NSW Homelessness Action Plan Extended Evaluation
Greater Western Sydney HAP Domestic Violence Project Final Report
HAP Project 3.12

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Executive Summary

Introduction

In 2009 the NSW government released the *NSW Homelessness Action Plan 2009-2014* (HAP). This plan set the direction for state-wide reform of the homelessness service system in order to achieve better outcomes for people who are homeless or at risk of homelessness. It aimed to realign existing effort towards an increased focus on prevention and early intervention, including long-term accommodation and support. NSW HAP also specifically aimed to change the way that homelessness and its impact on the community is understood; to change the way services are designed and delivered to homeless people and those at risk of becoming homeless; and enhance ways of working across government, with the non-government sector and with the broader community in order to improve responses to homelessness. A range of homelessness support services have since been funded through either the National Partnership Agreement on Homelessness (NPAH) or NSW State funding.

One of the range of service models that have been implemented under HAP is *Long-Term Accommodation and Support for Women and Children Experiencing Domestic and Family Violence*. The link between domestic violence (DV) and homelessness is indisputable. Research confirms that housing affordability is a major issue for women who separate from violent partners and in 2012 DV was the most common main reason for seeking assistance from specialist homelessness services (SHS) in Australia. The effects of DV include undermining the victim’s financial security and thus their capacity to sustain suitable housing, as well as a range of potential psychological and physical difficulties for women and their children that can require long-term support. A specific response to this issue and the demand upon crisis and medium term temporary accommodation was therefore urgently needed.

This document specifically reports on the extended evaluation of the *Long-Term Accommodation and Support for Women and Children Experiencing Domestic and Family Violence Service* in the Greater Western Sydney region of NSW. The Greater Western Sydney (GWS) project is entitled the Domestic Violence Support, Western Sydney Service (DVS WSS)- hereafter referred to as the GWS or DVS WSS ‘HAP DV Project’. The evaluation was undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC) within the University of New South Wales (UNSW).

Overview of service model and project included in this evaluation

The focus of this report is the Greater Western Sydney HAP DV project, encompassing the local government areas of Auburn, Bankstown, Blacktown, Camden, Campbelltown, Fairfield, Holroyd, Liverpool, Parramatta and Penrith which is auspiced by Wimlah Women’s and Children’s Refuge. The Greater Western Sydney project is one of three regional HAP DV projects providing women and children who have experienced or are escaping from domestic and family violence with appropriate, affordable housing, alongside an integrated support package that includes case
management and brokerage monies. Funding for the project was awarded to Wimlah in April 2009 for an initial three-year period.

The key service delivery component is the development and implementation of an integrated client case plan. The case plan delivers goal-directed, client-focused support and accompanying brokerage funding in order to: provide services and support; facilitate transition to independent living; enable training and education; and assist in building community connections. Specifically the project combines the following program elements:

- Access to social housing, or suitable private rental accommodation through the provision of the Start Safely Private Rental Subsidy\(^1\)
- Integrated case management support services
- Flexible brokerage funding
- Supported referral option for clients who don’t require case management from the project
- Community Services and Housing NSW are the lead government agencies for the HAP DV Program. Each of the three HAP DV Projects is delivered by a non-government auspice agency reporting directly to their regional Community Services office, as contract manager. A reference group consisting of regional project partners provides advice to the auspice agency on management and implementation issues. In addition, the existing Regional Homelessness Committees (RHC) meets regularly to plan and coordinate across a range of issues, including overseeing collaborative responses to HAP initiatives and other housing programs on offer.
- In Greater Western Sydney, a HAP DV coordinator was employed by the auspice agency to manage project implementation. Housing NSW ‘Access and Demand’ teams are the gateway for screening clients in relation to eligibility for housing products and a primary source of referrals. The service providers are the direct client support and case management workers from a range of local organisations, who access the HAP DV support packages on their clients’ behalf. In addition, the model includes a requirement for the auspice agency to convene local Coordination Groups (CGs) comprising of Specialist Homelessness Services, mainstream services and partner government agencies in the local government area. In Greater Western Sydney these coordination groups concentrate on networking and information sharing across the service sector.
- **Evaluation methodology**

The evaluation is a mixed-method inquiry combining a synthesis of service monitoring data with qualitative interviews. Ethics approval was granted by the UNSW Human research ethics committee (HC12442) and data collection was subsequently conducted over four months, between September and December 2012.

\(^1\) Start Safely is a rental subsidy for women and children escaping domestic violence who are homeless or at risk of homelessness. Refer to section 1 of this report for further information.
The primary sources of data were project self-evaluation reports, administrative and financial documentation, client monitoring data, interviews with clients and staff of the project and interviews with key stakeholders. A total of 16 in-depth, qualitative interviews were conducted.

The project commissioned a substantial research report, *I’m safe, I’m home: Domestic Violence Support, Western Sydney Service - A Process Evaluation* (Cohen, 2012), which we refer to extensively in this report.

A systematic review and thematic analysis of this data has been applied, including reference against the current literature.

A limitation of the evaluation is its heavy reliance on self-reported information. In addition, only a small sample of clients (6) was accessible within the available time and it was not possible to contact those who had commenced engagement but then dropped out of the project. Long-term client outcomes were unavailable due to the short time-frame and in the absence of robust outcomes data and comparative measures, a reliable economic evaluation (cost-benefit analysis or cost effectiveness analysis) is not possible.

However, the potential for a biased sample as a result of these limitations is ameliorated by the fact that the evaluation participants have diverse roles and responsibilities in relation to the project and are located in separate parts of the service structure. Each participant was asked to comment on the operations of the other stakeholders and to provide their individual perspective of outcomes and issues. Further, extensive documentation of prior reviews and client feedback broadens the scope of the evidence. In the analysis of this multi-layered data there is strong consistency across all stakeholder comments and the statistical information and this validates the findings.

**Outcomes**

From January 2010 to June 2012, the project supported 324 clients and 422 accompanying children. The majority of these families were at imminent risk of homelessness and some were living in crisis accommodation. Every one of these clients was housed in long term accommodation and by far the majority had continued to sustain their tenancy on exit. In the 2011/12 financial year over 88% of clients who were assisted through the project had remained stable in their housing.

Brokerage funding linked to case management plans, enabled client access to critical resources at specific times of need. The funding was used for any goods and services that could not be

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2 These figures are taken from the June 2012 data portal report (clients) and self-evaluation report (accompanying children).

3 The 2011/12 financial year has provided the most complete and reliable data set, gathered when the project was well established and so forms the basis for many of the findings.
accessed through alternative means and were deemed necessary to prevent homelessness. This included equipment, specialist services, support to enable participation (variously in community study or work) and poverty relief. The top five categories of brokerage expenditure were: home establishment packs, safety and security items, removalist services, education/vocational goods and children’s items. Average expenditure per client in 2011/12 counting all project costs including operational costs, case management hours and brokerage was $3,941 per client, which is low to mid-range when compared with other client support services.

In terms of ‘non-housing’ outcomes, clients reported a significant improvement in their general wellbeing as a result of their engagement with the project and greater confidence in their ability to live independently. Women particularly felt more confident to manage their financial responsibilities and provide for their children. The project enabled their engagement in various formal and informal support networks and systems and this helped to reduce their sense of social isolation and begin to address issues of trauma, mental illness, and low self-esteem. A reignited sense of independence and optimistic outlook on life resulted in many women setting goals and embarking upon steps to achieve short, medium and long term aspirations for their career and overall future.

The homelessness service system has been enhanced by the work of the project in four key aspects: workforce skill development; increase in overall case-load capacity; closer collaboration and integration; and closing gaps in the provision of appropriate, timely support to prevent negative housing outcomes.

**Factors for success**

The evaluation found ten (10) key success factors for the model

1. A combination of program elements that mutually enhance one another
2. Ongoing, flexible case management with a shared DV/Housing focus
3. Brokerage aligned to the case plan
4. A housing focus but not housing constrained
5. Eligibility screening within Housing NSW
6. Inter-agency influence, education and knowledge exchange
7. Local adaptation of the overall program model
8. Strong management, coordination skills and practice expertise in the auspice agency
9. Additional resources for local service providers
10. Case management focused on client empowerment and learning to use the service system
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**Key challenges**

The following challenges were identified as detracting from the potential effectiveness of the HAP DV model overall:

1. Eligibility constraints and inconsistencies
2. The sharp division between ‘high’ and ‘low’ needs clients
3. Lack of housing availability and accessibility of public and private rental accommodation
4. Lack of flexibility regarding the duration of time support can be provided
5. Lack of acknowledgement of children

**Lessons learnt**

1. Flexible brokerage funding is a critical component of a sufficient and effective service response to meet the needs of women and children who are at risk of homelessness due to domestic or family violence.
2. Local control to enable flexible application of project resources is the most effective means of meeting client needs.
3. Access to the project would be greatly improved by the development of up to date DV screening tools and staff training in Housing NSW, to increase the speed and accuracy of initial approvals.
4. Meeting children’s needs is a significant issue within women’s capacity to sustain tenancies
5. Financial and other administrative procedures between the auspice agency and service providers need to be as streamlined as possible to minimise onerous additional work
6. The coordinator role can support a fast, consistent and well managed response to clients if key conditions are met
7. The eligibility criteria for HAP DV exclude some women who need access to the project and the specific criteria for high and low need packages do not appropriately reflect complexity of need. A review of these at the program level is therefore appropriate
8. Integration and collaborative practice happen most effectively when equally underpinned by two elements:
9. Shared accountability for outcomes
10. Financial resources managed at the local level
Identification of the long term outcomes of the HAP DV service model is not possible without a longitudinal study that includes wellbeing, self-efficacy and housing measures for women and their children. An extensive, comparative study of this nature would be a significant contribution to the literature and support the continuing development of the model.

In addition, case management skills and practices for working specifically within the DV/Housing nexus are not known. Workforce development programs could be developed from an examination of the most appropriate and effective case management skills and knowledge for this work.

Conclusion

The Greater Western Sydney HAP DV project effectively supports women and children to establish and sustain long-term housing and thereby prevent homelessness as a result of domestic violence. The combination of affordable housing with flexible case management and brokerage support is demonstrably successful. The evaluation has identified vulnerabilities in the model but where these are managed well, the outcomes appear robust.

Women report that the foundation of sustainable housing with intensive client support underpins their capacity to remain separate from the perpetrator and to sufficiently recover from the effects of the abuse in order to gain and begin to implement skills for independence. This finding suggests optimism for the ongoing effects of the project interventions.

It has not been possible for the current evaluation to measure long term outcomes for women or their children, but this could be a significant future research inquiry that would add to the evidence base for best practice in the field.
1 Introduction

1.1 Overview of HAP

In 2009 the NSW government released the NSW Homelessness Action Plan 2009-2014 (HAP). This plan set the direction for state-wide reform of the homelessness service system in order to achieve better outcomes for people who are homeless or at risk of homelessness. It aimed to realign existing effort towards an increased focus on prevention and early intervention, including long-term accommodation and support.

