	Fix tenancy issues	Termination of tenancy	Eviction	Private Rental Support and Advocacy Program
Able to negotiate with property manager, address financial issues and take to counselling. Able to support to end tenancy and advocate for Homeswest housing.	I have been given great support by XXXX. When I was not confident enough to take control I had assistance that allowed me to cope with less stress. Support if in need.	May have had period of homelessness – increased stress on other family members to accommodate family.	I may not be housed with Homeswest and would've left my tenancy on bad terms. Well, worse than they are already. Large financial worries as well.	Private Rental Support and Advocacy Program
Obtained PRAAL (Private Rental Aboriginal Assistance Program) loan. Financial issues addressed (counselling, budget, ER, advocacy). Support mum and daughter to enrol in education. Assisted to get furniture/household goods. Liaised with property manager to resolve issues and stabilise tenancy.	Your service has helped out a great deal. They've helped me out good with my housing, and with my finances and life itself	Client would have gone back to temporary accommodation or no shelter – daughter not engaged in school. No stability to address life issues.	Probably would've been out on the street and finding it very hard to live	Private Rental Support and Advocacy Program
Built living skills. Financial aid, support and education. Liaise with property manager. Linked to mental health service. Counselling re past sexual/physical abuse.		Family reunited after being state wards – limited skills to access new housing therefore may have been homeless – XX year old may have gone into care again, XX year old probably return to drugs/crime.		Private Rental Support and Advocacy Program

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from happened? What do you think the conseque client), your (the client's) family and those i been available?	ences might have been for you (the	
Caseworker	Client	Caseworker	Client	Program
Assist/address social anxiety/coping. Support re son's drug use				
Client has rent arrears and multiple debts, plus was not managing emotional health. Has now almost repaid arrears, has plans in place for debts and is coping very well emotionally. Client was also having persistent problems with child support and we are awaiting an appointment to discuss with Legal Aid.	My support and friendship which I have received from XXXX has meant a great deal to me. I have gained strength, emotionally and physically. I have been led in the right direction in regards to other support services as well as having the ongoing support from XXXX. My life has changed dramatically over the last few months	Client and three children may have faced eviction and further debts, resulting in a possible breakdown.		Private Rental Support and Advocacy Program
Client informed of rights in regards to private rental tenancy. Is more confident and motivated.		Client benefited hugely from being linked into our service and ER agencies. Has also been referred to a community group which is very rewarding. Client was quite isolated and not managing emotionally and financially. Is on a very tight budget of ~ \$50 p/w		Private Rental Support and Advocacy Program
The service has highlighted to the client the urgency of paying rent and staying on top of debts and managing money. The consequences of not dealing with these issues result in bad history and multiple debts that just prove hazardous in future progress.	Without this service, my kids and I would be on the street, our animals would have gone and our [word 'our' is circled] outlook would've been very [word 'very' is underlined] different to how it is now. We now have housing, our pets will be back with us soon and our future is a lot less bleak and more full of positive action.	Without our support the client would have been literally homeless, possibly lost custody of her children and not been encouraged to accept the responsibility of her debts. Unfortunately there was no other service/s that could have assisted or willingly become involved and I cannot imagine what may have happened to this family without our intervention.	I would have had lost my 2 beautiful kids & be on the street with no hope, no babies & no pets. HELL to me. These services are imperative to the support of people in my situation.	Private Rental Support and Advocacy Program
Skill building around tenancy issues and ability to maintain tenancy.  Monitoring mental health. Sexual abuse support.	Great support and very helpful advice.	May not have maintained tenancy successfully. Mental health may have deteriorated due to isolation, self-harm risks.	My folks or someone else would have had to take me in.	SHAP
Service has assisted client to secure, set up and maintain new tenancy for past 2 months. Assistance given included plan for	By having this house I have really improved in my life a lot	Client would not have received a house without support and would have had to continue moving around family members. In clients' own words, 'I was heading for the	I was going on to the street	SHAP

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
family/friends anti-social behaviour so client is able to manage this in the present and long term.		streets'. No-one should have to live on the streets! This situation would put strain not only on the client but on their family, community and so on. This strain erodes the very fabric or building blocks of society – people and their relationships, and basic needs such as shelter and belonging.		
Service has helped client to maintain new tenancy by provision of information re responsibilities. Helped client attend appointments necessary for DCD reunification process.	I can't deal with my landlord because she makes me too upset so am getting help with XXXX to do this and help me with my financial situation.	Client may have lost new house by now. This would mean that visits with children could not take place and no home for children to return to following reunification process.	I would be homeless and have no chance of getting my children back from DCD	SHAP
Referral to a budgeting program.  Monitoring tenancy. Attempted to obtain Centrelink benefit.		Homeless. Even more financial difficulties.	Had the support I got from XXXX not been available myself and 3 children would have been living on the street.	SHAP
The service has helped the client to set up home and make connections into the local community. The service has linked the client into financial counselling which has enabled the client to address long-term debts and money issues.	The assistance that I get is great, but prior to getting the assistance I had no help to get a house. I was homeless with 2 children and one on the way. I had to rely on myself only. I got no help from any other organisations.	The client may have fallen behind in rental/utilities payments and been issued with a breach for this. This would lead on to homelessness again and the same cycle of trying to find accommodation. Friends and family members would have probably assisted client with temporary accommodation, which may have led to overcrowding and relationship issues.	I think if I had found this assistance earlier, yes, it would have made a difference.	SHAP
Found housing. Links to mental health, financial services. Info and advice. 'Company' to reduce isolation.	Assisting in obtaining housing. Follow-up support.	Sill living in car on streets. Possible severe relapse to substance misuse and impacts on mental and physical health.	Probably still sleeping in car.	SHAP
Client has remained in private rental despite not paying rent and utilities. Service has advocated for client and referred client to appropriate sources for ER assistance and advocated to landlord. Service assisting client to end tenancy		Client tenancy would have been terminated and client would find it extremely difficult to find another private rental due to previous issues with past tenancies. If the support was not available client and children would have to live with extended family members again and not have the opportunity for enjoying		SHAP

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
without debts and to move to more suitable accommodation. Also assisting client to find work.		their own space/home. This may lead to self- harming, drug taking behaviours from client and grown children		
Housing. Debt management. Setting up physical environment. Information and advice.	Housing. Organising our lives. Financial counselling	No housing, still living in car or with family.	Would still be living in car or with relatives.	SHAP
The service has assisted the client to become independent – something the client has wanted to be for years and is very proud of. The service will continue to encourage and support this independence	Please do not stop the service as helping with being able to cope with living on my own and budgeting (never able to do this before). Also realised that I am able to live on my own	The client has informed me (and I agree) that mental health issues would have escalated and self-harming and hospital visits would have become the norm. This would mean that the clients' son would have had to be placed in foster care. Obviously the community, services etc. would have been affected by this, but my concern would be for the client and her son.	On the streets. Lost my son. In hospital or dead. Spoken to caseworker.	SHAP
Client has maintained tenancy successfully and is committed to addressing previous housing debts. Will now experience good tenancy history. Is closer to having children returned to her care.	Wouldn't be in current accommodation. Looking at other longer-term housing options.	May have still been in crisis accommodation. Reunification with children would not be happening. May have returned to substance misuse due to disappointment.	Would be homeless and would not be in regular contact with children.	SHAP
	Saved me from being homeless. Helping me to raise my standards to an acceptable level.		Eviction. Homeless. Separated from spouse	SHAP
Psychological support – education, information, motivation. Positive reinforcement of client's existing strengths and working together to find solutions to limitations and barriers. Facilitate a coordinated, collaborative approach from other involved agencies and Homeswest. Facilitate greater understanding of tenancy by Homeswest so they can manage it more effectively.	I am very happy with XXXX in particular, because XXXX has provided me with basic skills and help and motivation to look after myself and live in a safe, healthy and happy environment.	Deterioration of standards and subsequent impact on – tenancy – esteem of client and motivation – health (mental, possibly physical) – increased contact with mental health system as tenancy stress increased. Ultimately homeless and/or hospitalisation for the client with associated emotional and financial costs to his family and the greater community. Loss of part-time worker from the work force.	I am very grateful that XXXX has helped me because my living standard has deteriorated which would result in my mental and physical state to decline and possibly lead to my eviction from Homeswest.	SHAP

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
Client has various issues affecting her life, mental illness, physical illness, domestic violence by ex- partner, property standards.	[XXXX taking notes] XXXX has helped with getting the house painted and the place repaired. Getting on well with Homeswest. Developed a plan for the house.	If support not provided DHW could have pursued eviction process.	[XXXX taking notes] Probably have been evicted.	SHAP
Maintain focus and provide positive reinforcement as client works through prescribed tasks. Provide support and information to assist planned approach to raising property standards. Consistent, persistent encouragement and appropriate referral to specialised services.	Helped me understand how to get on with making my house and life better and understanding me a little better.	Decline in standards and associated feelings of wellbeing which in turn can impact on family relations, health and capacity to meet other obligations. Breaches ultimately leading to legal action and eviction. Possible decline in parenting capacity and subsequent impact on children's health, schooling and wellbeing (may lead to intergenerational experiences of homelessness).	May have been houseless and/or living on the street.	SHAP
This service is assisting the client with advocacy and negotiation with real estate agents and government departments. Also referring on to other support services if required.	Estranged relations with the real estate	Support helps the client to stabilise life and integrate into society successfully, giving quality of life	They might have been further involved with maintenance issues and more notices sent out.	SHAP
The client has intellectual concerns and is unable to comprehend simple daily/social skills and use them in everyday life. SHAP has brought different agencies together to support and maintain independence and home. The client enjoys/looks forward to different agencies as she is lonely. Due to lack of resources in the area, no agency offers support to someone of the client's age and intellectual function.	Budget and help setting up direct debits from pension for utility bills. XXXX service and support in maintaining this service. Safety/issues (slippy floors in bathroom and laundry) – support in using O/T GP referral for resolving floor issue. General maintenance and locks to property.	Breach, possibly eviction under environmental health concerns.	Rely more on other friends	SHAP
SHAP assisted the client to arrange automatic deductions to pay rent on a regular basis. The haphazard way in which this client was paying rent (\$500 one week and nothing for a	SHAP helped me with the payment of rent arrears.	This client received support in managing their finances. The consequences of receiving SHAP support is that this family now feels a lot more in control with money and with their tenancy stability. Moreover	We would have been evicted.	SHAP

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
month) meant it was increasingly difficult for her to keep track of how much and when payments were made. If SHAP had not assisted this client the consequences would surely have been eviction and homelessness		eviction was not carried out .		
Good timing that client in space to address and make changes. Helping to find employment and affordable housing.	A roof over my head. Helped me with my Centrelink payments, my drug issues and dental needs. In the future the service may give me confidence in getting my own house, finding work, family reconnection and with my budgeting.	Continuation of previous homelessness situation. Further deterioration in health and self-worth/feelings. Financial distress magnified. Frequent conversations with the law. [Illegible word] for self-harm	I would have been in a big hole. I don't know what I would have done, something stupid and might have ended up in jail. I might have done some harm to myself.	SHAP
Through accessing the service, the client has also been referred to and able to access other support services such as the Substance Program. Although the client does not express concern about their substance (alcohol) use, caseworkers do and have been putting plans in place. By accessing the service the client has more opportunity and skills in accessing private rental market and independent accommodation. Through accessing the service the client has looked at future employment/career options.	Staff are helpful, friendly and supportive	The client may have continued to engage in high risk behaviour and substance misuse. Also remain in current housing situation which is not unsafe but not ideal either. Accessing support has allowed the client to look at wider options for their future.	Still drinking all the time, getting in trouble with police.	SHAP
XXXX has become very independent and self-sufficient in terms of surviving and 'getting by' in life due to having to care for himself from a very young age. The SAAP		I think if support hadn't been provided he would still be spiralling in and out of institutional settings, back in custody etc. By linking in with the PIH SAAP service he has learnt skills that have enabled him to		SHAP

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
program (PIH) has enabled him to learn skills in independent living and skills to help in move into the private rental market and Independence without the complications and instability of previous situations. It has also enabled him to link in with other relevant services.		successfully secure private board lodgings		
Educate client about rights and responsibilities so that he can make good decisions regarding his tenancy. Psycho-social support. Drawn attention to tenancy standards. Referral to appropriate services.	XXXX has just started to get property standards insight (new lino, cleaning walls) and liaise with Homeswest to make sure everything is right.	Tenancy would have been jeopardised by deteriorating standards. Possible deterioration of health wellbeing in response. Hospitalisation or forced to move to residential-support setting. Severe impact on wellbeing as independence is undermined. Deterioration into complete dependence on social and medical services. Further withdrawal and social isolation	If XXXX hadn't come in there would have been a 'ding-dong' battle with Homeswest.	SHAP
Early stages of work at present, however, stabilising in property with support can impact on medication compliancy and therefore reduce symptoms.	Information and support for mental health and housing issues	More transient, not likely to follow treatment for mental health	Breakdown in living arrangements, decline in mental health	
Provision of crisis accommodation. Assistance obtaining extraordinary licence. Clothing and emergency relief (food, Multiriders [public transport tickets] etc.) General support.	Provided accommodation and clothes, helped with food and will be helping to get extraordinary licence and other work and life related things.	Would not have stable accommodation, increasing likelihood of re-offending and decrease in wellbeing and sense of self. Prior to imprisonment, client was in private rental and held a stable full-time job. Imprisoned due to driving offences. Client perceives his current circumstances to be worse than this time – and therefore 'somewhat worse' than before he got assistance.	Would have ended in a bad situation of staying with various people I know who aren't a very good influence and probably re-offending (driving offences)	Re-Entry Link
Accommodation, crisis – emergency assistance; Multiriders, clothing, food vouchers – employment and training – emotional support. – court	Help, being there for me, support, housing, food money, networking, day to day needs that I [otherwise] wouldn't have	Would be homeless as previous accommodation temporary and unsuitable – no stable accommodation would also increase risk of re-offending – lack of support	[None] of the above	Re-Entry Link