The NSW HAP also specifically aimed to change the way that homelessness and its impact on the community is understood; to change the way services are designed and delivered to homeless people and those at risk of becoming homeless; and to enhance ways of working across government, with the non-government sector and with the broader community, in order to improve responses to homelessness.

Under the plan there are three headline homelessness reduction targets:

- A reduction of 7% in the overall level of homelessness in NSW.
- A reduction of 25% in the number of people sleeping rough in NSW.
- A reduction of one-third in the number of Indigenous people who are homeless.

In order to achieve these targets the HAP initiatives include approximately 100 NSW Government-funded local, regional and state-wide projects. As at June 2012, 55 of these projects were funded through the National Partnership Agreement on Homelessness (NPAH) with the remainder being funded and implemented by the state Government.

All HAP projects are aligned to one of three strategic directions:

- Preventing homelessness: to ensure that people never become homeless
- Responding effectively to homelessness: to ensure that people who are homeless receive effective responses so that they do not become entrenched in the system
- Breaking the cycle: to ensure that people who have been homeless do not become homeless again

Ten Regional Homelessness Action Plans (2010 to 2014) were developed to identify effective ways of working locally to respond to homelessness and these provide the focus for many of the HAP projects.

HAP Evaluation Strategy

The HAP Evaluation Strategy has been developed in consultation with government agencies and the non-government sector. It involves three inter-related components, which are:
1. **Self-evaluations** – The purpose of self-evaluation is to gather performance information about each of the HAP projects across key areas in a consistent way and to collect the views of practitioners about the effectiveness of their projects.

2. **Extended evaluations** – The purpose of the extended evaluations is to analyse and draw conclusions about the effectiveness of 15 selected projects and the service approaches to addressing homelessness that those projects represent. The service approaches covered by the extended evaluations are: support for women and children escaping domestic violence; youth foyers; support for people exiting institutions; tenancy support to prevent evictions; and, long term housing and support.

3. **Meta-Analysis** – The purpose of the meta-analysis is to synthesise the aggregated findings from the self-evaluations and extended evaluations as well as other evaluations available regarding HAP activities.

The evaluation strategy will assist with measuring progress towards meeting HAP targets as well as provide evidence of effective responses and lessons learnt that should be considered in the future response to homelessness in NSW.

### 1.2 Overview of service model and the three projects included in this evaluation

The extended evaluation undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC) within the University of New South Wales (UNSW) focuses on the Long-Term Accommodation and Support for Women and Children Experiencing Domestic and Family Violence Project providing long-term supportive housing for women and children who have experienced domestic violence and who are required to leave their own home (herein referred to as the HAP project).

The project reports on three similar projects being implemented across the state. Each is delivered by a different non-government auspice agency and is located in one of the following regions:

1. **Greater Western Sydney** - Long term accommodation and support for women and children experiencing domestic and family violence in Western Sydney. Encompassing the local government areas of Auburn, Bankstown, Blacktown, Camden, Campbelltown, Fairfield, Holroyd, Liverpool, Parramatta, Penrith – implemented by Wimlah Women’s and Children Refuge.

2. **Hunter Region** - Support services to assist women escaping domestic violence maintain tenancies in the Hunter region. Encompassing the local government areas of Newcastle, Lake Macquarie, Port Stephens, Dungog, Maitland, Cessnock, Muswellbrook, Singleton, Upper Hunter - implemented by NOVA Women’s Accommodation and Support Inc.
3. *Illawarra Region* - Support services to assist women escaping domestic violence maintain tenancies in the Illawarra region. Encompassing the local government areas of Wollongong, Shellharbour, Kiama and Shoalhaven - implemented by Wollongong Women’s Refuge.

The focus of this individual project report is the Domestic Violence Support, Western Sydney Service (DVS WSS) HAP project targeting the area of Greater Western Sydney. All three projects have been included in the HAP extended evaluations and a separate report for each evaluation has been produced. A fourth, overarching report draws together the findings in relation to the HAP DV projects’ service model as a whole. Whilst there were adaptations to the specific implementation of each project in response to local issues, the findings across all three were consistent in terms of overall service model, client outcomes, partnerships and impacts on the service system. This report therefore contains similar methodological and process issues and a number of findings that are repeated in the Illawarra and Hunter reports.

**HAP DV project service model**

The three HAP DV Projects provide integrated housing support for women and children who have experienced domestic and family violence and who are homeless or at risk of homelessness. Specifically the projects combine the following program elements:

- Access to social housing or suitable private rental accommodation through the provision of the Start Safely Private Rental Subsidy
- Integrated case management support services
- Flexible brokerage packages

In delivering the projects, the non-government auspice agencies in each region are responsible for the implementation of three key strategies:

1. **Integration of Service Provision:** There are a suite of domestic violence support programs operating across NSW and each auspice agency is responsible for linking with and building on the existing DV local service system. However, providing an integrated service also involves forging partnerships with mainstream services in order to provide assistance with identified client needs including amongst other things housing, health, mental health, drug and alcohol difficulties, education, training and employment, pregnancy and parenting support, financial counselling, child support and legal advice.

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4 ‘Start Safely’ is: *a subsidy to provide short to medium term financial help to women and women with children who have experienced domestic or family violence so they can secure private rental accommodation and do not have to return to the violent situation* (Housing NSW 2012). To access this subsidy, women escaping DV must first of all be deemed eligible for social housing which involves an income and assets test. They must also be homeless or at risk of homelessness, be able to demonstrate an ability to afford and sustain a tenancy at the end of the subsidy period (24 months) and be willing to receive support services where relevant.
2. **Coordination and Case Management**: Each auspice agency is responsible for maintaining the overall budget; coordinating partner agencies to implement collaborative case management; joint service planning; project data collection; and administration. The auspice agency coordinates cross-agency supports to clients and allocates support hours and brokerage funding based on client needs identified in a formal case plan.

3. **Brokerage**: Brokerage packages consisting of fixed levels of funding to meet specific client needs are available to support successful implementation of case plans managed by the service providers. This brokerage enables access to services that are otherwise unavailable and supports sustainable long-term housing outcomes. The service provider is responsible for expenditure of brokerage, case planning, case management and coordination.

Through these activities the HAP DV projects address the following objectives:

- To improve women and children’s safety
- To reduce the length of time families who have experienced domestic violence spend in crisis accommodation services
- To increase housing options for women and children who have experienced domestic violence by providing integrated support services to women to improve their ability to access the private rental market and maintain their tenancies.
- To increase social housing options for women and children who have experienced domestic violence by providing integrated support services to women to improve their ability to maintain social housing tenancies.
- To increase collaborative service delivery across government agencies in responding to homelessness.
- To identify and resolve impediments to the effective provision of tenancy support services and make recommendations to reform the existing service system in the longer term
- To reduce turn-away rates from domestic violence crisis accommodation services.

**Project Governance**

Community Services and Housing NSW are the lead government agencies for the HAP DV Program. Other government agency partners are the Office for Women’s Policy and NSW Health. Each of the three HAP DV Projects is delivered by a non-government auspice agency reporting directly to their regional Community Services office, as contract manager. A reference group consisting of regional project partners provides advice to the auspice agency on management and implementation issues. In addition, the existing Regional Homelessness Committees (RHCs) meet regularly to plan and coordinate across a range of issues, including overseeing collaborative responses to HAP initiatives and other housing programs on offer.

The service providers for each project are the direct client support and case management workers/organisations who access the HAP DV support packages on their clients’ behalf.
Housing NSW ‘Access and Demand’ teams are the gateway for screening clients in relation to eligibility for housing products and a primary source of referrals.

In addition to the above structure, the model includes a requirement for the auspice agencies to convene local Coordination Groups (CGs) comprising eight to ten members from Specialist Homelessness Services, mainstream services and partner government agencies in the local government area. These groups are intended to provide assistance to:

- assess case management brokerage applications from referring agencies / services
- input to the development of a coordinated case plan for a referred client
- identify barriers to sustaining housing in the longer term

Amendments to some aspects of this original governing structure have occurred in response to local conditions and working relationships. The current individual governance arrangements for the GWS HAP DV project are outlined in detail in Section Three of this report.

**HAP DV within the service system**

Within an overall service system response to homelessness, the HAP DV projects provide a uniquely tailored intervention that is specifically designed to address domestic violence as a causal factor for homelessness. In common with other HAP projects, they offer a combination of case management and brokerage support to a target group that is highly vulnerable to homelessness. The HAP DV projects also build on the expertise of the women’s refuge movement and specialist DV services. In this sense they are aligned with other HAP projects, whilst also utilising specialist DV resources and expertise.

The particular purpose of the HAP DV intervention within the broader network of DV and homelessness supports is to enable long term, safe and independent living arrangements for women and their children escaping domestic violence and more particularly, to establish sustainable tenancies. The projects may work in collaboration with or as a ‘next stage’ following on from crisis, short and medium-term accommodation responses available from specialist homelessness services (SHS). They are a homelessness prevention strategy and not intended as more general DV support services, unconnected to housing goals.

There are two other initiatives that occupy a similar position in the NSW service system and these are the *Start Safely Private Rental Subsidy* (referred to in section 1.2) and *Staying Home Leaving Violence* (SHLV). A brief description of these, including an exploration of the relationship between each of them and the HAP DV projects is provided in the overarching evaluation report (Breckenridge et al 2013).

The unique components of HAP DV are the provision of more intensive, flexible and targeted support than any other DV support project currently in place. It achieves this through its capacity
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to ‘buy in’ specialised services; to provide highly flexible financial and material support; and to host case management within the most appropriate organisation. Evidence of the efficacy of this model is indicated throughout this report.

Project Budget

The formal service agreement for the HAP DV projects is monitored and managed by Community Services, within the Department of Family and Community Services of the NSW Government. This service agreement indicates fixed-term funding of $640,000 per annum over three years. Therefore the accumulative, total planned 3-year budget per project is almost two million dollars ($1,920,000). The annual funding covers operating costs and staff salary for the auspice agency, plus case management and brokerage costs for a target of 20 low need and 10 high need packages of direct client support.

High needs packages include up to $19,800 for case management hours, plus brokerage funding of up to $4,000 to support women and children to maintain social housing tenancies. The total support package for high needs clients is therefore $23,800.

Low needs packages include up to $8,480 for case management hours, plus brokerage funding of up to $1,500 to support women and children to maintain private tenancies. The total support package for low needs clients is therefore $9,980 (this amount is in addition to the Start Safely Private Rental Subsidy). Section Five of this Report provides further analysis of funding and expenditure for the Greater Western Sydney HAP DV project.

1.3 Key contextual factors from the literature

An understanding of the experience and impacts of domestic violence is essential to assist in the design, delivery and evaluation of DV homelessness programs. The unique characteristics of domestic violence, including in particular the external variable of perpetrator tactics and the long-term personal effects of living in fear, are central to the likelihood of success for program strategies. It is now commonly accepted that the development and support of a greater range of housing options is critical to keeping women and children housed and safe (Spinney and Blandy, 2011). Increasing awareness among DV and housing workers that domestic violence can lead to long-term homelessness for some women and their children, combined with a demonstrated lack of affordable medium and long-term housing options has encouraged policy makers and practitioners to re-consider the range of services which may best reduce the risk of homelessness when women leave their violent partner (Coy and Kelly 2011; Healey, 2009). The UNSW evaluation team has identified four key themes from the available literature that highlight contextual issues relevant to this evaluation. These are that firstly, DV is a common experience; that the effects of DV include multiple mental and physical difficulties that can be both acute and chronic, requiring long term support; that the link between DV and homelessness is indisputable; and that DV effects women’s financial security and long term capacity to sustain housing. In this section we present
select evidence to demonstrate these issues. A more comprehensive review of the literature is available in the overarching final evaluation report (Breckenridge et al 2013).

Theme 1 – Domestic violence is a prevalent issue. In Australia and Internationally a substantial number of women and children report incidents of violence from an intimate partner

- The Australian Bureau of Statistics’ Personal Safety Survey (2006) found that of the 4.7% of women who reported physical assault in the 12 months prior to the survey, 31% were assaulted by their current or previous partner (p. 9).

- The Australian component of the International Violence Against Women Survey (IVAWS) found that over one-third of Australian women experience physical, sexual or psychological violence, or threats from a partner or ex-partner during their lifetime (Mouzos and Makkai, 2004)

- In Australia, one in four children witness or live with domestic violence (Spinney & Blandy 2011; Desmond 2011).

- The World Health Organisation’s multi-country study of women’s experience of domestic violence shows that in most sites between 20% and 33% of women reported having been abused by their partner in the previous twelve months (Garcia-Moreno et al. 2005, p. 83).

Theme 2 – Domestic Violence can result in multiple physical and mental health difficulties which may require immediate intervention as well as longer term support

- VicHealth (Donovan and Vlais, 2005) identified violence perpetrated by a partner as the leading contributor to death, disability and physical illness in women aged 15 to 44, constituting a greater risk than other acknowledged risk factors such as high blood pressure, smoking and obesity.

- Domestic violence can also increase women’s long-term risks of a number of health and psychological problems including injury, chronic pain, drug and alcohol abuse, disability, and depression (Campbell, 2002; Heise, Ellsberg & Gottmoeller, 2002).

- An Australian representative study of women who report gender-based violence found that these women were more likely to experience mental illness over the course of their lifetime, with risk of mental illness increasing for women with multiple exposures to gender-based violence (Rees et al. 2011).

- Children can also develop psychological difficulties from living with or from directly experiencing violence in the family home (Kennedy et. al. 2010).

- A recent longitudinal study found that women affected by intimate partner violence faced higher health costs than women with no history of intimate partner violence, not only
Marcus and Braaf (2007) found that many studies report heightened or differential levels of risk and vulnerability for women from different groups such as Indigenous women, women from culturally and linguistically diverse backgrounds and women with disabilities.

Theme Three – The link between women’s homelessness and DV is undeniable

- In the three most recent NSW Specialist Homelessness Services (SHS) quarterly reports, domestic and family violence was the most common main reason given for seeking assistance from specialist homelessness services in Australia (AIHW 2011a, 2011b and 2012).

- In the year 2010-11 women with or without children commonly sought assistance from SHS because of domestic violence and to address this they often required personal support services including specialist counselling (AIHW 2012).

- A Supported Accommodation Assistance program (SAAP) high and complex needs census (Commonwealth of Australia 2010) identified the 13 most common SAAP client needs. The top three were housing difficulties, money management/financial difficulties and exposure to/effects of violence.

- From the broad suite of support services offered by women’s refuges it remains the case that most requests for accommodation assistance by women from these services are unable to be met (AIHW 2010a; Baker, Billhardt, Warren Rollins & Glass 2010).

- Research confirms that housing affordability is a major issue for women who separate from violent partners (Chung et al., 2000; Tually et al., 2008).

Theme Four – Domestic violence often dramatically affects women’s immediate and ongoing financial security and thus, their capacity to maintain stable housing

- Access Economics (2004, p. vii) proposes that individual victims of DV bear the largest cost burden of this form of violence. In 2002-03 they estimated of the $8.1 billion total costs to society as a whole, victims contributed $4.05 billion (50%)

- Domestic and family violence affects women’s ability to work and to look for work because of trauma, fear for their safety at work and instances of stalking and violence at work by the perpetrator (Braaf & Barrett Meyering 2011).
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- Women are more likely than men to experience substantial financial hardship after separation from their partner due to a number of factors, including their disadvantaged position in the labour market, the fact that women often retain custody of children (Beer et al., 2006; Smyth and Weston, 2000) and related lengthy and multiple legal battles. Ongoing health issues, including the need for counselling for both women and children can all place a further drain on finances (Braaf and Barrett-Meyering 2011).
2 Evaluation Scope and Methods

2.1 Ethics process

This evaluation research has approval from the UNSW Human Research Ethics Committee, HC12442.

2.2 Summary of methods - administrative data accessed, stakeholder interview process, including clients of the service

The primary sources of data for the evaluation were:

- Formal self-evaluation reports as required by Housing NSW
- Administrative data, including client numbers and outcomes, budgets, process records, promotional materials, client case plans, service provider contracts etc
- Interviews with clients
- Interviews with auspice agency staff
- Interviews with key stakeholders including client support service providers; Community Service lead agency staff; regional homelessness committee members

The project commissioned a substantial research report, *I'm safe, I'm home: Domestic Violence Support, Western Sydney Service - A Process Evaluation* (Cohen, 2012), which we refer to extensively in this report.

Participants who were directly recruited to the project evaluation were Housing NSW lead agency staff; partner agencies; and the auspice agency staff. We were unsuccessful in our attempts to managers of the HAP DV regional contract within Community Services. These participants provided assistance in identifying and recruiting the service providers and individual clients. They were asked their views on the strengths of the project, the experiences of implementation, benefits to clients and recommendations for improvements. The interviews were designed to clarify and extend the information provided in the project self-evaluation reports. Illustrative quotes from interviews are presented throughout this report. The interviews have been de-identified and all names are pseudonyms.

Clients were invited to take part in the evaluation via an email or phone call from participating agencies. A recruitment letter can be found at Appendix C. They could elect to attend a face to face or telephone interview in which they were asked questions about their demographic characteristics, experience of the program, any benefits it has brought them and how it could be improved. Interview schedules can be found at Appendix D.
Table 2.1: Numbers of interviews undertaken

<table>
<thead>
<tr>
<th></th>
<th>Clients</th>
<th>Service providers</th>
<th>Other stakeholders&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater Western Sydney</td>
<td>6</td>
<td>8</td>
<td>2</td>
<td>16</td>
</tr>
</tbody>
</table>

<sup>a.</sup> Private Rental Brokerage Specialists and other lead agency staff.

2.3 Limitations

A number of considerations limit the scope of this evaluation as described below, followed by a discussion of the impact of these concerns.

Firstly, whilst multiple data sources have been drawn upon, these largely rely on self-reported information collected from the project monitoring reports, self-evaluations and interviews with a range of stakeholders who were directly connected to the implementation of the project. This means there were limited opportunities for perhaps more independent, critical views to be heard. Local service providers not involved in project implementation were invited to comment during a meeting of the regional homelessness committee, but none pursued the subsequent offer of a more in-depth, individual interview.

Secondly, only a small number of clients were accessible within the timeframe of the data collection period and they provided information through personal interviews. To extend this client data, two years’ worth of collated written client feedback was also taken into account. This provided valuable insight into client experiences and conditions, however it was not possible to contact clients who had dropped out of the project. It is probable, as with all evaluations where the workers are the recruitment gateway, that the auspice agencies may have selected clients with a positive experience of their project.

Thirdly, long-term client outcomes are unavailable due to the constraints of the short evaluation timeframe and the project being in operation for only two and a half years.

Fourthly, while we have provided an analysis of project costs and qualitative descriptions of the use of resources, the absence of robust outcomes data and comparative measures means that an economic evaluation (cost-benefit analysis or cost-effectiveness analysis) is not possible. Section five of this report addresses these issues in full.

Discussion

The potential for a biased sample as a result of these limitations is ameliorated by the fact that the evaluation participants have diverse roles and responsibilities in relation to the project and are located in separate parts of the service structure. Each participant was asked to comment on the operations of the other stakeholders and to provide their individual perspective of outcomes and issues. In the analysis of this multi-layered data there is strong consistency across all stakeholder comments and this validates the findings.
The specific limitations of client data collection are best appreciated by a contextual understanding of the inherent difficulties in collecting data from women escaping domestic violence. Client safety and confidentiality are crucial elements of domestic violence service provision and it is therefore essential for evaluation strategies to be tailored to ensure these elements are respected in order to minimize any potential risks to services or clients. A related difficulty which can affect the collection of data from domestic violence victims is that service providers may be legitimately concerned that the process of participating in an evaluative interview can cause unwarranted anxiety or distress to their clients – particularly where there is on-going harassment and client safety remains problematic. Both difficulties may understandably affect the selection of clients for interviews and shape data collection. Further, the clients of this project had provided regular comments through a comprehensive written feedback process integrated into the project model, including face to face interviews with the project coordinator. Staff protecting clients from the fatigue of being ‘over evaluated’ or the clients themselves opting out of repeated feedback processes must be taken into consideration.

It is also important not to overestimate the power of workers/projects alone to shape client outcomes in any evaluation of DV service provision. In reality, the final outcomes for women and children leaving DV are primarily determined by on-going perpetrator harassment and violence which may also necessitate lengthy and expensive interactions with the criminal justice system. Sullivan (2011) emphasises that evaluations must acknowledge that patterns of re-victimisation which critically affect client outcomes are the fault of perpetrators and not clients, workers, or services.
3 Project Description

3.1 Service origins and description

NB: The material in this section is from the self-evaluation report (SER) and process evaluation commissioned by DVS WSS (Cohen, 2012). The project benefited from the development of a program logic and the articulation of a conceptual framework, which were components of the process evaluation.

The DVS WSS program specifically addresses DV and the impacts of DV on women and children, by providing long term personalized support to supplement housing products (social housing or start safely), and thus assist women to be able to maintain tenancies for the duration of the program and beyond.

The program not only addresses short term needs, (household establishing and establishment in new areas including schooling), but works to address individual needs that contribute to longer term and repeat homelessness, by helping participants enter education, employment, develop living skills, and specifically address self efficacy and self esteem issues that are a direct outcome from violence and that specifically contribute to homelessness.

By assisting children accompanying women, the program further contributes to preventing long term homelessness of children, assisting them to remain in education, make appropriate networks and address any impediments to learning and community participation.