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
support. Future – family and relationship support, finding longterm accommodation, stable longterm employment.		in community – impact upon wellbeing and emotional state		
Accessing services. Information. Parole support. Stabilising the client. Addressing offending behaviour. Addressing drug and alcohol use. Financial. Emotional support/counselling	Parole support. Financial assistance. Access to services, counselling. Additional support/information.	Re-offending behaviour. Compound depression. Imprisonment. Lack of access to resources. Financial hardship. Anxiety/stress. Homeless. Low self-esteem compounding lack of support.	Re-offend and back in custody due to financial hardship and homelessness	Re-Entry Link
Transition into permanent housing. Parole support. Accessing information relevant to the clients needs. Financial assistance. Transport. Opportunity to focus on long-term goals.	Likely to be law abiding with support. Address forward for parole support.	Inadequate parole support. Reliant on family for support. Insecurities/stress. Relapse – re-offend. Constant struggle with day to day issues	No place to stay. Unable to be released from prison. No access to services – no support	Re-Entry Link
The service has provided the client with an address for release and opportunity to explore more long-term accommodation options. The service has assisted the client with providing addictions counselling which has been integral to moving away from offending behaviour	Provided stable accommodation – would not have been able to get parole. Facing addictions – receiving counselling. Set up time to pay for fines will help in the future with employment and long-term accommodation.	Client may not have got parole as he has few supports and options in the community. He has a long history of homelessness – so would have been able to cope to some degree – however he would have been exposed to the same triggers which have led him to prison	As above – [Provided stable accommodation – would not have been able to get parole. Facing addictions – receiving counselling. Set up time to pay for fines will help in the future with employment and long-term accommodation. no accommodation on release, there	Re-Entry Link
Client would otherwise not have had appropriate housing for release from prison – may have been deferred and remained in prison or moved into less suitable housing. Client expressed concerns over financial situation and lack of friends and family in the state to talk to – service assists with some emergency relief (though resources limited) and provides a case manager to talk to about concerns. Referrals will also	If the support was not available I would still be in jail with nowhere to live.	Would not have had access to suitable housing – likely to have remained in prison as parole would have been deferred.  Disadvantages re housing, financial situation and various supports offered tend to significantly increase the risk of re-offending or breach	I would have probably continued to live the way I was	Re-Entry Link

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
be made upon request or identification of further need.				
Service has assisted the client with gaining accommodation for release and supported him in addressing his offending behaviour. XXXX has also provided the client with drug and alcohol counselling whist in prison as well as post-release. Service will continue to assist client in finding long-term accommodation and providing holistic support, e.g. employment, financial assistance, general support	It has helped me gain parole, without it I would still be in prison. It has provided me with short-term accommodation and support with things like licence (car), drug counselling and general support.	Likely to not to have address for release. Very limited community support. Exposed to many of the triggers that led to offending – homelessness and lack of support. Would struggle with day to day living.	I would probably still be in prison, as I would not have had an address for my parole application.	Re-Entry Link
The service has provided the client with accommodation on release from prison – otherwise would not have obtained parole. Service may assist client in finding long-term accommodation – upon leaving crisis accommodation. May assist client in obtaining employment and obtaining an extraordinary licence	If it wasn't for this service I would not have an address for parole so would most likely still be in prison. Providing me with accommodation, employment support and counselling – all valuable now and in the future. May assist – when I need someone to talk to.	Would remain in prison; and have no address to go to. Client may not have had the opportunity to start building up his relationship with his son as early as he has. Client would not be able to start looking for employment as soon as he has – as he would have not stable accommodation.	Still be in prison (as above) [If it wasn't for this service I would not have an address for parole so would most likely still be in prison.]	Re-Entry Link
Parole withheld for 2 years with our withdrawal of assistance.	Accommodation. Transport. Communication	Small amount from family who do not comprehend the issues involved in his offending etc. Probably sinking into previous offences by [word illegible] back to his offenders group of who he has met a lot over a long term of protective custody	Living on street. Back in jail	Re-Entry Link
Client has been supported with DHW housing, furniture, obtaining financial assistance from private agencies for food/clothing, bus fares and phone calls transportation, liaison with different services.	XXXX [has helped me with accommodation, food etc. XXXX has helped me excessively.	Cannot predict what could have occurred, but client advised would have sought help from family. He may have returned to the same situation prior to being in prison and resume relationship with ex-girlfriend and other friends.	If XXXX hadn't helped, I would've asked for support from family	TASS

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
Supported accommodation – advocacy with DHW for more permanent tenancy. Continued feedback and encouragement fo [for/to] client faced experienced with family, girlfriend, employment, housing. Support planning, information pertaining to resources available in the community, i.e. financial/assistance/employment. Furniture, job network, continue education (uni options)	Housing/support	Client could have been living with extended family in an overcrowded situation and be dependant on his [ ] for their support. Not able to live independently. Depression and drug use could have been another issue which could have led to re-offending and lastly being returned to prison	Consequences: Homelessness	TASS
	Accommodation. Support. Referrals. It has allowed me to organise my life! It has assisted me in being able to meet parole commitments. It has taken stress and confusion out of dealing with government agencies!		I definitely would not have obtained parole. I would not have this place. I would have not been able to implement changes in my life. I may have regressed to former attitudes and behaviours! I now can be a regular member of society	TASS
With support he managed to say out of prison 11 months, the longest period of 11 years imprisonment. He has a lot of barriers which he will not/cannot work on. He may need years of contact to be able to have enough rapport with a worker to address these issues.	Helped me and gave me housing. Support. Longer housing. Work. Transport	He would have returned to prison sooner within 4-6 weeks	Prison	TASS
	The TASS program has given me opportunities of great life changes, it has enabled me to get my own place, get assistance in financial and debts, to be able to speak to the right people about custody of my boy (XX years) and being able to also apply for an extraordinary licence and get myself back into		If I wasn't accepted onto TASS I would've most definitely gone back to drugs, have bad debt, not being able to get on my own two feet as I just don't know where to turn for that sort of assistance. I would have been of no help to anyone in the community as things would have just been the same as usual. I am very grateful to be on	TASS

In what ways has the service helped you think the service may assist yo time and in the future?		If you (the client) hadn't received help from the service what might have happened? What do you think the consequences might have been for you (the client), your (the client's) family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Client	Program
	society again. To have the assistance and in the future is a major plus if you are entering the community.		this program.	
No assistance required in the immediate future. [Appears to have been answered by client]	I've stayed out of trouble	No consequences. [Appears to have been answered by client]	Robbed somebody. Sold drugs. Breached parole. Relapsed. Overdosed. Homeless	TASS
Client being sheltered by friends, but this support is no longer available so his mental wellbeing is becoming compromised and his homelessness will also be a problem as friends no longer want to look after him. Client has become 'helpless' and passive because he perceives that his situation is hopeless and the only way out is if the migrant services supply him with all his needs for housing, furniture, transport etc.		Client would become a burden due to mental health/homelessness issues		TASS

**Table H2: Three month survey comments** 

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped you (the client)? (How might the service assist the client in the immediate future?)		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
	I was treated with the utmost care and respect by staff at XXXX. They understood my circumstances and knew that I was not a hopeless case. They bent over backwards to help me. The service was far more than I expected. I did now know that this kind of help was available.			SAAP Men, Women and Couples
Accommodation. Family relationship support	Accommodation and stability of my children. Dealing with complicated issues during this time.	The client is going through a difficult Family Court battle. We have supported him intensively through this. If this occurred without our support – housing and advocacy, I am sure he would not have custody of his children.	Client was on downward spiral – violent behaviour – alcohol issues and not the best parenting skills. Without SAAP he could have been doing prison time and kids apprehended by DCD.	SAAP Family Accommoda tion Service
This client will have ongoing needs during support time – assistance given in all areas ticked will continue to be given till the end. Nothing resolved or stabilised, though improved.	They are there when we need it.	We have provided proactive and emotional support. Showed her how to clean, establishing routines, child management issues and protecting herself from others taking advantage of her. Continued to work on routines and teaching her to budget and protect her money. Defining roles in her relationship – promoting better self-esteem.	She may have moved in with family – creating strain on relationships. Children's education, health and behaviour issues might not be optimal. Definitely repeating cycles over and over again.	SAAP Family Accommoda tion Service
Accommodation and assistance with Homeswest	Helped out financially, accommodation. Information. Advocacy.	Our service has worked intensively with this client. He has little knowledge of housekeeping, budgeting, being a good communicator. We have modified	He may have gone back to drug use. He most certainly would have increased his trouble with police/Justice Dept. Relationship may have fallen apart. Community at risk of his anger.	SAAP Family Accommoda tion Service

List any areas in which needs requiring assistance under Program have been resolved or stabilised	ance service assist the client in the immediate future?)		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
		behaviour, advised on appropriate behaviour, demonstrated how to clean a house – provided food, cleaning products etc. We are currently supporting him to find work, admit gambling issues, take responsibility for fines, behaviour, being a partner and a father.		
No anti-social complaints. Rent maintained in much better order. Standards primary focus – improving. No internal damage of property. SHAP maintained and continued on strong work of SAAP involvement with family.	The service has helped our family overcome many social situations and have built our social confidence up so we can be socially AWARE of our surroundings. Also our children's wellbeing and to be better aware of organisations out there that can help with our circumstances. WE couldn't have done or come this far without them.	Continued work established by SAAP. Maintained supportive role to enable successful transition to Homeswest housing. Support and assistance in meeting housing obligations.	Family relationships/coping mechanisms deteriorate. Tenancy impacted. Legal action by Homeswest. Threats and risk to children's schooling, health and safety. Mal-adaptive coping such as drugs/alcohol may be brought back into use	SAAP Family Accommoda tion Service
At this stage the family's housing, education and life have been stabilised for the first time in seven years	XXXX has helped my family in a huge way with the support of Housing and other issues of support programs. Without their support my family would be homeless	The service has been able to provide some 'solid' ground to rest and sort out life crisis. The service has been able to provide an opportunity to have safe secure housing which has support networks in place to rebuild their life in a positive way.	The children would have remained in care and the family would still be homeless.	SAAP Family Accommoda tion Service
Family has been housed within the SAAP program and now on the Homeswest priority list, to be housed within the next 3-6 months. Family has 'stable' housing	XXXX has played a big role in my life and has changed it around for me. It is good that they have places like them.	The family is unable to access any other housing options due to long-term homelessness (seven years) Other SAAP options not available for this family. XXXX only option.	The family would not have experienced reunification. The chronic homelessness would have continued and the alleged substance use would have no doubt led to the worst case of perhaps health or at the very least brain damage. The family's community would have	SAAP Family Accommoda tion Service

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped you (the client)? (How might the service assist the client in the immediate future?)		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
situation – not all concerns are resolved, however. These may/can impact on their housing.			had to deal with another compound loss experience, and impacted on another generation of young family members.	
All tenancy obligations being met: Rent paid regularly and on time. Minimal property damage. No anti-social complaints. Improvements in children attending school or kindergarten. Homeswest debt reduction scheme in place and payments obligations met. Adult daughter and child in independent accommodation. Regular attendance at Strong Families meetings.	Helped us to be more stable	With housing and support. Debt reduction in place. Lead agency Strong Families. Coordinating education opportunities for children.	Family would have remained homeless. Possible higher incidence of offending. Overcrowding with extended family. Degenerating physical, emotional and psychological health. Children at greater risk of offending.	SAAP Family Accommoda tion Service
Financial counselling and support. SAAP accommodation	The help I have received from XXXX has given me a home for me and my children, helped me with financial issues and just helping me with everyday problems	Centrecare has provided client with financial counselling and enabled her to address her substantial debt situation. We have given client a computer and are in the process of linking her into education and training.	Client would have struggled to register for insolvency. I believe that the client would have survived but has been able to think about employment and training now that she is supported.	SAAP Family Accommoda tion Service
No anti-social disturbances. Account well maintained. Build on work achieved during SAAP involvement. Standards. Mental health and wellbeing education and	The services provided from Centrecare such as SHAP and counselling for the children have been very supportive and SHAP helps us keep up with housing standards by making appointments and keeping them	Continued work established during SAAP. Assist transition to and establishment of public housing tenancy. Inform/educate about rights/responsibilities. Improve response to poor standards.	Homelessness. Family break-up, loss of culture and identity. Deterioration in health, mental health, addictive behaviours. Continued cycle of poverty and disadvantage for XX+ children.	SAAP Family Accommoda tion Service