Note: there has been confusion since the program started as to the actual number of women who should be supported. Housing NSW believed it was 30 for all three years; Community Services believed it was 30 women per year. The Service Specifications were unclear. As one third of these women were to be provided houses from Social Housing providers, it was important to know the numbers as the number of properties available dictated the number of Social Housing clients who could be assisted. DVS WSS decided to interpret this as 30 women per year, and have had to work hard to get the additional social housing properties to meet the number of high needs social housing clients. (Cohen, 2012: 47)

The Trans-Theoretical Model of Change (TTM), also known as the Stages of Change Model, used to guide DVS WSS, theorises that health behaviour change involves progress through six stages of change in a unidirectional cyclical fashion, rather than linear fashion. They may repeat stages, and regress to earlier stages. The stages include:

- pre-contemplation,
- contemplation,
- preparation,
- action,
According to the process evaluation, engagement is a greater predictor of success in graduating from the program and establishing a new life than any other factor. Readiness to engage in the program equates to being in the Contemplation or Action stages of the TTM model, and failure to engage or a drop off in engagement, when it is accompanied by evidence that the woman is not paying rent or using avoidance strategies, is seen as evidence that the client may not succeed in this current attempt. This is not seen as evidence that all women receiving Start Safely require case management, but merely acknowledgement that if there are signs that the woman will not be able to maintain her tenancy, then, accepting help and engaging with case management do become necessary. (Cohen, 2012: 18).

Participation in a wraparound service is non-compulsory for the majority of DVS WSS clients. While all clients who are in Social Housing must participate in case management with a DVS WSS support service, participation with a support service (DVS WSS or other service) is optional for Start Safely subsidy recipients (Cohen, 2012: 48). The wrap around support service is an option for Start Safely clients, but compulsory for the social housing clients of the DVS WSS program. DVS WSS respects women’s rights to opt out of support, but when women do choose to, or are mandated to, strength based case management with behavioural agreements are seen as important indicators of ultimate success (Cohen, 2012: 18).

Brokerage is tailored to the individual’s needs as they see them. Women who do not need ongoing case management are eligible for Supported Referral. This is one off brokerage to assist with establishment issues after leaving domestic violence. Women are offered ongoing support with quarterly follow ups to check that their circumstances mean they still don’t need additional support.

Case management and client interaction is individually based, and will differ when the client is in crisis and when the client is making day to day changes

DVS WSS provides payment based on the hours provided by each service. This varies based on the needs of each client. Some Services charge regardless the full hours, other don’t charge back at all because they may have only had a limited contact so didn’t keep notes; and others charge for the exact time; and others don’t have a culture of charge back and the Coordination Officer needs to fill in the invoices to ensure hours are charged. This payment assists to ensure that Case management is provided for the full period of the program, which may be greater than is usual at that Service. This provides a significant impact to individual Services as they can hire more staff and meet the needs of more clients. (Cohen, 2012: 64).

Supported Referral provides one off Brokerage without additional or ongoing case management. This is for low needs Start Safely clients, who choose to opt out of participating in the wrap around support but who still require some financial assistance to re-establish themselves after leaving a
domestic violence situation. It needed to have the same level of accountability as the other brokerage, namely that brokerage needed to be consistently provided to women, and linked to a referral process and case plan that specifies how it relates to domestic violence. This became even more urgent as Supported Referral brokerage fills a real gap in the sector; the number of requests for assistance from non DVS WSS Regional Coordination Group members began to rise; a greater number of requests were coming that didn’t discuss DV. ‘Now we’ve found that some services are sending requests in for clients that are not so well known to them. There is no acknowledgement of the DV or dealing with the impacts of DV. So now all one off Brokerage needs a case plan with it.’ (Cohen, 2012: 64)

3.2 Aims and objectives

The original project brief named seven objectives:

1. Improve women and children’s safety.
2. Reduce the length of time families who have experienced domestic violence spend in crisis accommodation services.
3. Increase housing options for women and children who have experienced domestic violence by providing integrated support services to women to improve their ability to access the private rental market and maintain their tenancies.
4. Increase social housing options for women and children who have experienced domestic violence by providing integrated support services to women to improve their ability to maintain social housing tenancies.
5. Increase collaborative service delivery across government agencies in responding to homelessness.
6. Identify and resolve impediments to the effective provision of tenancy support services and make recommendations to reform the existing service system in the longer term.
7. Reduce turn away rates from domestic violence crisis accommodation services.

3.3 Target group

The target group is women and children who are homeless or at risk of homelessness due to domestic or family violence. The program has income and other eligibility tests (Section 3.4).

3.4 Service model

What services offered

The key service delivery component, described in the service specifications, is a coordinated case plan. This plan delivers client focused case work, including brokerage, to provide services and support; facilitate transition to independent living; training and education; and assist in building community connections.
The process evaluation report describes the program’s two main strategies:

1. Service Coordination strategy
2. Wrap Around Service strategy

Under the first strategy: Service Coordination, there are two main activities:

Coordination Officer. This role coordinates the entire program; provides secretariat to the five coordination groups; reviews case work; reports statistics and other issues to funding body; manages budget and brokerage; provides mentoring/ training; raises awareness of the program; recruitment of new Services; and troubleshooting.

Regional Coordination Groups, which meet quarterly, with the purpose of coordinating the support recipients within each region.

The second strategy is Wrap-Around Service. This program offers an individually tailored wrap around service that may compose brokerage and/or case management.

Case Management: Through case management, clients are provided with a 12 month ‘strength based’, individually tailored case management plan, which helps women identify and prioritise needs, develop and action strategies to re-establish themselves post domestic violence and ensure they can maintain a tenancy post program. The case management aims to raise awareness of and provide access to a range of services.

Brokerage: Individually tailored brokerage that assists the client with their case plan is available to support Case Management in a wide range of areas, with the main criteria being if the payments will assistance support the client in sustaining her tenancy. The eight broad categories of brokerage for all three activities under this program are: Financial assistance; Medical/ Dental; Mental Health; Legal; Education/ Training; Home Establishment; Childcare; and Other.

Supported Referral: provides one off brokerage without additional or ongoing case management. This is for low needs Start Safely clients, who choose to opt out of participating in the wrap around support, but who still require some financial assistance following leaving a domestic violence situation. In December 2011 the decision was taken to leave the option of case management open for women receiving supported referral in recognition that the circumstances could change and because a larger number of requests for one off brokerage were being received that did not specify if DV was involved or how the brokerage would assist the client. In some cases supported referral is offered because clients are already receiving support, including a case plan, from Staying Home Leaving Violence.

Group activities that were developed or selected from already developed programs to be offered to the participants as a group based on widespread need. The group activities that have been run so far include: The 123 Drive Program; Safety and Security Program; Handy Women’s Maintenance
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Program; Awareness raising with Real Estate Agents; In Charge of My Money - Financial literacy and budgeting program.

The Hunter and Illawarra HAP projects also include a number of these elements: coordination officer; regional coordination groups; case management; and brokerage. DVS WSS is the only site of the three to have developed supported referral as part of its suite of services.

Assessment and referral processes, eligibility criteria

Client eligibility criteria have been pre-determined by the original HAP Program specifications and maintained by the DVS WSS project. A client is eligible for the project if she is homeless (or at risk) and:

- Is assessed and approved by Housing NSW for priority social housing or for the Start Safely Private Rental Subsidy; and
- Is escaping domestic violence.

If a client meets these first two criteria and wishes to access the HAP DV project she will be referred to the DVS WSS coordinator for further assessment. These referrals can come directly from Housing NSW or from alternative sources, but in the latter case the client must still be assessed and approved by Housing NSW.

Following this, the client will then be accepted into the project if she:

- Has a service provider able to develop and manage her case plan over twelve months;
- Cannot be helped through alternative funding;
- Would have difficulty obtaining and sustaining a tenancy without support;
- Requires interagency collaboration and intensive support beyond the core business of existing services (for high complex support clients)

For those clients who nominate the option to receive case management their support over the twelve months includes (but is not limited to) home visits, transport to appointments, coordinated case management, advocacy, links to appropriate services (counselling, budgeting, childcare, employment and training etc) assistance to maintain their tenancy and management of the client’s allocated brokerage funding.

The eligibility criteria for the project exclude some categories of women experiencing domestic violence, such as those who do not meet Australian residency requirements; those with an income exceeding the Start Safely or social housing eligibility limits and those who have been approved for Start Safely but are unable to secure private rental accommodation due to a lack of affordable housing.

Some specific issues about eligibility appear to have arisen in the project implementation. These centre on the following concerns:

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5 Social housing and Start Safely have their own eligibility criteria which include income and assets tests.
1. **Women who have historically experienced domestic violence but are currently not in immediate danger.** Initially there was concern that Housing NSW eligibility criteria required women to be in current danger or to have documentary evidence of experiencing domestic violence in the recent past (six months). This approach overlooks the long term (and often accumulating) effects of domestic violence on women and children. Specifically the negative consequences for financial independence, psychological stress, continuing disruption to employment and education, child health and a range of other long term effects discussed in the literature.

2. **Women who seek help from Housing NSW but do not disclose their experience of domestic violence.** There were some concerns expressed that the Housing NSW Access and Demand teams may not have sufficient expertise and/or adequate screening procedures to identify domestic violence. In addition they may not recognise the appropriate level of complexity of need.

3. **Women who do not pass the income test for access to Start Safely or social housing.** This can occur as a result of their assets and/or joint income with a violent partner being above the required threshold. Such women may live in a jointly owned property where the violent partner will not leave or sell the property and they themselves cannot leave as they do not have the financial or material resources to live independently. They may also have inherited debt from their partners activities but appear to be asset rich.

The project has begun to address points 1 and 2 through negotiation with Housing NSW and has implemented some agreed changes to practice. Point 3 cannot be locally or regionally addressed without a review of the overall eligibility criteria within Housing NSW.

**Coordination structures**

NB: The material in this section is from the self-evaluation report and process evaluation commissioned by DVSWSS (Cohen, 2012).

The program is run over a very large geographic area. There are five coordination groups across the Western Sydney region, (Campbelltown/ Camden; Bankstown/ Auburn; Blue Mountains/ Hawkesbury; Blacktown/ Parramatta/ Penrith; Liverpool/ Fairfield/ Holroyd); each coordination group has between 6 and 10 services as members, or a total of 42 services.

Regional Coordination Groups meet quarterly, with the purpose of coordinating the support recipients within each region. A standard agenda includes updates on Start Safely; Community Housing; and each Service; discussion of problems; updates/ changes to Housing policy; and new group activities on offer are also advertised. These groups also hold Regional Allocation Meetings, to nominate and prioritise clients as new properties become available or as high need clients are nominated by Social Housing providers.

Regional Coordination Groups are comprised of different types of service provider. Some provide a full wrap around service including case management; others are members because they provide
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DV, Homelessness or women centred services that link in with the wrap around service and so may not be suitable to lead a DV collaboration.

**Partnerships, formal and informal**

The DVS WSS project supports and enhances local interagency partnerships, primarily through regional governance groups and the Regional Coordination Groups. It also pursues partnerships with key individual players in the client service system. Collaborative case planning and information sharing about good practice in providing support are outcomes of the informal partnerships that have arisen through the coordination/assessment groups.

Analysis of the evaluation data suggests the necessary cross-sector negotiation, liaison and governance built into the project has forged closer working relationships between a range of services, including particular integration with Housing NSW. The model requires specific engagement between the regional Housing office, domestic violence services and other case management organisations. This invites considerable effort on behalf of clients for an exchange of professional knowledge and collaborative problem-solving. Instead of individual workers struggling alone to advocate and negotiate the DV or homelessness service systems there are mechanisms for collaborative review and amendment to practice.

When the DVS WSS program began, the Coordination Officer met with relevant Housing NSW staff (Private Rental Brokerage Specialists [PRBS]) in the region to promote the program, and the development of these relationships has been a key part of the program. Interestingly, there is evidence that the knowledge of Housing products and policy by Housing NSW officers varies, and the Coordination Officer does play a role in educating Housing NSW staff, not only on Domestic Violence, but on Start Safely and the DVS WSS program. In regions where there is a stronger relationship and greater attendance at Regional Coordination Meetings by the PRBS officer, there are also more referrals and a larger number of Start Safely approvals than in other Housing NSW offices. The evaluation data suggest that the project has not yet achieved its desired level of integration and knowledge exchange with Housing NSW during the first few years of operation, but the structure has generated significant progress towards this in the long term.

Informal partnerships with real estate agents, where possible, have addressed the stigma associated with Start Safely and the reluctance of real estate agents to take on Start Safely.

**Brokerage – what it was used for and how it was applied**

The expenditure can be grouped into three main areas: namely, specialist services; items to enable participation; and equipment.

- **Specialist services:** There has been considerable need for brokerage to be spent on specialist services outside of the case manager’s role for things such as psychiatric and psychological assessments; medical ‘gap’ fees; legal bills etc. There are limited free or bulk-billed services in each of the regions, and what does exist may often have long waiting lists (such as child and mental health clinics).
adolescent mental health services). The timeliness of the specialist service is a critical issue in sustaining the client in long term accommodation and enabling children to settle and cope with the consequences of DV.

- Participation: Items that enable the woman to participate fully in life and attend support and education activities also take up a large part of brokerage funding, such as transport, child care, college fees, new clothing for interviews, driving lessons, and extra-curricular sport and recreation activities for children (e.g. Little Athletics).

- Equipment: white goods, furniture, home security, bedding, one-off items that establish a safe and functioning home environment.

This program offers brokerage for a wide range of areas, with the main criteria being if the payments will support the client in sustaining her tenancy. The eight broad categories of brokerage program are: Financial assistance; Medical/ Dental; Mental Health; Legal; Education/ Training; Home Establishment; Childcare; and Other. These have been developed based on the key areas that women need assistance following domestic violence, and to assist homelessness prevention, but also improve individual self-efficacy.

Unlike many other programs that offer small amounts of brokerage for a limited number of items with narrow criteria, the DVS WSS program provides brokerage for a wide range of areas, with the main criteria being if the payments will assist support the client in sustaining her tenancy. While this may appear to be very broad criteria, the way it is actioned in practice ensures it is kindly policed:

Brokerage includes funding for a set number of support hours each week for each allocated client, and individually tailored Brokerage funds for specific needs. Each service can approve brokerage up to $100 per person, but for amounts over this, they need to seek approval from the Coordination Officer and it must be linked to their case plan. The assumption, which is linked very much to respect and individually tailored assistance, is that if ‘it’ helps alleviate stress that is preventing the client from other daily essentials, then fixing this is a priority, but it is done with the least amount of money possible.

Most women are not asking for money or things, but when working with the Case Manager it is identified that there are things that are having a negative effect and others that have the potential to build the client and help them. When brokerage is given to assist with immediate stresses, it is used as part of assistance and discussion to ensure it doesn’t occur again.

3.5 Management and governance arrangements

The lead agency, Wimlah, and the Western Sydney Group that convene each Regional Coordination group benefits from their connection to the NSW Women’s Refuge Movement (WRM), which has a robust management structure for Refuges through the Working Party that provides advice and proven governance structure. Each refuge has a management committee that
reports to a central working party that manages the WRM, there is an external financial manager and external auditing is through a Ross Fowler and Co Chartered Accountants.

3.6 Staffing (numbers and roles)

The self-evaluation report provides the following information on staffing and roles.

Table 3.1: Staffing

<table>
<thead>
<tr>
<th>Designations</th>
<th>Number at time of report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time equivalent staff (total)</td>
<td>2.5</td>
</tr>
<tr>
<td>Designations</td>
<td></td>
</tr>
<tr>
<td>Managers / co-coordinators</td>
<td>2</td>
</tr>
<tr>
<td>Direct service staff - case managers</td>
<td>1</td>
</tr>
<tr>
<td>Administrative staff</td>
<td>1</td>
</tr>
</tbody>
</table>

The process evaluation reports that there is one full time Coordinator Officer. From the beginning, the position was always assisted by a part time book keeper to pay wages and other accounts; as the work has increased, a part time administration officer has been hired to manage the large amount of administration and reporting requirements of the role.

3.7 Budget allocation (funding amount, total as well as annual)

The project underspent its budget allocation in the 2010/11 financial year only.

Table 3.2: DVSWSS budget allocation Jan 2010 to June 2012

<table>
<thead>
<tr>
<th></th>
<th>2009-10 $</th>
<th>2010-11 $</th>
<th>2011-12 $</th>
<th>TOTAL $</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Partnership Agreement on Homelessness</td>
<td>79,139</td>
<td>656,000</td>
<td>671,481</td>
<td>1,406,620</td>
</tr>
<tr>
<td>Other Government funding (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal organisational contribution</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third Party Donations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other(specify source) Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL FUNDING</td>
<td>79,139</td>
<td>656,000</td>
<td>671,481</td>
<td>1,406,620</td>
</tr>
</tbody>
</table>
### Table 3.3: Expenditure

<table>
<thead>
<tr>
<th></th>
<th>2009/10</th>
<th>2010/11</th>
<th>2011/12</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL EXPENDITURE for this project (including Brokerage Services if applicable)</td>
<td>77,909</td>
<td>424,673</td>
<td>712,083</td>
<td>1,214,665</td>
</tr>
</tbody>
</table>
4 Analysis of Client and Service System Outcomes

4.1 Client Services and Outcomes

The self-evaluation and data portal reports provide the following information on client numbers assisted for the period up until June 30, 2012.

In this section the data record the number of individual clients who were assisted within each separate financial year from 2009-10 to 2011-12. In each 12-month reporting period there were new clients as well as clients continuing from the previous year.

As at June 30 2012, the total number of clients assisted to date was 324, plus 422 children. A total of 218 clients were supported at some time in the 2011/12 financial year.

Table 4.1: Clients assisted

<table>
<thead>
<tr>
<th></th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12\a</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>14</td>
<td>92</td>
<td>218</td>
</tr>
<tr>
<td>16-24yrs</td>
<td></td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>25-64 yrs</td>
<td>6</td>
<td>68</td>
<td>193</td>
</tr>
<tr>
<td>&gt;65 years</td>
<td></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Not known</td>
<td>8</td>
<td>19</td>
<td>12</td>
</tr>
<tr>
<td>ATSI</td>
<td></td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Other Australian born people</td>
<td>12</td>
<td>53</td>
<td>112</td>
</tr>
<tr>
<td>People born overseas, English speaking</td>
<td>2</td>
<td>26</td>
<td>72</td>
</tr>
<tr>
<td>People born overseas, non-English speaking</td>
<td>-</td>
<td>9</td>
<td>11</td>
</tr>
<tr>
<td>Not known</td>
<td></td>
<td>2</td>
<td>10</td>
</tr>
</tbody>
</table>

\a Total clients, not new clients. Includes clients who commenced support in 2010-11

Table 4.2: Homelessness status of clients prior to assistance

The self-evaluation report indicates that prior to receiving assistance the majority of clients were at risk of homelessness. Of the 282 women given assistance to maintain existing accommodation up until the end of the self-evaluation reporting period, 251 (88 per cent) maintained those tenancies.

6 These figures are taken from the June 2012 data portal report (clients) and self-evaluation report (accompanying children).

7 Reported as existing tenancies in the self-evaluation report; however this is an artefact of reporting, as the template required projects to select new or existing tenancies.
Numbers receiving different services

The project provides pre-defined high and low need support packages as described in other parts of this report.

Table 4.3: Support packages delivered

<table>
<thead>
<tr>
<th>Intensity of Assistance</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of clients to date</td>
<td>14</td>
<td>Low</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medium</td>
<td>64</td>
</tr>
<tr>
<td></td>
<td></td>
<td>High</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Low</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medium</td>
<td>104</td>
</tr>
<tr>
<td></td>
<td></td>
<td>High</td>
<td>25</td>
</tr>
<tr>
<td>Average support hours per week</td>
<td>NA</td>
<td>22</td>
<td>45</td>
</tr>
</tbody>
</table>

Housing outcomes

The self-evaluation and 2011/12 data portal reports provides the following information on housing outcomes for existing tenancy.

Table 4.4: Housing outcomes

<table>
<thead>
<tr>
<th>Number of people given assistance to maintain existing accommodation</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of them, number who maintained existing accommodation</td>
<td>14</td>
<td>82</td>
<td>155</td>
<td>251</td>
</tr>
<tr>
<td>Number of clients who were housed year to date</td>
<td>-</td>
<td>20</td>
<td>42</td>
<td>51</td>
</tr>
<tr>
<td>Social housing (public, AHO, or community housing</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private rental</td>
<td>14</td>
<td>72</td>
<td>176</td>
<td></td>
</tr>
</tbody>
</table>

The following elements of the project were especially critical to ensuring the establishment and sustainability of tenancies.
Brokerage assisted in maintaining tenancies

Access to brokerage funding was a crucial factor in establishing and maintaining a tenancy. A number of women were in rental arrears from a previous property and the HAP project helped to settle this outstanding debt, advocate on behalf of the client. An NGO service provider described the benefits of the project in collaboratively working with relevant services and utilising brokerage to help a client in rental arrears.

It wasn’t her fault actually; it was her partner who entered those arrears, so the private rental agency wasn’t able to do very much unless the arrears were paid off, so we were able to step in. But if she was to negotiate that herself, it would be impossible and which one agency can afford to pay $3500 out of any brokerage fund? So, you know, for us to be able to get housing, the estate agent and DVS to come into the picture to assist her, I think that’s testament to how important DVS WSS is (Therese DVS WSS service provider).

Most women on HAP left their home and their relationship without any belongings and the brokerage funding was largely utilised to fill the client’s new home with the necessary furniture and whitegoods so they could settle in and live comfortably. This was described as critical, because prior to HAP women described returning to the violent situations because they couldn’t secure housing, or even if they could, were unable to furnish it. In some instances where clients were approved tenancy prior to commencing start safely, the HAP program covered the bond and the first few payments of rent for the client. In other instances the brokerage funding has enabled women to continue to pay their rent even when they have a competing bill or urgent expense. As expressed by one client:

Without them, there were times that I couldn’t pay my rent and they did it for me because I fell behind and I had to buy things for the kids. Then the car payments came up and I had to pay the car payments and stuff like that. They would be there to pick up the pieces that I had destroyed. Without them I wouldn’t be having a roof over my head at the moment (Ashley).