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
management.				
	It would be good if the service were able to keep tabs on people's drug and alcohol use a little more.			SAAP Single Men
Client needs to move on to gain more independence and responsibility. He is waiting for an exit unit to become available. Goals achieved – health is in a better state, housing opportunity improved a lot, the client is in a more stable situation which enables him to see his kids and be happier.		XXXX has helped the client get on top of issues he was/is struggling with. The client has an alcohol problem but drinks less now. The client has two young children and would like to be in a better financial and housing situation so he can have them visit every weekend. XXXX have organised a personal exit unit for the client to live in. He is waiting for one to become available.	The client would be a lot less in control of his life, possibly have pneumonia due to current chest infection, and probably would not be able to see his kids on the weekends which would be very upsetting for him.	SAAP Single Men
XXXX have given the client advice and referred him to appropriate agencies to deal with his domestic violence issues. It is now his responsibility with the help of appropriate agencies to sort out this issue. The main area XXXX has assisted the client with is providing him with safe and stable accommodation. This has been a very important step for him.	How to cope a lot more better in some situations that had problems with learning how to deal with it.	The service has helped the client to live in an environment which is safe, supporting and friendly. The client was under great amounts of stress when he came here and is finding it helpful to live in this environment. The coordinator at XXXX has put him on a schedule where his rent is automatically deducted from his pay. This has helped his financial situation.	If the client was not provided with safe and supportive accommodation here he would've had domestic disturbances with his [ex-partner] and maybe ended up in jail.	SAAP Single Men
The client is provided with medium-term accommodation here until he finds alternative	All [to] good	XXXX has assisted the client by working with him in case management by assisting him as	If the client has not received assistance he would be living in a badly run down boarding house where he was staying at before he came	SAAP Single Men

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
accommodation. XXXX is a safe, clean suitable environment for him to live in where he is provided with support. The main goal that has not been achieved is finding other accommodation as he can't live here forever. This has been a very difficult task – the client has applied for over 60 public and private units/houses and has been unsuccessful		much as possible to obtain more independent housing – public or private. Being involved in case management has also assisted him by linking up with other agencies, e.g. Job Networks. XXXX has allowed the client to live here for longer than the maximum period residents should live here, due to the persistent difficulty in finding appropriate alternative accommodation. The client does not know why his applications are being rejected.	to XXXX. The client feels that this would have made things more difficult.	
When the client first came to live at XXXX he was spending a lot of money each week on alcohol. He does not spend or drink much alcohol any more since he came to XXXX as he has decided to save money towards moving out into private accommodation and paying off debts. He has also gained full-time employment since being here and his health is better. Has [F/T] job now, not 3 months ago.	Now I know what to do when I need help or assistance.	XXXX have helped the client with mainly accommodation and support until he saves enough money to find alternative accommodation. He says XXXX is great, because even though he is doing well at the moment he knows the staff would help him out if he needed assistance in any area.	The client would have searched around for other crisis accommodation in the XXXX area.	SAAP Single Men
	The service helped me only for a short period of time but the help was worthwhile			SAAP Single Men
Areas which require	It's put a roof over my head and food in	The accommodation at XXXX has	The client thinks he would still be dealing drugs	SAAP Single

List any areas in which needs requiring assistance under Program have been resolved or stabilised	ds requiring assistance service assist the client in the immediate future?) er Program have been		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
assistance – client needs support for drug use. Areas that have been stabilised – client is in safe environment where he is not being harassed.	my belly. self-esteem.	helped the client feel more secure and safe in his environment rather than living in private accommodation. This is because XXXX have rules such as visiting hours which stop people (from outside the hostel) coming and harassing the client. Also the client feels his life is more on track at the hostel and can take time to sort out his life without any hassles or interruptions.	if he wasn't living at XXXX. He says he would also be in a lot of relationship troubles.	Men
	The service helped me heaps and broadened my mind. I knew what I needed to do and they gave me the support to do it.			SAAP Women
	The XXXX help me to get Homeswest. They supply some of the furniture like bed, mattress etc. They want to give me fridges, washing machines but I refused because I would like to buy new ones. I'm very grateful for that.			SAAP Domestic Violence
	The service helped me get the right help for my son – speech therapy. They were not helpful when it came to my strong opinions of safety regarding children. They helped me when I was feeling down. They helped me keep up with a routine			SAAP Domestic Violence
	As previously mentioned [They perceived the client as very functioning	They perceived the client as very functioning and as a result she	She would have been homeless and she would have had to go back to a previous 'bad'	SAAP Domestic

List any areas in which needs requiring assistance under Program have been resolved or stabilised		In what ways has the service helped you (the client)? (How might the service assist the client in the immediate future?)		
Caseworker	Client	Caseworker	Caseworker	Program
	and as a result she didn't get the support she felt she needed. She felt that this was unprofessional because they made assumptions about her level of need. She felt it was easier for them to put her in a category of functioning so they didn't have to get out and do their job. She felt because they labelled her as 'functioning' it made it more difficult to reach out when she needed help. She felt she had to do all the work herself and that the workers were avoiding dealing with her.	didn't get the support she felt she needed. She felt that this was unprofessional because they made assumptions about her level of need. She felt it was easier for them to put her in a category of functioning so they didn't have to get out and do their job. She felt because they labelled her as 'functioning' it made it more difficult to reach out when she needed help. She felt she had to do all the work herself and that the workers were avoiding dealing with her.	situation. She was able to break habits and not return. She felt that the basic needs of shelter and food gave her time to rest and break the cycle. She did receive some support from workers that she felt it was important to acknowledge.	Violence
	They have provided me with rental accommodation until Homeswest accommodation has been found. Provided course for me to undertake if I wanted to! Provided me with a counsellor	Provided safe accommodation and time to consider options. Referred for financial counselling, legal advice and transition accommodation. Client's ability to access independent accommodation is impeded by critical financial situation which led to bankruptcy. Continuing issues of inadequate income from Centrelink requiring intensive support. Client very engaged and evolved in process.	Could have lost residency of children.	SAAP Domestic Violence
	The main source of help was getting Homeswest house. Also, sorting out bills before I moved in. General XXXX support (after leaving service) such as phone calls, clothes for baby.			SAAP Domestic Violence

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
Has recently extended the lease for 12 months on property she moved to on exiting SAAP service. Employment stabilised		The move into SAAP service allowed client to claim back her independence and allowed her time to reassess options – to distance herself from violent controlled relationship. She has been able to put in place strategies to manage debt. Has established stability for her children and put in place ground rules for access visits to father (no drug use).		SAAP Domestic Violence
	They have helped me work out my finances, helped me with my son who has a learning disorder	Client has become more empowered due to continued contact with service. Reduction in rent arrears. Has linked children in to service and appropriate programs. Client is moving to appropriate rental for self with support.		Private Rental Support and Advocacy Program
Negotiation and advocacy with real estate office, advice and/or referral for ER assistance. Referral to financial counselling	XXXX has helped me to bring my rental arrears and Western Power arrears up to date. They have provided assistance to ensure that I continue to pay the services on a regular basis. They visit me on a regular basis to see how I am going and to make sure that I make the necessary changes to improve my life.	Maintain tenancy. Assisted with financial counselling. Monitor client for a period while he is finalising drug withdrawal program and ensure he is supported in employment training. Provided he maintains job he should have no problems with rent and other tenancy bills. Needs ongoing assistance and encouragement to access some services.	Client would have been evicted without XXXX support. At time of referral he was depressed after relationship break-up and was misusing over the counter medication (pain stop) and on methadone program. Being evicted would have meant the possible loss of contact with children and possible increase in depression and/or increased drug use.	Private Rental Support and Advocacy Program
Extension of tenancy at end of lease – owner had		Negotiate with landlord to have lease extended. Linking to ER	Without lease extension, family in danger of being homeless as they would face extreme	Private Rental

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
threatened not to extend. Power reconnected. Assistance in paying outstanding dental bill.		services.	difficulty in obtaining suitable private rental accommodation due to their having six children. Without assistance, the family faced a protracted period without power at the start of tenancy.	Support and Advocacy Program
Negotiation and advocacy with real estate agent for plan to clear rent arrears. Source ER to assist with rent and utility debt, assistance with budgeting				Private Rental Support and Advocacy Program
Client has been assisted into priority housing with Homeswest. Support and advice has been made available until he settled. Client was encouraged to start English classes again. Now only occasional support and some counselling is being provided		Client was very depressed and passive to the point where he would not even catch a bus. Client was offered priority Homeswest accommodation but was too anxious to accept it,. He was not attending his free English classes (DIMA provided). Client is now quite cheerful, willing to try and speak English without an interpreter. He is completing his classes. He goes to see his children regularly. He has made friends with neighbours. He travels everywhere by bus.	Client was in grave danger because of his depression and general inability to move on after his marriage broke down. He was living with different friends but they were getting tired of him and his attitude. Client was in danger of becoming chronically homeless and depressed he was not seeing his children – XX children, XX in primary schools. Although he refuses to move back with his wife he does help by taking his children after school and weekend sport.	Private Rental Support and Advocacy Program
Clients are learning English, they have been skilled in tenancy issues, will do well.		Clients needed intensive support while they learnt some English and became skilled and knowledgeable about tenancy issues.	Clients have been able to settle well and are quite happy at present. Their house is old and has some problems with dampness, but no other problems.	Private Rental Support and Advocacy Program
This client does not seem to		Client was helped and encouraged	Client is young XXXX [illegible word] woman	Private

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped you (the client)? (How might the service assist the client in the immediate future?)		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
have any problems pertaining to their tenancy. Client is working and studying and quite happy with her life at present.		to take her case to court as she believed that she was discriminated against by her landlord and the real estate agent. Client was very happy to have gone through the process and feels empowered and in control, she will never allow anyone to push her around in this way again.	who is working hard to fit into Aust 'society', she is studying, working and bringing up a child. Her experience with the landlord and the real estate agent could have made her into a cynical and alienated person with no trust in the social and judiciary process of Aust 'society'.	Rental Support and Advocacy Program
Rental arrears repaid. Property damage negotiation. Support with restraining orders. Support to link with legal services for Centrelink debt. Support to financial assistance and counselling.		Links with services to address persistent financial concerns. Liaison with DCD for ongoing child concerns. Tenancy plans for risk to stable housing.	Child apprehended. Loss of housing. Bankruptcy.	Private Rental Support and Advocacy Program
Rental arrears, property standards, moving to new property	Stabilised the new tenancy, property standards, build relationship with XXXX	Finalising old tenancy. Settling into new tenancy. Links with support services in new area. Relationship building with property manager.	On tenant database for previous property so would not have gotten new property	Private Rental Support and Advocacy Program
	Rental arrears. Property damage. Mental health. Licensing. Drinking issues. Court concerns.	Stabilised tenancy – property standards, damage and rental arrears. Links to mental/physical health support services to reduce and address family violence incidents.	Loss of home. Increased incidence of family violence.	Private Rental Support and Advocacy Program
Maintenance issues involving real estate have been rectified and issues resolved.	Negotiation with real estate	The service acts as a mediation point for this client to assist when needed with real estate	The client feels that the issues may not have been resolved.	SHAP

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
		maintenance issues		
Rent arrears stabilised through automatic deductions of Centrelink payment, subsidy for adjustments for correct rent and encouragement		SHAP helped this family with financial budgeting, Centrelink direct debit forms and maintaining rent arrangements. Encouragement and moral support continue and help keep things on track. If this family has not received SHAP support, likelihood of eviction was imminent.	As before – eviction was halted through SHAP support. This family would have faced homelessness – uprooting the children from school and friends and disrupting normal family life. Severe disadvantage would have followed affecting everyone.	SHAP
Client has stabilised in terms of their employment and education. They have enrolled in a TAFE course and are working part-time. Accommodation stability is still an issue, though.	Character reference for court appearance. Arranged substance counselling. Housing help.	Service has linked client with counselling services such as the Substance program for alcohol counselling. Worker has supported and advocated for client with court/legal issues. Linked client with JPET for job, education assistance. Assisting to secure own private rental. Ongoing emotional support.	Binge drinking and increased involvement with police would escalate. Increased high risk behaviour associated with drinking which includes aggressive behaviour, criminal activity and poor health. Family breakdown would become more strained as would relationship with friends. Client would be homeless due to strained relationships with support networks.	SAAP
Homelessness/crisis in regards to the client's accommodation has been resolved by mediation and reconciliation with parents, enabling client to return to their care. Employment assistance resulted in client gaining full-time employment.	Helping me get a house to live in. helped with me getting in contact with my parents again. Helped me to get a job. Paid for me to stay in emergency accommodation.	Linked with JPET to find employment. Supported client to reengage with his family and rebuild relationships. Provided funds to secure emergency accommodation when homeless. Also helping to secure private rental.	Would still be homeless or in transient accommodation with no support or links with his family. Client would be unemployed and possibly having increased engagement with legal system.	SAAP
Ongoing Homecare established. DHW naintenance and efurbishment. Referral to	[Transcribed XXXX] XXXX has started to open up options for me in terms of my housing situation	The service has negotiated with Homeswest for improvements to the property. Arranged financial assistance and liaised with	Standards would have continued to deteriorate, impacting on the client's security of tenure, safety in the home and debt levels. A large debt may have been incurred without the client	SHAP

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped yo service assist the client in the immedia		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
volunteer heavy-cleaning agency.		telephone service provider to maintain client's communications. The service has facilitated greater communication and understanding between the client and their housing provider.	having capacity to contest, leading to greater financial stress. Client may have faced legal action if unable to pay for standards to be addressed, leading to homelessness or at least supported accommodation. Loss of independence likely to degrade client's health (physical and mental)	
Property standards have been an issue. XXXX is currently working with tenant to make the situation better by enforcing a work plan and conducting 3 weekly reviews to monitor progress. Client is to focus on 2/3 areas which she needs to clean (at her own pace). Once doing so we/she then focuses on 2/3 more areas, so on and so on till the standards are at a level DHW are happy with.	[Transcribed by XXXX] Helped me with getting up to scratch with the house. Mainly suggestions as to how improve the house and in terms of support for my children with Strong Families and Homeswest.	Visiting weekly and cheering on/monitoring progress with housing issues. As well as child management issues. Attends Strong Families meetings and inputs where possible in discussions. Referral made to Solid program. Discussions held regularly with client regarding her needs.	Client could have been evicted from property if she didn't engage or make changes to property conditions. Son's aggressive behaviour may have worsened if not referred to Solid. Role model required (male).	SHAP
Referral to Homecare for assistance in maintaining routine. Client has had two successful reviews and is meeting obligations to housing provider – property standards are improved	Centrecare has been extremely helpful with my housing arrangements and XXXX generally helps me with problems relating to my illness and life in general.	The service has provided support and encouragement, assisting client to plan and execute tasks in order to achieve tenancy goals. Empowering client through information and meaningful rapport. Establish ongoing in-home support with Homecare to maintain psycho-social support and motivation.	Client would not have developed skills and strategies to maintain property, leading to breaches and legal action. Without advocacy or capacity to contest or appeal, client would likely go to eviction. Eviction (or stress of impending eviction) could impact severely on mental health. Outcomes could be homelessness or hospitalisation.	SHAP
Arrangements have been made with Homeswest to	Improve lifestyle. Increase property	Service has been able to assist client by breaking down the		SHAP

List any areas in which needs requiring assistance under Program have been resolved or stabilised	service assist the client in the immediate future?)  service wha do you think been for the		e future?)  service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been	
Caseworker	Client	Caseworker	Caseworker	Program
reduce the rental arrears	standards	problems into smaller issues and dealing with these. Service has assisted client by helping them to develop home maker skills.		
	Bloody Great eh!	Stabilise new tenancy. Links with mental health services. Links with community services. Emotional and social support.	Living on streets. Self-harm continues or escalated. Suicide.	SHAP
Client regressing due to stress/anxieties of securing stable accommodation still unresolved. Motivation declining. Tired of transient lifestyle. Increase in selfmedication (drug misuse)	Helped me to get access to available agencies when needed, e.g. XXXX	Crisis accommodation – extending lease due to lack of availability in private sector. Referred to other relevant services. Assistance with management of outstanding debts. Securing identification. Addressing health and substance use issues.	Risks of homelessness – therefore exposed to higher level of risk, impacting mental health issues-level of drug uses/dependence – coming into conflict with law enforcement bodies.	Re-Entry Link
Lease extended as client unable to secure alternative accommodation (2 weeks only).	Well first it's accommodated me when needed food support and counselling.	Advocating and continuing assistance in an effort to secure permanent/stable accommodation	Client would have had to rely on family for support – Parents elderly and lack room, straining relationships – client wanting to be self-sufficient/independent	Re-Entry Link
Employment and TAFE course set up and attended since the commencement of support. Currently resolved issues surrounding fines – set up time to pay. All other issues are ongoing – accommodation, counselling for drug use.	Mainly accommodation, finding accommodation	Service has helped client identify issues/needs for living in community. General support with parole. Drug counselling provided though XXXX. Service has extended client's crisis accommodation. Assist in the future with finding long-term accommodation and support with drug issue.	Client would have no supports in community. Increase triggers to re-offending. Even greater increase in drug use. Homelessness – consequently breaching parole as no fixed address and no other options.	Re-Entry Link
Temporary accommodation. advocacy and referral to DHW Phone service/computers.	Obtained emergency housing for me	As unacceptable to community in general due to offence and now his disability client was counselled,		Re-Entry Link

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped y service assist the client in the immedi		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been for the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
Access and referrals to initial food, clothing etc. an rebase tapering dependency off steadily. Counselling new types of life skills to match his current health conditions. Spoke to his parole and XXXX officers		placed in accommodation then permanent accommodation, furniture supplied, financial assist/need have been identified in advance to client and he is as ready.		
General support. Client has found own accommodation and employment.	Provided information and support	Service has assisted the client with general information and support with everyday living. Directed client in right direction so he could find own accommodation.	Wouldn't have felt supported or known where to get information. Would be frustrated and experience further feelings of isolation. If he wasn't able to find stable accommodation, wouldn't feel comfortable working, highly stressed, impoverished living arrangement	Re-Entry Link
	This service from TASS program and XXXX has been a life saver for me	Supported accommodation. Referrals for financial assistance. Advocacy, fines enforcement, Repcol. Positive feedback ongoing, encouraging client to do well in all aspects of his life. Family, work, relationships, tenancy, own health. Finding alternative accommodation is required prior to end date on TASS program. Referrals to private agencies for furniture assistance.	Client may have been living in an overcrowding situation with family, may have resumed relationship with ex-partner and friends (old associates) meaning trouble which could see client end up back on drugs/drunk and at risk of offending and being sent back to prison.	TASS

Table H3: Exit survey comments

List any areas in which needs requiring assistance under Program have been resolved or stabilised			If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
Client was very depressed and suicidal when he came to XXXX. He is living in an exit house now and feels a lot happier, more in control of his life and proud of how far he has come.	Finding accommodation, getting assistance if required	Living in the Independent Living Program has helped the client feel more in control of his life. He has stable accommodation that makes him feel happier which in result has given him more confidence to control his anxiety and stress levels. The client has also obtained full-time employment and feels much happier.	The client was sick of living in crisis accommodation for so long until he was given the opportunity to live under the Independent Living Program. If he was not given the opportunity it would've made it harder to achieve the goals he had set for himself. He would not have been satisfied with his life as he was not able to gain an Independent lifestyle (in a unit)	SAAP Single Men
	All I can say is it has been invaluable to have these services available.	When the client became homeless there was no service available to assist with relocation and a considerable lack of options which contributed negatively to the client's wellbeing which then affected her two children. XXXX provided emotional, psychological, physical and practical support and invested a bit of time and effort to provide this family with the care they need.	The client believes she would have remained homeless and as a result lost custody of her kids. She may have fallen back into severe depression and returned to substance abuse. This would have created a heavier burden on society and long-lasting damage to the family unit.	Private Rental Support and Advocacy Program
		The client has expressed many times her sincere gratitude for increased information around surrounding services and for being linked in to other agencies that have led to new activities and new support frameworks. The client now has access to local agencies that can assist with medical, emotional and social needs, resulting in greater confidence.	The client may have not resolved initial problems with real estate and may have been forced to move from a property she has lived in for 15 years. It was an emotionally turbulent time for the client, and our support enabled her to tackle each situation with extra knowledge and a greater sense of understanding of her rights and responsibilities. Client refused supplementary questionnaires.	Private Rental Support and Advocacy Program

List any areas in which needs requiring assistance under Program have been resolved or stabilised			If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Caseworker	Program	
Client required intensive assistance to resolve arrears in rent, organise repayment for debts, food relief, introduction to ER agencies, budgeting assistance, transport and emotional support and friendship. All of these things have been achieved and resolved.	XXXX Tenancy support service has helped me in many ways. I have gone from strength in the 6.5 months in which XXXX has been my support worker. I have gained strength, confidence and feel lighter in all aspects of my life. Thank you	Service provided support emotionally and physically by linking client in to appropriate agencies. Client was feeling overwhelmed and in crisis and required intervention to address rent arrears, debt, child support, mental health and transport. Client now feels confident, happy and empowered.	Client may have been evicted as she did not envisage there being a solution to her problems. The debts, too, needed to be addressed urgently and some order and structure put in place. Client was very unstable and greatly appreciated everything we did. As a result she now has a happy and safe environment for herself and three kids	Private Rental Support and Advocacy Program	
Property standards. Rental arrears. Financial assistance. Breach action stopped. Mental health being addressed.		Stabilised the tenancy for family to have safe environment which is important after years of kids being separated as wards and mother homeless. Increased skills to communicate and link with community agencies and government services.	Family may have lost home and faced further separation – high risk of suicide at beginning of support, but now feeling hope and positive journey.	Private Rental Support and Advocacy Program	
Supported to stay in private rental then end on best notice. Advocated to get priority Homeswest housing. Financial counselling. Support re university and withdrawing. ER services.	Made more aware of my financial situation. Accommodation choices. There is support around, it doesn't hurt to ask.	Supported client whilst advocating for Homeswest housing. Linked to financial counselling and ER services.	During a short period of homelessness, client had to move into mum's – unsuitable and overcrowded – without support this period may have been significantly longer	Private Rental Support and Advocacy Program	
	Rental report, first time in settlement in Australia	Client was fairly independent already and linked in with XXXX, but benefited from having extra support from XXXX as the he and his family are new to the country and presently learning English. He was keen to know his rights and develop links and have a good tenancy		Private Rental Support and Advocacy Program	

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped you (the client)?		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Caseworker	Program	
		history			
Due to circumstances, client was not able to engage fully with the service. The lease holder is now incarcerated and client arranging for house and belongings to be sorted for storage. Client hoping to move into another private rental in near future and re-engage with service.	With support and always lending an ear			Private Rental Support and Advocacy Program	
No rental arrears now!! Reference provided from previous landlord. All property standards met. Very stable tenancy.	See attached, client couldn't write any more!! [Photocopy stapled to page] I have appreciated the support and encouragement from XXXX and other staff members. Without you guys I would hate to think where my/our lives would've ended up. I have mentioned your services to most of my friends and family who are wanting information about your great service. Thank you XXXX and all	Support to end tenancy. Securing return of bond and reference previous tenancy. Info, advice and support on private rental market. Info and support for mental health issue.	Homeless with three children. No reference on tenant database.	Private Rental Support and Advocacy Program	
Rental arrears paid back. Finances including bills stabilised. Relationship support and back together. Increased knowledge of community resources.	XXXX has showed me what services are available to me.	Negotiated a repayment plan with the property manager – support client with ER and financial support/advice whilst client paid back arrears. Offered emotional support as partner abandoned twice due to gambling issues.	Client would have been evicted. Her three children and one she cares for would have been in position without housing or difficulty to access new tenancy.	Private Rental Support and Advocacy Program	
Rental arrears paid off, breach	Financial situation is much better.	Addressed financial situation – paid	The family would have had to find other rental	Private Rental	

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service help	ed you (the client)?	If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
action stopped. Financial duress addressed. Budgeting skills. Financial aid.	I am up to date with rent.	back arrears to stabilise the tenancy	accommodation in a competitive and expensive rental market.	Support and Advocacy Program
Rental arrears. Training for work. Financial counselling/assist referrals.		Stabilised tenancy and re-entering full-time employment.	Homeless and jobless	Private Rental Support and Advocacy Program
	It has helped me to understand get information to help me out and has helped with accommodation issues which was a problem but is no longer any more.	Client was apprehensive about corresponding directly with the real estate regarding the rent arrears. Our encouragement and liaising with the real estate helped create a more accessible relationship and the tenant now manages independently.		Private Rental Support and Advocacy Program
Centrelink debt management and referral to legal services. Restraining order info and referral to Community Legal Service. Financial assist. Negotiation with property manager. Tenancy support plan	Help me in different things when I need it and to obey what they do with my health and other people and friends also	Support with moving to more sustainable long-term housing. Strong links with a range of support services. Ending previous tenancy with positive outcomes. Some debts, but payment plan in place.	Database entry against tenancy. Financial hardship and inability to become more stable in tenancy.	Private Rental Support and Advocacy Program
	The services have been great. Very happy	End first tenancy. Stabilise new tenancy. Build positive tenant and property manager relationship. Support with medical appointment due to pregnancy. Info and support with tenant responsibilities.	Financial hardship in changing tenancies. Debts from previous tenancy impacting on now.	Private Rental Support and Advocacy Program
NA – Client has moved premises due to not being able				Private Rental Support and