Case management and brokerage combined to support women to make connections with community

The flexibility of the criteria for brokerage use and the approach taken by case workers to empower their clients to make decisions about how to best utilise it, enables women and children to engage in their community through social activities and learning opportunities, and in turn develop a sense of belonging to their local area. Building these community connections enhances the likelihood of women feeling safe and settled in their home and the motivation to maintain their tenancy. Further, the development of new skills not only opens up opportunities of employment, but contributes to opportunities to build relationships in the local area.
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- Flexible case management and brokerage provided ongoing support, focused on housing goals

The case management and support provided by the DVS WSS project is flexible (in levels of intensity); it is ongoing (can continue over a period of 12 months); and it is housing-focused but not ‘housing-constrained’ (meaning that services from areas outside of the housing sector - such as education, legal, health or counselling support - can be accessed using the resources of the project). The capacity for this type of case management and support to have varying levels of intensity across a broad range of issues over an extended period of 12 months, whilst being specifically structured around housing goals is highly significant. Rather than limiting the case manager to a narrow and brief range of possible interventions, it enables individually targeted responses drawing on diverse resources, so that long-term housing goals can be met. Whilst all sectors are expected to collaborate and coordinate their existing resources, the reality of waiting lists, priority populations, disputes about roles and responsibilities or differing funding goals can operate to prevent timely and appropriately integrated service delivery. The HAP DV service model breaks down these barriers.

The coordination groups in Western Sydney have assisted with this. As service providers emphasise the importance of ‘co-case management’, workers have since become more in tuned with other organisations in the region and are able to tap into the expertise and resources of their colleagues in another service to assist with specialist services outside of their professional knowledge, as reported by one service provider.

Some cases they do need others to participate and take part in their cases. So we have, for example, psychologists are part of our co case management, we have children's services, sometimes hospital if the children are in need of hospital. So it depends on the need of the case (Rita).

Further, one of the advantages of adopting this flexible, cross-sectoral approach is that human service workers who do not specialise in homelessness are alerted to the effects of a lack of affordable housing in NSW and the many challenges faced by clients in trying to maintain tenancies. This supports them to recognise the importance of safe, sustainable housing in relation to overall safety, wellbeing and ongoing independence and this was indicated in service provider responses. As such, it can be hypothesised that these workers are better equipped to continue to identify and address housing-related issues once the HAP DV package of support has ceased.

- Financial literacy and management

Women leaving violence often have limited financial management skills, because they have been denied access to money and may also have debt from the relationship. The HAP DV project provided access to professional financial counselling and to No Interest Loan Schemes (NILS). In addition the case management approach provided opportunities for women to plan and manage brokerage funds with support from the service provider. All of these strategies were important in
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enabling women to develop skills in maintaining a tenancy, including budgeting, managing existing debts and avoiding new, unsustainable debts.

DVS WSS provides the support and the platform for women to learn financial planning and to utilise their resources so they could feel as though they can support themselves and their children away from the perpetrator. One client comments how her DVS WSS support worker helped her alleviate her debt and learn to budget:

They’ve sat me down and we’ve done budgeting. Because I wasn’t allowed any money when I was in DV, I wasn’t allowed to do anything. I was like $17,000 in debt. So they’ve taken me to a point to become bankrupt and helped me do all that’ (Chloe).

Non-housing outcomes

The so-called ‘non-housing’ outcomes reported here are directly related to enabling the sustainability of long term accommodation for women and their children. Whilst the immediate need that is being met can be categorized as ‘health’ or ‘legal’ for example, it is the resolution of these needs that supports the financial capacity, self-efficacy and independent living skills to establish and maintain a tenancy.

Table 4.5: Clients assisted with non-housing services

<table>
<thead>
<tr>
<th></th>
<th>Number of clients directly assisted by this service</th>
<th>Number of clients referred to other services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial</td>
<td>21</td>
<td>177</td>
</tr>
<tr>
<td>Drug &amp; alcohol</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Education, training &amp; employment</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>Legal</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Mental health</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>General health</td>
<td>-</td>
<td>8</td>
</tr>
<tr>
<td>Family and relationship counselling</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other</td>
<td>-</td>
<td>26</td>
</tr>
</tbody>
</table>

The data in the following table is based on the self-evaluation report only as the data portal report does not capture this additional support, and so is incomplete for 2011/12.
Table 4.6: Clients assisted with additional non-housing support

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of clients directly assisted by this service</th>
<th>Number of clients referred to other services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family and parenting support</td>
<td>2009/10 2010/11 2011/12</td>
<td>2009/10 2010/11 2011/12</td>
</tr>
<tr>
<td>General counselling</td>
<td>- - 30</td>
<td>- - 26</td>
</tr>
<tr>
<td>Living skills</td>
<td>- - 133</td>
<td>- - 13</td>
</tr>
<tr>
<td>Personal development</td>
<td>- - 393</td>
<td>- - 22</td>
</tr>
<tr>
<td>Recreational activities</td>
<td>1 17 30</td>
<td>- - -</td>
</tr>
<tr>
<td>Other, please state: Cultural Specific</td>
<td>- 5 21</td>
<td>- - -</td>
</tr>
</tbody>
</table>

The benefits of the program described by clients include improved health and well-being. One client summarises how the program has made a difference to her life,

I think one by allowing me to obtain my independence again. To encourage my need with my learning, with working and they’ve basically given me my self-esteem back again and confidence to start living a normal life again (Renae).

The theme of feeling ‘normal’ again and a related sense of regaining confidence and independence recurred in many interviews with clients.

Overall DVS WSS clients are feeling a significant improvement in their general wellbeing. The project empowers clients to make decisions about how they can best improve their mental health for them and their children and this has been achieved through engaging various social groups and formal supports. These have helped to reduce social isolation and address issues of trauma, mental illness, and increase self-esteem. Self-help courses have also contributed to women acknowledging their own self-worth, as expressed by one client ‘with the self-help courses, it makes me – it helps me say, you know what, I can care about myself and I don’t have to feel guilty about that’ (Chloe).

Many women fleeing domestic violence have lost contact with their family and friends during the relationship and as a result are very socially isolated. In those instances where women were estranged from their families, some commented that through the encouragement and support provided through their HAP worker, they have begun to rebuild those relationships.

For many of the clients interviewed for this project DVS WSS has enabled them and their children to begin engaging in local activities, reducing their social isolation and regaining their sense of belonging in the community. Joining a sport or recreational group in the community has also helped to improve confidence and self esteem. As one client comments in regards to the sport...
team she joined, ‘that there gave me so much more confidence and I now have a voice...I wasn’t able to talk before. Everything I said I would get into trouble for and now I can talk’ (Ashley).

These supports have also helped women to manage the current and upcoming struggles associated with leaving their violent partner, such as attending court for various custody, child protection, and violence-related matters. Further, being supported to attend healthy relationships classes and domestic violence support groups has helped women to identify signs of potential violence in new partners, to break the cycle of choosing the same type of partner, or taking back the original perpetrator. Some women reported that living in safe and stable housing free from violence eliminated their fear of losing their children through legal proceedings and those who had already had their children removed by child protection services were in a better position to advocate for their return ‘I actually got more access with my children because I established myself now’ (Ashley).

Many of the women interviewed are involved with the Family Law Court; and some are going through the Children’s Court to have their children restored to their care. A key theme that came from the interviews with clients was that because of the support provided through the DVS WSS project they are feeling much stronger now to face the struggles ahead or to achieve their goals. This is illustrated by these comments from clients:

I think, you know what, that service has gotten me to a point where I’m a lot stronger, I’m a lot stronger than what I was... (Olivia).

I think it’s just shown me that I’m actually stronger than what I am and what I actually think I am (Ashley).

DVS WSS support workers prioritise educating women in financial literacy and living skills. One service provider describes a situation where a client asked multiple times for help with her electricity bill, and how they addressed this issue so that she would not be struggling to make these payments in the future.

So I actually got her on the Hardship Program with that and she’s actually paying the account off and she has money direct debited. So that was educating her financially how to manage her money, pay her power bills, without the stress and strain every couple of months when they come through (Barbara DVS WSS service provider).

Another service provider describes that their approach to implementing the program with clients is to prioritise skills and capacity building, rather than brokerage.

The client never walks away with the feeling of entitlement, this is all just bonuses. We teach a client to use the facilities around her, the services and resources around us to have her access what's around her, to implement into her
life, to better her life, or her quality of life, basically (Mary DVS WSS service provider).

The DVS WSS program also encourages women to improve their home maintenance skills so they are in turn less reliant on hiring someone to do handyman work, or asking their ex-partner for help. A home maintenance course was developed by DVS WSS in partnership with a hardware chain to teach women escaping domestic violence basic handyman skills and how to use a variety of tools for general household maintenance. These skills are essential in maintaining tenancy.

Western Sydney also rolled out a 123 Drive program in three regions through which a number of DVS WSS clients learned to drive and acquire their licence. Practically this was incredibly valuable for clients because without a driver’s licence their employment, housing, and community activities they could pursue would be highly limited. Learning to drive was also beneficial to women’s confidence and self-esteem. One service provider comments how learning to drive contributes to improving the overall wellbeing of women leaving domestic violence.

That creates really good outcomes for women who have experienced DV because they’ve lost their confidence, they feel overwhelmed, usually depressed or, you know, not able to face all these multiple challenges that our society puts up in front of them. So anything you can do that helps them feel more confident and independent again, creates very positive long term outcomes (Jasmine, service provider).

Not having to rely on their partner for financial and practical support has been a significant factor in maximising the likelihood that women will not return to the violent relationship. A number of service providers commented that the achievement of getting a driver’s licence for many of the women sparked the realisation that they were capable of learning new skills. With this a reignited sense of independence and optimistic outlook on life has resulted in many women setting short, medium and long term goals for their career and living prospects in the future, as one support worker comments,

I think it’s given them a bit of self-esteem, assertiveness, new direction where they actually want to set goals for themselves which I think is brilliant. And it shows their children as well that you can go out and do things, so I think that was very important too, their kids were very proud of them as well (Wendy DVS WSS service provider).

Most women have completed or are undertaking some form of education and training to increase their skills and enhance their career opportunities. The project supplied women with the practical resources to pursue their learning goals, however the encouragement and moral support that they had the intelligence to do it was also a key contributor in the success of this outcome. As commented by the following client, ‘it’s not just about the financial side of things, it’s about believing in me, because I didn’t believe in myself’ (Olivia). The client goes on to talk about the
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importance of having the support worker by her side throughout her studies, ‘I don’t think I could have, even if I had the money and someone said “Yes, go do it, here’s the money”, I don’t think, you know, without that support, I don’t think I could have got through it’ (Olivia).