List any areas in which needs requiring assistance under Program have been resolved or stabilised			If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Caseworker	Program	
to afford accommodation (children placed in foster care by DCD). Assistance with finalisation of tenancy and liaison with property manager. File has now been closed off therefore have not completed next section as no longer working with client				Advocacy Program	
			The service has pointed me in all the right directions – directly and indirectly, and in all their help has given me new directions emotionally and personally and a new purpose in life. I am not in a rut any more nor in huge debts. The personal support from XXXX has been overwhelming and greatly appreciated. She has been a lifesaver!	Private Rental Support and Advocacy Program	
Supported to go to financial counselling and through bankruptcy to cancel debts. Referred to and supported entrance to mental health services	Referred to mental health service. Communicated with owner about mental health issues.	No progress would have been made with rent paying and possible homelessness.	For me it helped by showing the importance of paying my rent regularly. I always put other bills etc first. Also taking me to places that can help in desperate situations with food and personal problems. I would never have known these organisations existed before.	Private Rental Support and Advocacy Program	
Rental arrears. Financial counselling			Thanks for your help XXXX. You help me out a lot. XXXX	Private Rental Support and Advocacy Program	
Payment of rent/bonds through Centrepay have stabilised payments regarding tenancy.	They settle in the house and was always helpful in always seeing	The service has assisted the client by providing support for new tenancy by addressing the issues presented from	If the client had not received support they would not have even secured the possibility of housing. This would have meant that the client	SHAP Homeless	

List any areas in which needs requiring assistance under Program have been resolved or stabilised	s c k t		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
Anti-social and overcrowding issues in the past have had a much reduced impact on this tenancy due to support plans being in place to address these issues. Ongoing support from another long-term agency is providing support to stabilise ongoing tenancy. Setting up of home resolved. Links to other support agencies re health and community supports.	everything was running well.	family members and dealing with them before they escalated. Client has learnt and actioned new ways of dealing with anti-social and overcrowding issues, which has secured a new lease. Service has assisted with set up of home, referrals, ER assistance and financial assistance re budgeting for new tenancy	would have remained homeless and the client's family (including an older disabled child) would not have been able to come and live with her and would have continued to live in a rural community that is not dry. This may have led to health and other consequences continuing to live in a community away from his mother. Additional consequences would be for the client's health and also for family relationships, as she was living from one family member to another. The impacts on society could be many and varied, ranging from anti-social [behaviour] due to frustration or crime, overcrowding, strains on resources and therefore a continuation of isolation that many Indigenous families have or do experience.	Helpline
Finding a stable supportive environment. Links with community mental health supports	The service has helped by being supportive and helping me connect with estate agents.	Suicide intervention. Homelessness periods stopped. Links with support. Decreased mental health issues due to engagement with services.	Suicide. Hospital admissions. Self-medicating behaviours restarted. Living in transient conditions.	SHAP Homeless Helpline
Rental arrears. Setting up home environment. Looking at schooling. Financial assistance and counselling. Info on Domestic Violence. Support to leave abusive relationship. Support to ensure tenancy ended well with full bond returned.	Has totally helped house my children. If I didn't know about XXXX help with the total moving in costs, my 3 children with have been living on the streets. Also budgeting assistance helped for the time we received it from XXXX. My only concern is we only found out about XXXX and XXXX through XXXX centre. Maybe word of mouth advertising for	Resolved all tenancy issues. Support to leave abusive relationship with safety and no impacts on future tenancies.	Continued with DV relationship. Possibly DCD involvement for child protection issues. Declining mental and physical health.	SHAP Homeless Helpline

List any areas in which needs requiring assistance under Program have been resolved or stabilised		der service what might have happened? What		servic do you been to the co		
Caseworker	Client	Caseworker	Caseworker	Program		
	house in need should be somehow looked at, in a way that those who don't need the help can't abuse the service.					
Motivating client to accept support to move from car into private rental then later to access DHW housing. Supporting client to address underlying mental health issues, family relationships, substance misuse issues.	Found it [service] and XXXX more than helpful. XXXX helped me through some really hard times. After not having much contact with people it's been great to chat and have coffee with someone so respectful, helpful, supportive and trustworthy.	Supported client to move from car to private rental. Provided advocacy to assist client to receive priority housing. Provided all support to maintain tenancy.	Could be still living in car. As a consequence, mental health, emotional and physical wellbeing would have been severely affected.	SHAP Homeless Helpline		
Resolved issues between tenant and landlords (tenant agreed repayment plan). Stabilised payments to utilities. Stabilised financial concerns by making links to financial counselling.	At a time when I was at my lowest your service was all I had and thanks to XXXX and all her encouragements and support, I do believe I can now function as I did before certain issues came into my life.	Client has had stable private accommodation for the past six months and has ended previous tenancy on best possible note (client choosing to move out). Client agrees to finalise debt repayments. Client feels that she can manage and 'function' better and has learnt important lessons/information from support period. Client and family have stayed together during the last six months	If client had not had any support, her family would not have been able to live together during the last six months. This would have meant the client would not have been in a position to support her two teenage children during periods of crisis'in their lives. This may have meant that there would have been more police/court involvement and may have meant conviction or other issues taking place.  Obviously this would have an effect on all involved: client, family, community and resources.	SHAP Homeless Helpline		
Domestic violence. Health issues. Tenancy stabilisation. Support to move out.	Support to secure housing. Provided assistance for furniture and other household items. Provided support for other issues outside tenancy concerns. Assisted with wellbeing issues.	Dramatic change with support to leave abusive relationship in areas of mental and physical health; child development; financial circumstances.	Serious compromised mental and physical health. Physical injury. Impacts on child development, possibly lose children with DCD involvement	SHAP Homeless Helpline		
Client has paid off rental arrears		XXXX has assisted the client to	I think that the client would not be living	SHAP		

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service help	what ways has the service helped you (the client)?  If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?		
Caseworker	Client	Caseworker	Caseworker	Program
in previous tenancy and is managing to live in new tenancy without financial support from third party. Budgeting/financial counselling assistance and referral. Stabilised new tenancy which is going well. Mental health support from additional service providers.		maintain a new tenancy without the support from unwanted third party. This has been achieved through support and financial assistance, budgeting, counselling and advocacy with financial providers (Centrelink and Child Support). The service has also assisted the client with mental health concerns by working in partnership with other service providers to make sure that mental health needs were met (referrals).	independently with their child and would be reconnected to an unwanted third party which offered financial support only. The client's mental health would have been affected by this ongoing unsatisfactory relationship and there may have been more admissions to hospital and self-harming incidences. This would have had an impact on the client's son and he may have had to go into respite care (DCD has previously been involved with this family). Following on from this, the demand on resources would affect society, and the family of the client would also have to deal with a change in this family member's condition (this would have major impact on many lives)	Homeless Helpline
		Provided support for all tenancy issues. Client now very competent and confident at successfully maintaining tenancies. Advocated for and assisted client with Homeswest appeals.  Monitored client working through DHW recommendations.	May have continued living in crisis accommodation which would have halted the reunification process. Would not had an advocate for the Homeswest appeal.	SHAP Homeless Helpline
Regular payments of rent and utilities (resulting in no arrears and utility payments on time). Links to local community resources (financial counselling, consumer advice)	In every way I have a new life now all thanks to XXXX	The service has assisted the client by setting up Centrepays for all ongoing requirements (rent, power, gas, phone). Also assisted by referring to agencies (financial counselling, consumer protection/advice). This has enabled the client to make informed decisions re financial decisions and life-changing decisions re where to live etc. If client had not received	Children and client continued to live from relative to relative, no stability, no child care and no employment for client. This would have meant a strain on other resources in the community and unstable 'home' environment for children.	SHAP Homeless Helpline

List any areas in which needs requiring assistance under Program have been resolved or stabilised	der service what might have happened? W do you think the consequences might l			
Caseworker	Client	Caseworker	Caseworker	Program
		assistance then she may have continued to experience financial difficulties.		
Property standards. Stabilising new tenancy. Negotiating with real estate. Financial counselling. Mental health info/advice. Risk assess for substance misuse impacts on mental health.	Helped me feel not so alone in the process of moving out on my own	Provided a support service to allow tenant to feel confident, safe in living on own.	Tenant would not be able to live on own. Believe self-harm would increase. Client is quite reclusive.	SHAP Homeless Helpline
This client is a lot more confident in approaching issues with XXXX and in explaining problems without fear of repercussions. In past a lot was avoided and not dealt with – this has stabilised markedly.		It aided the client to see their XXXX as an ally rather than to be avoided. Many financial circumstances that could have been dealt with quite easily turned into an issue that jeopardised their housing security by way of non-payments of rent and has, although not totally resolved, stabilised.	This family would surely have been made homeless.	SHAP
Property standards have been resolved. Support has been provided in regards to financial difficulties and bankruptcy.			More supportive with our independence. Given skills to self-refer to other community agencies.	SHAP
Crisis accommodation was secured. Client was already in care of doctor for medical treatment and referred. Client breached parole – current location unknown and progress and current needs unknown		Ongoing support was available to client, however, he failed to maintain contact. Client was breached – this could have been avoided, or the risk reduced, if client had maintained contact and accepted support		Re-Entry Link
Issues remain ongoing and do not appear stabilised, e.g. drug		Service provided support with crisis accommodation and support in finding	Would be homeless – would not have got parole and if in the community would be at risk	Re-Entry Link

List any areas in which needs requiring assistance under Program have been resolved or stabilised	In what ways has the service helped you (the client)?		If the client hadn't received help from the service what might have happened? What do you think the consequences might have been the client, their family and those in the community had support not been available?	
Caseworker	Client	Caseworker	Caseworker	Program
use, accommodation.		alternate accommodation. Drug and alcohol counselling. General support and information. Clothing and emergency relief	of re-offending. Without drug counselling may have increased use. Stress increased, sense of isolation increased.	
Budgeting stabilised. Debts (fines) stabilised. Debts (Homeswest) stabilised. Savings not part of budget plan stabilised.	This client like many others needs to make a positive connection with the community. I believe that the TASS caseworker is this connection. The key elements from this connection have been honest, mutual respect, continual [illegible], support and empathy with REAL and honest ongoing appraisals of client's progress	Re the bureaucratic structures and processes of government, this client had given up following up on any processes with government agencies and thus resulting in compacting of problems eventually with alienation from community	The services of the TASS program have made me feel more confident within myself and also has taught me a lot about budgeting and how to cope with problems such as the normal daily life. I have accomplished many things thanks to this program	TASS

## **Table H4: Twelve month wave comments**

- 1. I had a worker who made me see respect for myself. The worker listened to me. It helped increase my self-esteem. They helped me see that if I had troubles not to just reach for alcohol.
- 2. Positive and negative I was surprised at the level of care and support. I am not satisfied with the follow-up though. My supervisor made an offer to help move my belongings out of storage, but has not contacted me for weeks now. Also, without knowing, I was a very good influence on other people (clients) at the service
- 3. Regular visits, contact with XXXX. Help with phoning other agencies. Talking and explaining things.
- 4. No
- 5. Stability in housing and getting though Family Court hearings, issues etc leading to more stable care arrangements with children. Practical assistance such as furniture and food assistance when needed. Workers listening to my issues.
- 6. XXXX support service has helped me deal with problems with my children and emotional support for myself due to said problems with my children.
- 7. They've helped me and got me back on track. They've helped me so much.
- 8. They're there when you need them.
- 9. XXXX has supported our housing and children situations [which] has been all the support we needed.
- 10. XXXX done a lot of good things because they kept us off the streets, they housed us and they helped us get our children back.
- 11. Things have settled down a lot and I feel more at ease now with my life.
- 12. Being a big support and a shoulder to cry on, very understanding. Been like a best friend. Someone who will listen and provide support when needed.
- 13. XXXX has given me support with Homeswest in cleaning my house and my general wellbeing and advice to cope with alone and helping me see to any problems with the house (hot water, lawn mowing, cockroaches).
- 14. I think because of the perception of myself as a 'high functioning' person, I received less of a service. For example I arranged all of my own appointments. I sought outside counselling. My key worker did not check in with me on a regular basis.

- 15. The service was very good. The service helped arrange for the police and staff member to retrieve my furniture and belongings. They also helped me find my house and helped me to access finances. My time there was comfortable and clean, with extremely supportive staff who were very caring.
- 16. I'd like to thank XXXX and XXXX for once again giving me support on life again. Without crew I would be a bad mad and on the streets begging. So once again thanks for your support. [Client's signature]
- 17. They virtually looked after me; organised my accommodation. Unfortunately my file was lost. Constantly in contact, phone calls. Pushed me though Homeswest and got me prioritised.
- 18. There were pretty helpful when I needed it. It would have been good to get more support with accommodation, e.g. getting around, practical support and info.
- 19. They have been very helpful in everything. They help me to get a home quickly. Gave me clothes, leads, etc. During my stay with them, took my XXXX year old son for outing during school holidays. They were in court with me. I'm very thankful for them.
- 20. Helped me with how I communicate with my son. Parenting and budgeting. They helped watched my child so I could do a course. Very supportive. They reassured me that they were there for me. I never had to feel too afraid to ask for help.
- 21. I received 3 different services. I had help for 6 months looking for housing. I also received help for 12 months around my emotional issues and am currently registered with employment arm of the agency.
- 22. I found XXXX to be extremely useful & friendly service. Their capacity for kindness and access & knowledge of organisations available was invaluable.
- 23. When I had problems with the last real estate, they assisted with my relationship with real estate. They also advised me of other services I was not aware of, e.g. food vouchers, help with electricity bill. Also, I believe Ruah helped me not to get evicted, by giving me strategies to pay my rent.
- 24. They dealt with a real estate on our behalf. I was really happy with the service they provided and I would definitely recommend them to someone else.
- 25. XXXX is a good tenancy support group and always support you with the following.
- 26. XXXX is a good organisation and special thanks to XXXX.
- 27. They helped us out a great deal with the landlord.
- 28. I thought the service was great and really helped us out. It was fantastic. Overall, am very satisfied with the service.
- 29. For certain things they were good. However, when it came to standing up to an abusive landlord, they were too afraid.

- 30. Because I'm on workers comp and can't get around, they let me pay my rent by money order. They also pick me up to take me shopping sometimes. If I need things they will bring them to me.
- 31. I don't think they should allow us to go to the pub.
- 32. XXXX The service is very supportive. I have no regrets about going to them they have helped me very much.
- 33. Since being in the refuge I appreciate more having my own space and house. They also taught me to keep my eyes open and look out for signs of abuse and violence.
- 34. No comment.

# 9 APPENDIX I FUNDING AND THE COST OF HOMELESSNESS PROGRAMS – SOURCES

# Sources for 'Recurrent funding', and 'Number of clients assisted' for each program (see Table 6.1).

- → SAAP –AIHW (2007), Homeless People in SAAP, SAAP National Data Collection Annual Report 2005-06 Western Australian supplementary tables.
- → PRSAP Provided by DCD. 'Clients assisted' represents cases closed in the 12-month period.
- → SHAP Provided by the Department of Housing and Works (DHW). Figures provided for 2005-06 are incomplete. The number of clients may be more than stated, resulting in the cost per client being overestimated.
- → SHAP Homeless Helpline Provided by DHW.
  - 'Clients assisted assessed': 46 clients were assessed over the period 1 Jan 2006 to 30 June 2006. This was doubled to estimate annual clients assessed.
  - 'Clients assisted housed': 25 clients were housed over the period 1 Jan 2006 to 30 June 2006. This was doubled to estimate annual clients housed.
- → TASS Recurrent program funding was provided by the Department of Corrective Services (DCS), clients assisted is from the Community Transitional Accommodation and Support Services Monitoring Report 2005-2006
- → Re-entry Link Recurrent program funding was provided by the DCS, clients assisted is from the Community Re-entry Coordination Service Monitoring Report 2005-2006.

# Sources for Total Recurrent funding by homelessness program in Western Australian regions covered by the study in Table 6.2

- → SAAP-AIHW, 2007, Homeless People in SAAP, SAAP National Data Collection Annual Report 2005-06 Western Australian supplementary tables, Table 2.1.
- → PRSAP A request has been placed with DCD.
- → SHAP Recurrent funding by district provided by DHW.
- → SHAP Homeless Help line Service is not geographically specific. 97 per cent of calls received by the DHW Homeless Advisory Service (which refers suitable clients to the SHAP Homeless Helpline for further assessment) were from the target geographical area.
- → TASS Recurrent funding by district provided by the DCS.
- → Re-entry Recurrent funding by district provided by the DCS.

# 10 APPENDIX J HEALTH AND JUSTICE SERVICES – POPULATION INCIDENCE AND GOVERNMENT COST PER INCIDENT

Tables J1 and J2 report estimated population incidence (column (1)) and government cost per incident (column (3)) for the health and justice services, respectively, included in the *Client Survey*. All costs are reported in 2005-06 dollars.

This information is used to determine potential cost offsets from assisting people at risk of homelessness. Columns (2) and (4) reference the relevant Note, which details the method and data sources used in arriving at the estimates. Available data is from time periods ranging between 2001-02 and 2005-06, as indicated in the notes. Cost per incident has been adjusted to 2005-06 dollars using the relevant price index, as detailed in Note 1 to each table. Where the 'Population average annual incidence per person' is from a period prior to 2005-06, it is assumed that utilisation rates are stable over the intervening period.

Data sources are referred to by a number in the notes and listed after the notes to Table J2.

Table J1: Health services (2005-06 dollars)

	Population – Average annual incidence per person	Note	Government cost/ incident, \$	Note
Health Services	(1)	(2)	(3)	(4)
GP consultation	4.21	2	36.77	3
Medical specialist	0.81	4	56.14	5
Nurse or other health worker consultation	0.19	6	10.35	7
Visits to me	N/A		36.77	8
Hospital ≥ 1 night	0.1	9	6,796	10
Nights in hospital	6.5	11	1,045/night	12
Casualty or emergency	0.354	13	361	14
Outpatient	1.4	15	119	16
Other health worker	N/A		66	17
Ambulance	0.118	18	566	19

N/A – population statistics are not available.

## Notes for table J1 – Health services; calculation of incidence and cost/incident

NOTE	Method	Source
1	Dollar amounts are adjusted to 2005-06 dollars using the Total Health Price index. Reported figures are for Western Australia, unless stated otherwise.	Index : 5
2	Average Non-referred GP attendances per capita, 2005-06.	6
3	Total government expenditure on Non-referred General Practitioner attendances/Non-referred General Practitioner attendances =\$316,283,070/8,602,090 = \$36.77, 2005-06.	6
4	Average Specialist attendances per capita, 2005-06	6
	(Total government expenditure on Specialist attendances)/Specialist attendances	
5	<b>=</b> \$92,482,140/1,647,404 <b>=</b> \$56.14, 2005-06.	6
6	Average Non-referred Practice nurse attendances per capita, 2005-06	6
7	Total government expenditure on Practice nurses/Practice nurse attendances =\$3,950,600/381,841= \$10.35, 2005-06.	6
8	Assumes the cost to government is the same as for a GP visit (see note 3). This may underestimate the cost of a home visit. Occurrence of home visits is low and conclusions are unlikely to be sensitive to the variable.	
9	(Public hospital separations, excluding same day)/population = 185,085/1936,500 = 0.10 separations/person (2002-03).	Separations: 7 Population: 5
10	Cost per patient day = \$969, 2003-04. Average length of stay in public hospitals excluding same day separations (Australia) = 6.5 days, 2001-02. Cost of a stay in hospital of one night or greater = \$6,299, 2003-04 assuming average length of hospital stay remains constant.	Cost: 4 Length of stay: 3
11	Average length of stay in public hospitals excluding same day separations = 6.5 days, 2001-02.	3
12	Cost per patient day, 2003-04 = \$969	4
13	Emergency service use per 1000 population, 2001-02 (Excluding remote areas) = 354	3
14	Cost per casualty/emergency incident, 2003-04 = \$335	8
15	Occasions/population (2003-04) = 2.8m/1.9645m	Occasions: 8 Population: 5
16	Cost per occasion, 2003-04 = \$110	8
17	Cost per occasion, 2002-03 = \$59	7
18	Incidents per 100,000 people, 2004-05 = 11,835	8
19	Cost per incident (Aust) 2004-05 = \$545	8

Table J2: Justice services (2005-06 dollars)

	Population – average incidents / person	Note	Government cost/incident, \$	Note
Justice Services	(1)	(2)	(3)	(4)
Victim assault/theft	0.18	2	1,133	3
Stopped by police in street & visits from justice officers	0.17	4	151	5
Stopped by police in vehicle	0.84	4	60	5
Apprehended by police	0.02	4	151	5
In court	0.06	6	850	7
In prison	0.002	8	56,570	9
Visit from justice officer	Included with 'stopped by police in street'	10	151	11
Nights held by police	N/A		134/night	12
Nights in prison	0.61	13	186/night	14
Nights in detention/remand/ correction facility	N/A	15	134/night	16

N/A – population statistics are not available

## Notes for table J2 – Justice services; calculation of incidence and cost/incident

NOTE	Method	Source		
1	Dollar amounts are adjusted to 2005-06 dollars using the GDP Chain Price Index. Quotes figures are for Western Australia, unless stated otherwise.	Index: 2		
2	Reported offences against the person and against property, excluding homicide, receiving/illegal use/fraud/arson/graffiti/property damage = 159,870, 2005-06. This represents reported crime only. The level of non-reported crime varies with the type of incident. In 2001-02, it was estimated that 17.3 per cent of crimes against the person were reported and 35.6 per cent of crimes against property were reported. The Police Annual Report 2005-06 states that due to improved procedures and systems the level of unreported and unrecorded incidents has decreased post-2002. Assuming that reporting/recording rates have increased by 50 per cent, reported and unreported offences are estimated at 362,160. Reported and non-reported offences/population = 362,160/2,030,778 = 0.18.	Reported offences and population (2005-06): 9  Crime reporting rates: 7		
	(Crime reporting rate 2001-02: estimated reported and non-reported personal crimes/100,000 people = 5,700 (includes robbery, assault, sexual assault). Estimated reported and non-reported crimes against property/100,000 households = 10,400 (includes break and enter, attempted break and enter, motor vehicle theft). Actual reported personal crimes/100,000 people= 986.3. Actual reported crimes against property/100,000 households (excluding other theft) = 3729.6.)			
3	Offenders apprehended and dealt with: Average cost per response/investigation = \$1,133; 2005-06	9		
4	57.2 per cent of people over 15 had contact with police over previous 12 months. For those with contact, the average number of contacts per person was 3, 60.3 per cent of contacts were police initiated. Of police initiated contacts, 16.5 per cent of contacts related to incidents which did not involve a vehicle or an arrest, 81.3 per cent of contacts involved vehicles (70.2 per cent random breath test, 11.1 per cent traffic accident or violation) and for 2.2 per cent of police initiated contacts the reason was arrest.	7		
	Average police initiated contacts per person (excluding vehicle related incidents and arrest) = 0.572 * 3* 0.603* 0.165= 0.17/year. It is not possible to separate the proportion of contacts which involved being stopped in the street, therefore this represents the estimated incidence of being stopped			

NOTE	Method	Source
	by police in the street plus visits from justice officers.	
	Average police initiated contacts involving a vehicle, per person = 0.572 * 3* 0.603* 0.813 = 0.84/year	
	Average police initiated contacts involving arrest, per person = 0.572 * 3* 0.603* 0.022 = 0.02/year	
5	Annual cost of police service:	Police cost and
	Maintain lawful behaviour and prevent crime = \$268,415m; 2005-06.	population: 9
	Traffic law enforcement and management = \$102.624m; 2005-06	
	In 2003-04, 57.2 per cent of people over the age of 15 had contact with police; the average number of contacts was 3. 60.3 per cent of contacts were police initiated, and of police initiated contacts 81.3 per cent involved vehicles. Population 2005-06 = 2,030,778.	Police contact rate : 7
	Estimated cost/contact with police (non-vehicle related) = 268,415m/(2,030,778* ((0.572 * 3)(1-(0.603*0.813)) = \$151.10; 2005-06.	
	Estimated cost/contact with police (vehicle related) = 102.624m/(2,030,778*(0.572*3*0.603*0.813) = \$60; 2005-06	
	This assumes the average rate of police contact is the same in 2005-06 as was recorded in 2003-04 and that the cost of being stopped by the police in the street is equal to the cost of being apprehended on the street	
6	(Total court finalisations/year, criminal and civil courts)/population =	Finalisation: 7
	123,318/1,964,500 = 0.06; 2003-04	Population: 5
7	Net recurrent expenditure per court finalisation-criminal and civil courts \$733, 2003-04	Court costs: 7
	Plus police cost for services to the judicial system: Average cost per guilty plea=\$28, average cost per not guilty plea = \$277. Per cent of guilty pleas before trial = 92.8 per cent. Average cost per case = (0.928*\$28) + (0.072*277) = \$45.93; 2005=06.	Police costs: 9
8	Imprisonment per 100,000 population over 18 years = 202.5; 2003-04	Total
	As at 30/6/2006, unsentenced prisoners represented 17 per cent of the total prisoner population. Assuming the proportion of unsentenced prisoners was the same in 2003-04 as 2006:	Imprisonment rate: 7 Sentencing
	Estimated imprisonment of sentenced prisoners per 100,000 population over 18 years = 168.	status: 1
9	At 30 June 2006 the median length of time to serve, excluding prisoners with life and other indeterminate sentences (Australia) = 1.9 years (approx 1 year 11 months). If it is assumed that sentencing occurs consistently throughout the year, 2.94 per cent of prisoners in a given year will serve 1 month, 2.94 per cent will serve 2 months, etc and 67.65 per cent will serve 12 months. This results in an average period in prison in a given year of 10 months. Cost per prisoner per day = \$169.5. Cost per average period in prison in a given year = \$51,556; 2003-04. This assumes no change in the	Time to serve:1  Cost : 7
10	median time to serve between 2003-04 and 30/6/2006.  Separate population incidence not available. Included with incidence of being stopped by police in the street. See note 4.	
11	Assumes the cost of a visit from a justice officer is the same as the cost per contact with police (non-vehicle related). See note 5.	
12	Assumes the cost of being held overnight by the police is the same as the recurrent and capital cost for open prisons/prisoner/day = 122.40; 2003-04	4
13	Imprisonment rate per 100,000 population = 168; 2003-04. This equates to an average 0.61 days/year.	7
14	Recurrent and capital cost on prisons/prisoner/day = 169.5; 2003-04	7
	Median time on remand (Australia) = 2.6 months. Population statistics are	1