The intensity of the case management support for the client is dependent on their needs. In some instances clients are kind of graduating to the DVS WSS program from a more intensive program such as Brighter Futures, and as such the case management needs to reflect this evolution in the client’s capacity to be independent. One client describes the importance of having the DVS WSS program to support her after exiting Brighter Futures, ‘it was really good to have somebody there when I was transferring over from Brighter Futures, because I relied heavily on my Brighter Future worker. They helped me transfer over and I’m doing a lot more on my own now’ (Chloe). This testifies to the capacity of the DVS WSS to provide more support to clients with complex needs than would otherwise be possible.

Many of the DVS WSS service providers have emphasised the importance of empowering the client to take charge of their own life and to develop their independence through the support of the program. One service provider explains how they achieve this end, ‘when you do case management with a case and the case is happy to take part in it, you are not doing everything for her. You’re just showing her choices and giving her some advice, and working with her to achieve her own goal (Rita DVS WSS service provider).

Those clients who are in a place in their lives that they feel strong enough to work on becoming independent appreciate this approach, ‘It’s been actually quite helpful about having someone to lean on, but not be carried by’ (Chloe). In some situations when those clients who are highly motivated to try and manage on their own, to pay a bill, for example, yet the support worker acknowledges that it would be too difficult, plans are developed so that in the future the client can meet their need without assistance

I try not to ask for any money. Because I’m trying to do it on my own. Then [my support worker] will say, “well clearly you can’t do it. We need to ask for help here. But [the DVS WSS program] isn’t going to help you next time, so let’s put it in place that we get help this time, but next time we can do it on our own” (Chloe).

Any other on intended or unintended outcomes for clients

The self-evaluation report notes that unintended benefits include:

- Clients getting and maintaining employment as a result of education and training provided by the project (arguably this is an anticipated benefit)
- Support to children via brokerage which has improved children’s well-being
- The impact on the service system of local projects, including the group activities of driving and home maintenance courses, and budgeting workshops coordinated by Mission Australia.
4.2 Impact of the project on preventing/reducing/addressing homelessness

The project addressed homelessness through offering assistance to women and children who had previously been in housing that was unsafe, insecure and inadequate. The vast majority of women who accessed the project were successful in establishing and maintaining tenancies, in secure and safe housing. Although there are methodological difficulties with attribution, in that the evaluation took place over a short period of time and the data available was largely self-reported by the projects, the service model is supported by a robust theoretical framework and this supports attribution of client outcomes to the intervention.

One of the biggest outcomes to come from the HAP project is that many women who have left their violent relationship are sustaining their tenancy and are not returning to the perpetrator, as commented by one service provider, ‘in the years with it running we’ve put a lot of women through successfully and they’re still sustaining their tenancies, and they haven’t gone back’ (Ingrid DVS WSS service provider).

Considerations for specific client groups

Members of the Coordination Group included representatives from a range of services with established experience of working with diverse client groups, including Aboriginal services. This structure enhanced promotion of the project to specific populations and offered the potential for supported pathways to the project. In particular a number of services targeted with women from CALD backgrounds, and one service associated with the project worked exclusively with Indigenous clients. As indicated in section 4.1.5 the service model was implemented in a manner that enabled unique tailoring of each response to the individual client.

Specifically with respect to Indigenous communities, the data demonstrate that by the end of 2011-12, 5.25 per cent of clients in the project (17 out of 324) identified as Aboriginal or Torres Strait Islander. According to the 2006 census data, in the Local Government Area’s encompassing the DVS WSS project a total of 5048 people were homeless and of these 262, or 5.2% identified as Indigenous (Cohen, 2012:34). These figures suggest the project is reaching these communities in relatively appropriate numbers. However, efforts to interview local Aboriginal workers were unsuccessful and the absence of more detailed qualitative data invites some caution in the interpretation of these figures.

The ABS believes Aboriginal homelessness is underestimated and that ‘differences in understanding of the concepts of home and homelessness’ must be taken into account (ABS 2011b) to more accurately reflect real numbers. Further, patterns of help-seeking and service usage by Aboriginal and Torres Strait Islander women who experience domestic violence are known to be different from other populations and this would suggest different service models are

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8 The June 2012 Portal Report states that 6 per cent of clients are Indigenous. However the self evaluation report and June 2012 portal report indicate that 17 (4 in 2010/11, self-evaluation report and 13 in 2011/12, data portal report) of 324 clients (5.25 per cent) are Indigenous.
required. The GWS Draft Service Mapping report notes the ongoing need for Aboriginal specific workers in the region, and Aboriginal women may require different screening and assessment processes. While the sustained, flexible and intensive case management approach of the service model has potential to offer a suitable response, considerations of special needs do not appear to have been addressed explicitly by the Greater Western Sydney project. The self-evaluation report notes the shortage in affordable housing, especially private rental, is likely to contribute to the low number of Aboriginal clients. The project also adopted a number of strategies to engage Aboriginal clients, including signing MOUs with an Aboriginal service, and the coordinator attending local Aboriginal meetings/interagency committees.

4.3 Service system and delivery outcomes

There are four identifiable outcomes for the service system:

- Different workers across the service system report enhanced skills, knowledge and confidence in domestic violence, housing and/or case management practice as a result of their engagement with the project. This supports the development of effective professional responses to the issue of DV and homelessness
- Existing services have been able to increase their client load through becoming registered service providers for DVS WSS. This has re-oriented them to homelessness work within the context of their core work and so expands the ‘reach’ of housing support programs
- Working relationships have been forged and enhanced, thus supporting collaboration and integrated service delivery. It has been especially important for Housing NSW to be part of the structure so that a relationship is required and mutually implemented between the Access and Demand teams and external providers
- Through increased collaboration and access to brokerage funding, services have been able to deliver support that would otherwise not have been available in a timely manner. This fills gaps caused by such things as lack of services, waiting lists, culturally inappropriate responses etc, thus addressing unmet need.

Discussion

The project filled important gaps in the service system through the provision of a flexible model of support and brokerage and an emphasis on shared planning and review. While it is acknowledged that services may already work in collaboration, the project enabled stronger and in some cases new professional relationships to emerge. The coordination groups, and the coordinator role, have increased knowledge of the service sector, and the support available for women and children in different areas.

Another important outcome for the service system is an increased awareness by non-housing programs of the significance of stable housing to other aspects of health and wellbeing and a need therefore to focus collaboratively on supporting tenancies. At the same time there is increased
awareness by Housing NSW of the longer term, complex impacts of domestic violence. This is a positive exchange that supports integration.

Another element of these strengthened relationships is that family support services have not needed to call on extremely over-stretched services that provide free material goods and services (typically charities) as frequently. This reduces the pressure on these services, and so also the pressure on the relationships between services. It also enables them to provide more services than they otherwise would.

The evaluation team is mindful that a shift to ‘early intervention’ is used as an indicator of success for service systems aiming to address homelessness and this may be sought as a measure of the HAP DV project outcomes. In the context of domestic violence however this can cause some difficulties. A common conceptual framework behind a range of domestic and family violence interventions is an application of the trans-theoretical or ‘stages of change’ model (Prochaska et al 1992). Current interpretations of this model emphasise a cyclical rather than linear process of behaviour change whereby individuals gradually develop self-efficacy and decision-making capacity to implement preferred life choices through a repeating spiral of interventions. In addition the domestic violence research literature emphasises the variability of a woman’s capacity to leave a violent relationship as a result of multiple emotional, practical and physical risk factors that are in constant change, being influenced largely by the perpetrator. The perpetrator is an external factor outside of her control but heavily influencing her options and outcomes. This makes it extremely difficult for women to decide to leave, plan the practicalities and carry this out successfully in a seamless process. In this context, ‘early intervention’ is not a one-off intervention that defines the nature of longer term outcomes. Rather it is a series of repeated opportunities. Commencing this series of supported opportunities early is indeed an important goal in preventing homelessness from domestic violence. However, service systems must be prepared to repeat their engagement and targeted activities in order to achieve the desired outcomes. This is especially true for children who are adversely affected by their experiences of domestic violence.

4.4 Staffing issues

What impact did staffing issues have on the project?

The domestic violence NGO sector in general is often a low paid, highly stressful work environment relying on the personal commitment of workers who have specifically chosen this field of practice (perhaps not unlike specialist homelessness services overall). It is therefore characterized by high staff turnover and service gaps due to waiting lists. However, the HAP DV model ameliorates this effect by sharing the work across a range of service providers from different organisations, providing a central coordinating role and structurally supporting collaborative practice. In the case of the GWS HAP DV project the coordinator position has fortunately been stable throughout the pilot, with the same person in the role throughout. This has been significant for the ability of the project to monitor and support ongoing case management and to underpin individual support if the case manager has changed or left and
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created a gap in service. A few clients struggled when their case manager left or was away, but the coordinator has been able to move closer or step back according to this need.

A high proportion of respondents to the evaluation (including clients, the coordinating agency and service providers) maintained that the capacity for the project to provide intensive, consistent, long term (12 month) support has been a major factor in achieving sustainable housing outcomes. In addition to this intensity and consistency of client support, identified gaps in mainstream services could be met by using brokerage to purchase timely private assistance, such as mental health assessments, counselling and children’s educational support. This also meant that specific expertise tailored to the individual client could be accessed, rather than having to rely on only one provider.

Thus, ‘best practice’ staffing is achieved through diverse providers, consistent coordination and the capacity to buy-in essential expertise.

However, an important concern that counters this positive perspective relates to the skills of Housing NSW staff and the HAP DV service providers to adequately understand and respond to specifically domestic violence issues. A lack of knowledge in this regard is partly offset by the DV expertise of the project coordinator, and in some cases the coordination officer plays a role in educating NSW Housing staff, not only on domestic violence and the HAP project, but also on NSW Housing products, such as Start Safely. In addition some service providers required training in the effects of domestic violence and risk assessment. The next section refers to this issue.

Finally, the availability of service providers to take on cases has been sufficient overall, but it can be conjectured that in more rural or remote areas where there are minimal services available to take on case management this could become an issue.

**What skills were needed by staff?**

The coordinator role is critical to the success of the HAP service model. The process evaluation report (Cohen, 2012: 37) describes the tasks and contribution of the coordinator:

Not only has the position fulfilled the original roles required of it (Secretariat; Reporting; Finance and Administration; and Troubleshooting), but the position has taken on a much greater role within each Regional Coordination Group, filled an unmet need within the broader welfare sector educating and mentoring on Domestic Violence; developed and disseminated new programs across the region; increased the number of partners/ member organisations within the DVS WSS program; and also undertakes substantial client oversight. It is highly likely that a key reason that the program has exceeded its targets is because of the willingness to take on these new roles.

Other skills were needed by the coordinator and partner agencies.
Case management and budgeting skills and domestic violence knowledge

The service provider role as described by stakeholders included the provision of extensive time with clients to assess need, determine goals and strategies and respond to fluctuating demands, including crisis intervention. This is not basic support, but professional case management practice enabling the navigation of multiple service systems and agencies to progress towards independence. Issues to be addressed included potential engagement with Centrelink, Family Court, citizenship and passport agencies, police, mental health, drug and alcohol, family support, child protection and welfare services in addition to Housing. It is the responsibility of the service providers’ employing organisation to adequately supervise and support this work. Knowledge of domestic violence is essential to ensure effective case plans in the context of the ongoing effects and risks associated with DV.