NOTE	Method	Source
16	Recurrent and capital cost per correction/remand/detention prisoner/offender per day =122.40; 2003-04:	7
	Assumes the average cost per prisoner/offender is the same as open prisons/prisoner/day	

#### Sources referenced in Notes to Tables J1 and J2

- 1 ABS, 2005, Prisoners in Australia, National Centre for Crime and Justice Statistics, 4510.0
- 2 ABS, 2006, Cat No. 5206.0 Australian National Accounts
- 3 AIHW, 2004a, Australia's Health
- 4 AIHW, 2006a, Australian hospital statistics 2004 05
- 5 AIHW, 2006b, Health expenditure Australia 2004 05
- 6 DoHA, 2006, Medicare Statistics September Quarter 2006.
- 7 SCRGSP, 2005, Report on Government Services
- 8 SCRGSP, 2006, Report on Government Services
- 9 Western Australian Police Annual Report, 2005-06

# 11 APPENDIX K WITHIN-CLIENT GROUP COST OFFSET ANALYSES

## K1 Community centres

Table K1 reports health and justice cost offsets which may occur from preventing homelessness for community centre clients. The first set of columns (1) through (6) compare average service utilisation for clients who have or have not experienced primary homelessness in the prior year. The final six columns report the comparison for those who have/have not experienced either primary homelessness or lived in temporary accommodation in the year prior to the survey (for present purposes this combined group of survey respondents are referred to as the 'homeless'). Overall, the cost of services is higher for respondents who have experienced primary homelessness or temporary accommodation. The potential offset per person from preventing primary homelessness is \$6,843/person/year for health services and \$8,471 for justice services. For preventing any type of homelessness, the offset is \$9,722 for health services and \$6,896 for justice. When considering average life outcomes, the total offset for health and justice services for primary homelessness is \$375,471/person, and \$407,469/person for any type of homelessness.

Utilisation of justice services is uniformly higher for those experiencing homelessness than those who do not. For health services, those who experience homelessness report much higher utilisation of higher unit cost services (hospital, emergency and casualty, and ambulance) but a lower use of all other services. These results are consistent with overseas literature. For example, The Corporation for Supportive Housing (2004) reports that in San Francisco the homeless population accounts for 1.6 per cent of the city's population, but 26 per cent of hospital stays and 24 per cent of emergency room visits.

Table K2 shows that community centre clients who have experienced a period of unsafe accommodation in the year prior incur much higher health service costs (\$37,440/year), but lower justice costs (-\$2,431/year), than those who have not. The net cost offset relating to unsafe accommodation is a positive \$35,009/person/year. It should be noted that only five clients (10 per cent of respondents) reported experiencing unsafe accommodation.

Health costs, except for GP visits, are nearly five times greater for those experiencing a period of unsafe accommodation. This is largely driven by hospital stays, which are nearly six times higher. The Corporation for Supportive Housing (2004) report that clients who are the greatest users of hospital services prior to support also report the largest decrease in use when housing assistance is provided.

Care should be taken when interpreting the cost of justice services. The average incidence of assault, theft and going to court is higher for those experiencing unsafe accommodation. The lower justice cost is largely driven by time in custody, with only one of the five respondents who experienced unsafe accommodation reporting a time in prison or detention/remand/correction, and this was only for one night. It is unlikely that providing support for those experiencing unsafe accommodation will result in an increase in average time in custody. If prison and detention/remand/correction are excluded from the total, justice costs/person are \$903/year higher (average life outcome = \$22,140) for respondents who have experienced unsafe accommodation than for those who have not.

Table K1: Community centre cost offsets – by prior homelessness status

	Primary	/ homeles	s in prio	r year			Primary homeless/temporary accommodation in prior year						
	٨	10	Y	ES	Differe	nce/person	٨	0	Y	ES	Differe	nce/person	
						Ave life outcomes \$						Ave life outcomes \$	
	Ave occur.	Ave cost \$	Ave occur.	Ave cost \$	Annual diff \$	(6)=PV of (5) n=45, i=3	Ave occur.	Ave cost \$	Ave occur	Ave cost \$	Annual diff \$	(6)=PV of (5), n=45, i=3 per	
Health Services	(1)	(2)	(3)	(4)	(5)=(4)-(2)	per cent	(1)	(2)	(3)	(4)	(5)=(4)-(2)	cent	
GP	6.44	237	3.04	112	-125	-3059	6.85	252	4.01	148	-104	-2553	
Specialist	2.34	131	1.93	108	-23	-555	2.42	136	2.01	113	-23	-561	
Nurse/other worker	2.94	30	1.43	15	-16	-385	2.29	24	2.26	23	0	-7	
Visit to me	1.13	41	0.05	2	-40	-977	0.85	31	0.65	24	-7	-180	
Hospital, ≥ 1 night	1.03	7007	1.98	13425	6419	157381	0.56	3806	1.96	13313	9508	233114	
Casualty / emergency	1.74	627	2.03	731	104	2549	1.41	510	2.08	751	240	5895	
Outpatient	2.28	271	1.66	197	-74	-1805	3.00	357	1.47	175	-182	-4454	
Other health worker	0.70	46	0.52	34	-12	-295	0.86	56	0.50	33	-23	-574	
Ambulance	0.68	385	1.75	993	608	14918	0.80	451	1.35	765	314	7702	
Total Health		8,776		15,618	6,843	167,774		5,622		15345	9,722	238,382	
Justice services													
Victim assault/theft Stopped by police,	0.46	524	0.77	876	352	8626	0.56	629	0.63	709	79	1945	
street	2.20	332	4.78	721	389	9541	1.61	244	4.18	631	387	9498	
Stopped by police, vehicle	0.57	34	1.11	67	32	793	0.62	37	0.94	57	20	480	
Apprehended by police	0.65	98	2.07	312	214	5248	0.17	25	1.82	275	250	6137	
Held overnight by police	0.36	95	1.91	511	415	10185	0.06	15	1.60	428	413	10123	
In court	1.04	881	1.81	1538	657	16110	0.81	686	1.73	1471	785	19247	
Visit – justice officer	0.07	11	1.00	151	140	3443	0.00	0	0.76	114	114	2795	
Nights in prison	0.07	13	16.57	3082	3068	75234	0.00	0	14.13	2628	2628	64435	
Nights detention													
/remand/ correction	1.49	200	25.39	3402	3202	78517	0.00	0	16.57	2220	2220	54428	
Total Justice Total offsets		2,188		10,659	8,471 15,314	207,697 375,471		1,636		8,532	6,896 16,618	169,087 407,469	

Table K2: Community centre cost offsets – unsafe accommodation in past year

	Unsafe a	accommo	dation in	past year		
	NO		YES	-	Difference/p	person
	Ave occur.	Ave cost \$	Ave occur.	Ave cost \$	Annual diff \$	Ave life outcomes \$ (6)=PV of (5)
Health services	(1)	(2)	(3)	(4)	(5)=(4)-(2)	n=45, i=3 per cent
GP	5.14	189	4.00	147	-42	-1030
Specialist	2.13	119	2.40	135	15	376
Nurse/other worker	2.20	23	2.90	30	7	178
Visit to me	0.63	23	1.50	55	32	780
Hospital, ≥ 1 night	1.12	7588	6.40	43494	35907	880385
Casualty / emergency	1.74	629	2.90	1047	418	10259
Outpatient	1.80	215	3.70	440	226	5535
Other health worker	0.47	31	2.00	132	101	2481
Ambulance	1.03	583	2.40	1358	776	19019
Total Health		9,399		46,839	37,440	917,984
Justice Services						
Victim assault/theft	0.57	642	0.90	1020	378	9265
Stopped by police, street	3.10	468	5.00	755	287	7029
Stopped by police,						
vehicle	0.91	54	0.00	0	-54	-1332
Apprehended by police	1.07	162	0.00	0	-162	-3974
Held overnight by police	1.05	281	0.90	241	-40	-982
In court	1.33	1126	2.00	1700	574	14068
Visit from justice officer	0.53	80	0.00	0	-80	-1959
Nights in prison	10.73	1833	0.20	37	-1796	-44025
Nights detention/remand/ correction	11.59	1564	0.20	27	-1537	-37685
Total Justice		6,211	0.20	3,780	-2,431	-59,596
Total offsets		-,		-,	35,009	858,388

### **K2** Other Programs

Potential cost offsets are also determined by comparing service utilisation by clients who experienced a period of homelessness over the prior year with those who did not. The number of clients surveyed and their prior year accommodation experience is presented in Table K3. All programs had clients who reported a period of homelessness, but not all had clients who experienced either primary homelessness or unsafe accommodation. Cost offsets relating to homelessness are presented in Table K4. Where primary homelessness or unsafe accommodation is reported by more than one client, relevant offsets are reported in the discussion. Given the relatively small numbers involved in these within-program comparisons, estimates of cost offsets need to be treated with some caution.

Table K4 reports cost offsets for each program separately; SAAP-DV and Single Women in Panel A, SAAP-Single Men in Panel B, SAAP-Families & General in Panel C, and SHAP, PRSAP and TASS/Re-entry in Panels D, E and F, respectively. Total average cost of health services is greater for those experiencing a period of homelessness in the prior year, compared with those who have not, for all client groups except for SAAP-Single Men and SAAP-Families & General services clients. For services where the health cost offset from

preventing homelessness is positive, the value of the offset ranges from \$1,528/person/year for TASS/Re-entry Link clients (Panel F) to \$3,549/person/year for SAAP-DV and Single Women service clients (Panel A). SAAP-Single Men services clients experiencing homelessness (Panel B) report lower use of all health services, with a health cost offset of -\$14,787/person/year, while SAAP-Families & General Services clients (Panel C) report lower use of six of the nine services and a health cost offset of -\$1,734/person/year. The estimates are based on a small sample, with only four clients reporting not having a period of homelessness, whereas 12 report not having a period of primary homelessness. As discussed below, the health cost offset relating to primary homelessness is also negative. Therefore, the finding of a negative cost offset is unlikely to be related to the small sample size.

Table K3: Respondents experiencing homelessness or unsafe accommodation

		Respondents ex accommodation	periencing hon	nelessness/unsafe	
Target group/ Program	Total number of respondents	Primary homelessness	Homeless	Unsafe accommodation	
SAAP, DV & single women	33	6	20	18	
SAAP, single men	37	15	23	0	
SAAP, families & general	17	5	13	6	
SHAP	15	1	4	1	
PRSAP	27	0	4	1	
TASS/re-entry link	11	0	3	0	

In all cases, the cost of stays in hospital constitutes both the largest proportion of health costs and the largest cost differential. It ranges from 72 per cent of health costs for SAAP-Families & General services clients not experiencing homelessness (Panel C) to 93 per cent of health costs for TASS/Re-entry Link clients who have experienced homelessness (Panel F). For all client groups except for PRSAP and SAAP-Families & General services, the difference in hospital stays constitutes more than 90 per cent of the health cost differential. Therefore, estimated health cost offsets associated with preventing homelessness is sensitive to the estimated cost of hospital stays. The cost estimates included here assume the average length of hospital stay reported by respondents is 6.5 days, which is the average length of hospital stays for the population. Salit et al. (1998) and Culhane et al. (2002) report that those who are homeless typically report longer stays in hospital than the population as a whole. For most client groups, the incidence of hospital stays is greater for those who experience homelessness. If the average length of each stay is also longer for these clients, the real health cost offset associated with preventing homelessness is larger than that reported here.

For Single Men and Families & General, the incidence of hospital stays is smaller for those who report experiencing homelessness in the year prior to the survey. For these programs, the conclusion that the health cost offset from preventing homelessness is negative may be sensitive to the average length of a stay in hospital. In the case of SAAP-Single Men services clients (Panel B), those who have/have not experienced homelessness report an average 0.57/2.54 stays in hospital of one night or more and the overall health cost differential/person is -\$14,787. As the cost per day in hospital is \$1045, the average stay in hospital would have to be nearly 5 times as long for those experiencing homelessness compared with those who have not for the total cost differential to be positive. This is unlikely; US studies report that housing support results in an average a reduction of between 37 per cent (Corporation for Supportive Housing 2004) and 59.9 per cent (Culhane et al. 2002) in hospital inpatient days. Therefore, the conclusion that government health costs are greater for clients of SAAP-Single Men services who do not experience homelessness is

unlikely to be sensitive to the average length of stay in hospital. In comparison, SAAP-Families & General services clients who have/have not experienced homelessness (Panel C) report 1.04/1.13 stays in hospital and the total health cost differential/person is -\$1,734. The average stay in hospital would only have to be 25 per cent longer for those who are homeless for the overall cost offset from preventing homelessness to be positive. Therefore, for SAAP-Families & General services clients, the conclusion that the cost of health services is less when a period of homelessness has been experienced may be sensitive to the average length of a hospital stay.

Where clients report a period of primary homelessness the total health cost offsets are positive for SAAP-DV and Single Women clients (\$3,236/person/year), and negative for SAAP-Single Men clients (-\$6,036/person/year) and SAAP-Families & General services clients (-\$3,569/person/year), with the largest cost component being hospital stays. For SAAP-Single Men, the cost offset relating to primary homelessness is only 40 per cent of that estimated for homelessness (as defined for the purposes of the analysis), reflecting the comparatively high hospital use reported by single men who have not experienced any homelessness in the prior year. Where clients reported a period of unsafe accommodation, total health cost offsets for families are -\$3,503/person/year, similar to that reported for families experiencing primary homelessness. For clients experiencing domestic violence and single women the offset is negative, -\$1,654/person/year. This reflects a generally lower usage of all health services by clients who had experienced a period of unsafe accommodation and may reflect a reluctance of these clients to use health services.

When considering justice services, for all client groups except SAAP-Single Men, the cost is higher when homelessness is experienced. There is no single item which drives the cost differential. For SAAP-DV and Single Women clients (Panel A), the incidence of assault and theft is double for those experiencing homelessness in the prior year as compared to clients who have not. For SAAP-Families & General services clients (Panel C), those experiencing homelessness in the previous year report a lower incidence of assault and theft and a higher incidence of all other services, resulting in the total cost of justice services being only \$52 greater when homelessness was experienced in the prior year than when it is not. An increased incidence of assault and theft when homelessness is avoided cannot be interpreted as a positive outcome in terms of quality of life or financial benefit.

SHAP and PRSAP clients (Panels D and E, respectively) experiencing homelessness report higher use of almost all justice services as compared to clients in these two programs who had not experienced homelessness in the prior year. PRSAP and TASS/Re-entry Link clients who experience homelessness report a much higher incidence of court appearances than those who do not. SAAP-Single Men experiencing homelessness in the prior year report lower use of all justice services except being stopped in the street and in a vehicle by the police, resulting in the cost of justice services for SAAP-Single Men experiencing homelessness being lower by \$2661. Those experiencing homelessness report a lower incidence of prison, remand and detention. It is unlikely that preventing homelessness would lead to an increase in time in custody. However, the cost offset is still negative (-\$1,350/person/year) when the cost of prison, detention and remand is excluded.

Where clients report a period of primary homelessness, the total justice cost offsets are positive for clients experiencing domestic violence and single women (\$1,347/person/year), and negative for single men (-\$1,053/person/year) and families (-\$2,833/person/year). Only families report a different pattern of justice service use for those experiencing primary homelessness compared with homelessness. SAAP-Families & General services client who experienced primary homelessness in the year prior to the current support period report lower average use of all services except for being stopped by the police in a vehicle and being held overnight by the police. Thus, it is those families who have had a period of temporary accommodation, rather than those experiencing primary homelessness, who

report the higher use of most justice services. Clients who report a period of unsafe accommodation generally report higher use of justice services, with cost offsets of \$2,905 for SAAP-DV and Single Women service clients and \$2,264 for SAAP-Families & General services clients.

Table K4: Cost offsets by homelessness program – homelessness in prior year

	Panel A	. SAAP-D	V & single	women -	- homeless	in year prior	Panel B. single men – homeless in year prior					
	NO		YES		Difference	e/person	NO		YES		Difference	e/person
	Ave Occur.	Ave Cost \$	Ave Occur.	Ave Cost \$	Annual Diff \$ (5)	Ave life outcomes \$ (6)=PV of (5) n=45, i=3 per	Ave Occur.	Ave Cost \$	Ave Occur.	Ave Cost \$	Annual Diff \$ (5)	Ave life outcomes \$ (6)=PV of (5), n=45, i=3 per
	(1)	(2)	(3)	(4)	=(4)-(2)	cent	(1)	(2)	(3)	(4)	=(4)-(2)	cent
Health Services												
GP	6.78	249	6.50	239	-10	-249	4.20	154	3.44	126	-28	-684
Specialist	4.00	225	2.50	140	-84	-2070	1.25	70	0.85	48	-22	-551
Nurse/other worker	4.10	42	2.50	26	-17	-405	1.42	15	1.41	15	0	-4
Visit to me	2.37	87	1.40	51	-36	-877	1.50	55	0.68	25	-30	-739
Hospital, ≥ 1 night	0.65	4448	1.13	7690	3242	79482	2.54	17269	0.57	3843	-13425	-329176
Casualty/emergency	0.96	347	1.60	578	230	5643	2.27	820	0.85	305	-515	-12617
Outpatient	2.46	293	0.78	92	-200	-4915	1.79	213	0.52	62	-151	-3710
Other health worker	0.82	54	1.93	127	73	1790	0.83	55	0.28	19	-36	-889
Ambulance	0.15	87	0.78	439	351	8618	1.69	959	0.67	380	-578	-14183
Total Health		5,833		9,382	3,549	87,017		19,610		4,823	-14,787	-362,554
Justice Services												
Victim assault/theft	1.16	1318	2.25	2,549	1,232	30,197	0.57	648	0.36	402	-245	-6,014
Stopped by police, street	0.54	81	0.23	34	-47	-1,163	0.25	38	2.40	362	325	7,960
Stopped by police, vehicle	0.35	21	0.80	48	27	667	1.20	72	1.72	103	31	760
Apprehended by police	0.08	12	0.69	104	92	2,262	1.96	296	0.96	145	-151	-3,713
Held overnight by police	0.00	0	0.28	74	74	1,807	1.69	454	0.50	134	-320	-7,856
In court	1.12	949	0.78	659	-290	-7,117	1.87	1591	0.75	639	-952	-23,352
Visit from justice officer	0.27	41	0.78	117	76	1,872	0.67	101	0.43	65	-36	-879
Nights in prison	0.00	0	0.00	0	0	0	6.19	1151	2.34	416	-735	-18,028
Nights detention /remand/												
correction	0.00	0	0.86	115	115	2,826	5.73	767	1.43	191	-576	-14,128
Total Justice		2,421		3,700	1,279	31,350		5,119		2,458	-2,661	-65,250
Total offsets					4828	118,367					-17,448	-427,804

Table K4: Cost offsets by homelessness program – homelessness in prior year (Cont.)

	Panel C	SAAP-fa	milies & g	general –	homeless ii	n year prior	Panel F. SHAP – homeless in year prior					
	٨	10	Y	ES	Differe	nce/person	٨	10	Y	ES	Differe	ence/person
	Ave Occur.	Ave Cost \$	Ave Occur.	Ave Cost \$	Annual Diff \$ (5)	Ave life outcomes \$ (6)=PV of (5) n=45, i=3	Ave Occur.	Ave Cost \$	Ave Occur.	Ave Cost \$	Annual Diff \$	Ave life outcomes \$ (6)=PV of (5), n=45, i=3 per
	(1)	(2)	(3)	(4)	=(4)-(2)	per cent	(1)	(2)	(3)	(4)	=(4)-(2)	cent
Health Services											1	
GP	7.75	285	4.68	172	-113	-2771	8.27	304	6.13	225	-79	-1935
Specialist	3.50	196	1.25	70	-126	-3099	2.80	157	1.75	98	-59	-1445
Nurse/other worker	1.75	18	2.16	22	4	103	5.05	52	4.25	44	-8	-203
Visit to me	2.75	101	1.58	58	-43	-1056	4.11	151	1.75	64	-87	-2125
Hospital, ≥ 1 night	1.13	7646	1.04	7071	-574	-14080	1.23	8349	1.60	10874	2525	61903
Casualty/emergency	2.50	902	2.64	953	51	1261	2.55	920	1.13	406	-514	-12595
Outpatient	2.13	253	1.92	228	-24	-598	3.14	373	2.70	321	-52	-1272
Other health worker	0.00	0	0.88	58	58	1416	2.70	178	2.75	182	3	81
Ambulance	2.13	1203	0.42	236	-967	-23703	1.23	695	2.13	1203	507	12441
Total Health		10,603		8,869	-1,734	-42,527		11,180		13,417	2,237	54,849
Justice Services												
Victim assault/theft	3.00	3399	0.79	891	-2,508	-61,490	1.27	1443	1.70	1,926	483	11,834
Stopped by police, street	0.25	38	2.11	318	280	6,870	0.09	14	2.20	332	318	7,808
Stopped by police, vehicle	0.25	15	1.57	94	79	1,938	1.27	76	2.40	144	68	1,656
Apprehended by police	0.00	0	2.53	382	382	9,372	0.09	14	1.70	257	243	5,957
Held overnight by police	0.00	0	1.46	391	391	9,587	0.09	24	1.50	402	378	9,259
In court	1.88	1594	2.24	1,907	313	7,680	0.73	619	1.90	1,615	996	24,426
Visit from justice officer	0.00	0	1.68	253	253	6,214	0.09	14	1.50	227	213	5,217
Nights in prison	0.00	0	2.87	533	533	13,078	0.00	0	2.68	498	498	12,222
Nights detention /remand/		_						_				
correction	0.00	0	2.44	327	327	8,025	0.00	0	3.44	461	461	11,302
Total Justice		5,046		5,097	52	1,273		2,204		5,862	3,658	89,681
Total offsets					-1,682	41,254					5,895	144,530

Table K4: Cost offsets by program – homelessness in prior year (Cont.)

	Panel H	I. PRSAP	– Homele	ss in year	prior		Panel F. TASS Re-entry Link – Homeless in year prior					
	NO		YES		Difference	e/person	NO		YES		Difference	ce/person
	Ave Occur. (1)	Ave Cost \$	Ave Occur. (3)	Ave Cost \$ (4)	Annual Diff \$ (5) =(4)-(2)	Ave life outcomes \$ (6)=PV of (5) n=45, i=3 per cent	Ave Occur. (1)	Ave Cost \$ (2)	Ave Occur. (3)	Ave Cost \$ (4)	Annual Diff \$ (5) =(4)-(2)	Ave life outcomes \$ (6)=PV of (5), n=45, i=3 per cent
Health Services												
GP	5.33	196	6.90	254	58	1413	2.44	90	3.33	122	33	805
Specialist	2.91	163	2.75	154	-9	-219	2.06	116	0.00	0	-116	-2839
Nurse/other worker	2.65	27	5.88	61	33	819	3.19	33	0.00	0	-33	-809
Visit to me	1.04	38	2.75	101	63	1538	2.50	92	0.00	0	-92	-2254
Hospital, ≥ 1 night	0.93	6341	1.13	7646	1305	31993	0.88	5947	1.17	7921	1974	48406
Casualty/emergency	1.84	664	2.25	812	148	3633	0.25	90	1.17	421	330	8103
Outpatient	0.84	100	6.88	818	718	17597	1.00	119	0.00	0	-119	-2918
Other health worker	0.86	57	4.38	289	232	5681	3.06	202	0.00	0	-202	-4956
Ambulance	0.74	421	0.00	0	-421	-10318	0.44	248	0.00	0	-248	-6071
Total Health		8,008		10,135	2,126	52,137		6,936		8,464	1,528	37,467
Justice Services												
Victim assault/theft	0.19	218	0.25	283	66	1,611	0.64	729	0.75	850	121	2,959
Stopped by police, street	0.00	0	2.50	378	378	9,256	1.72	259	0.50	76	-184	-4,502
Stopped by police, vehicle	0.42	25	2.75	165	140	3,423	1.43	86	2.75	165	79	1,942
Apprehended by police	0.04	6	2.75	415	410	10,041	2.17	328	2.38	359	31	759
Held overnight by police	0.00	0	0.00	0	0	0	2.00	537	1.75	469	-68	-1,662
In court	0.46	388	1.88	1,594	1,205	29,552	2.22	1884	6.50	5,525	3,641	89,272
Visit from justice officer	0.42	63	0.00	0	-63	-1,548	5.51	831	1.13	170	-661	-16,218
Nights in prison	0.00	0	3.35	623	623	15,278	158.00	29388	158.00	29388	0	0
Nights detention /remand/												
correction	0.00	0	0.00	0	0	0	44.03	5900	44.03	5512	-388	-9,523
Total Justice		700		3,458	2,758	67,613		39,942		42,513	2,571	63,026
Total offsets					4,884	119,750					4,099	100,493

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