Domestic violence identification, screening and front line response skills

Housing NSW offices are the gateway to the project. Eligibility is defined by housing product criteria and all women must be accepted through this entry point. It is therefore essential that Housing NSW Access and Demand teams have good screening and assessment skills and helpful tools to enable appropriate identification of eligible clients. A number of stakeholders (including Housing NSW themselves) acknowledged that awareness of domestic violence and knowledge in how to enable disclosure was not adequate in some offices. This does not require expert, highly specialist knowledge but rather, an appropriate level of sensitivity and knowledge of housing-related needs and risks. It is strongly recommended that training and the design and implementation of appropriate screening tools occurs in order to support good practice.

What training was required?

The section above indicates the skills required for support workers to effectively provide intensive case management to clients, however the evaluation found little specific evidence of specialist DV expertise for support workers and, given that support workers in many cases work in generalist family support agencies, this may indicate a gap in skills. It has been noted, however, that the project has funded a number of DVS WSS service providers to attend DV specific training.

Further, the evaluation team found that a number of service providers require ongoing mentoring and supervision on case management practice.

Staff in the Housing NSW regional office may also require specific domestic violence screening and response training. More importantly, an appropriate DV screening tool for the Access and Demand teams is urgently needed. There has been an enormous amount of formal research and development work conducted in recent years on DV screening and this could be drawn upon.
5 Cost Analysis

This section describes a broad review of costs and outputs as presented in project self-evaluation information. We have focused on three aspects of this data:

1. Approximate balance of auspice agency operating costs as against total cost of direct client support packages.
2. Average amount spent on direct support packages per client
3. Types and amount of brokerage spending

It should be noted that the findings presented here are estimates only, to be taken as indicators for further investigation. This information cannot be used as a reliable measure of cost benefit or cost effectiveness, which would require a closer audit of precise costs, outputs, off-sets and outcomes.

As more fully described in the literature review that accompanies this report, there are significant issues to be considered in any cost analysis of community service projects, including the challenges of accounting for multiple, often hidden variables and indirect costs and a lack of agreement on how to define costs (Baldry et.al. 2012; Ling Chan and Yin-Nei Cho 2010). In addition, domestic violence services may encounter a range of particular concerns associated with the unpredictability of service activity over long periods of time due to varying injury/lethality risks and the need to repeatedly respond to the effects of ongoing cycles of chronic abuse (including specifically financial abuse) even after separation and relocation. In integrated programs there are also particular difficulties with measuring cost efficiency when so many factors are outside the control of the project or its workers.

Using the NSW Community Services reference paper for deriving indicative unit costs (NSW Government, Human Services 2010) we have examined the possibility of conducting activity based costing from a top-down approach. However, this method runs into some difficulties with the available data and cannot be adequately implemented.9 The limitations of this specific evaluation significantly constrain the possibilities for effective cost analysis. These limitations include the short time frame for collection and analysis of data, inconsistencies across various data reports including variable data definitions and differences in project record-keeping.

9 Adopting the unit costing approach in the document, the service is the GWS HAP DV project. The core service activities we have identified for the financial year 2011-2012 are:
   a. case management: $270,875
   b. brokerage: $209,884
   c. project coordination (staffing, including administration): $267,672
   d. auspice agency operational activities: $110,717

The NSW Homelessness Policy and Programs Unit has requested an average costing per client. Taking the individual registered client as the appropriate unit to measure against the above costs does not take into account the variable of the numbers of children who are also supported through the service. The size of the family significantly affects the brokerage and case management expenditure and so would need to be factored in. In addition, the data provided does not sufficiently differentiate high need and low need packages of support, nor length, intensity or quality of support provided. This would require more detailed collection of data from a representative sample of client case plans and reports of actual service ultimately provided. This necessitates a longer, more intensive process than is possible within the time frame and resources of the evaluation.
In the light of these constraints and in order to provide some useful, broad information on costings, the evaluation team has assumed the self evaluation report completed by the Greater Western Sydney HAP DV project in the first half of 2012, the June 2012 quarter portal report and the completed 2011-12 cost analysis template provide the most accurate up-to-date data. As retrospective reports they can account for adjustments to final client numbers following the end of reporting periods, translations from calendar to financial year and any late expenses that may have occurred. The following information is provided based on these assumptions and limitations.

5.1 Total project budget and expenditure

The Community Services HAP DV project service specification in GWS indicates a fixed-term funding amount of $640,000 per annum over three years. Therefore the accumulative, total planned budget is almost two million dollars ($1,920,000).

This annual funding covers operating costs and staff salary for the auspice agency, plus case management and brokerage costs for a target of 20 low need and 10 high need packages of direct client support. The table below details the annual funding for the targeted number of client support packages.

The requirement to deliver 30 packages costing $400,000 per year means we can broadly estimate the expected expenditure for 12 months, full implementation of the project was approximately one third auspice agency operating costs and two thirds direct client support packages.

The actual annual breakdown of expenditure as reported by the auspice agency in the self evaluation report and the 2011-12 cost analysis template is represented in Table 5.
Table 5.1: GWS HAP DV annual funding and expenditure

<table>
<thead>
<tr>
<th></th>
<th>2009-10 (6months only)</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2012-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding:</td>
<td>$79,139</td>
<td>Funding: $656,000</td>
<td>Core funding: $671,482</td>
<td>No data available</td>
</tr>
<tr>
<td>Total actual expenditure:</td>
<td>$77,909</td>
<td>Total actual expenditure: $424,673</td>
<td>Total actual expenditure: $859,149</td>
<td></td>
</tr>
<tr>
<td>Auspice agency operating costs (including core staff)</td>
<td>Not available</td>
<td>Not available</td>
<td>Staff costs*: $267,672</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Break down of client support package expenditure

- Services: $1810
- Goods: $4785
- Crisis payments: $1021

Total: $7,616

Break down of client support package expenditure

- Services: $78,341
- Goods: $50,106
- Crisis payments: $40,878

Total: $169,325

Percentages of annual expenditure (Figures rounded down or up to the nearest whole number).

- Case mngt/client support: $270,875
- Services: $58,798
- Goods: $94,269
- Payments: $48,571
- Other: $8,246
- Total: $480,759

- Client support package costs: 56%
- Auspice agency costs: 44%

This evaluation did not have access to detailed annual, audited finance reports. However, as table 2 demonstrates, there is a 56:44% ratio of direct client support packages to operating costs in the 2011-12 financial year. This is likely to be an underestimate of direct one to one client support overall, since the auspice agency staff costs include the salary of a full time coordination officer who engaged directly with clients and service providers for seeking feedback and overseeing case plans/brokerage expenditure in addition to managing the overall coordinating group structure. If
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part of this salary is included in direct client support, the ratio is likely to more accurately approach a 65:35 split.\(^\text{10}\)

5.2 Issues with expenditure

Unspent funds

There were unspent funds in the middle year of the project (2010-11) and this was due to the following issues:

1. **Establishment**: As with all new projects, setting up initial structures and processes to enable full operation required significant work. In addition to the normal recruitment and equipment issues this included establishing coordinating groups, working through obstacles to collaboration, explaining and promoting the project and clarifying processes. The size of the region and complexity of service systems increased this workload.

2. **Low referral rates**: Initially this was due to the ordinary establishment issues described above. In addition, NSW Housing offices across the region operate different processes for assessing Start Safely eligibility and some took a long time to process women through to the project. It also emerged that a number of clients eligible for the service were not being referred as they did not require the full 12 month case management support package. This issue was addressed by the creation of a new support category – supported referral (see below)

The project’s response to unspent funds

*Increased client numbers*: Four key actions appear to have helped the project to ‘catch up’ with regards to client numbers and make progress in expending funds.

1. Considerable, targeted local training and promotion of the project by the coordinator and coordinating groups.

2. Creation of ‘supported referral’ as a new category of service: In GWS it became clear that a number of clients were presenting who had an immediate need for advice and support that could be addressed through a single, brief intervention but did not require (or desire) intensive ongoing support or case management even to the level of a low needs package. Intervening in a timely manner with brokerage resources and directing these clients to external services was designed to prevent a break down in housing stability and ‘correct’ a trajectory towards more complex or compounded needs. This strategy utilised funds in smaller amounts across a wider range of clients.

3. Advocacy and enhanced communication with Housing NSW to increase referrals

4. Good will and collaborative practice across the region leading to increased knowledge of the project and improved referral pathways

\(^\text{10}\) Where an estimate of $60,000 is calculated, to account for the greater part of this cost
**Use of carry forward funds:** The auspice agency negotiated to carry forward unspent funds so they could be allocated to additional clients (above the target numbers) in subsequent years. They also directed some of these unspent funds back to existing clients who required support beyond the initial package they received. This was at all times monitored as part of a case management plan to contribute directly to sustainable housing outcomes.

### 5.3 Client costs for this project

A completed costing template for 2011/2012 financial year can be found in Appendix B.

In the financial year 2011-12, a total of 218 individual clients (and their accompanying children) received a service. A total of $859,149 was expended for the whole project during that year including $480,759 for case management, supported referral and brokerage costs combined. Taking all 218 clients into account the average expenditure per client can be calculated as indicated in table 3.

<table>
<thead>
<tr>
<th>Table 5.2: Average client expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Client support packages 2011/12</strong></td>
</tr>
<tr>
<td>Total expenditure</td>
</tr>
<tr>
<td>Average expenditure per client</td>
</tr>
<tr>
<td><strong>Whole project 2011/12</strong></td>
</tr>
<tr>
<td>Total expenditure</td>
</tr>
<tr>
<td>Average expenditure per client</td>
</tr>
</tbody>
</table>

Of the 218 clients supported in 2011-12, some received high needs packages, some received low needs packages and the project also developed a new category of client assistance termed ‘supported referral’ in which the client received only a one-off episode of assistance with some brokerage expenditure. However, there is insufficient data to separate actual expenditure for high need, low need and supported referrals.

**Value for money**

There is very limited information on cost analysis in the domestic violence, homelessness or case management formal literature that helps to inform a reliable assessment of value for money in the HAP DV program. Relevant benchmarks are not available since there are significant variables between models of service delivery, even within specifically DV housing support programs. For example Coy and Kelly’s (2011) financial analysis of per-client expenditure in the Independent Domestic Violence Advocacy Scheme (IDVA) in London, found an average cost per client of 501 British pounds (approximately $771). However, these programs offered ‘support’ which did not appear to include the kind of comprehensive case management or brokerage funding provided by HAP DV programs.
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Closer to home, the New South Wales Staying Home Leaving Violence (SHLV) program does provide case management and brokerage services. This support is specifically to enable women and children who experience domestic violence to safely stay in their own home. There are no published cost analyses of SHLV projects to draw upon, however a crude calculation of fixed annual project funding divided by the minimum annual target for client numbers (not actual numbers of clients supported) indicates an annual *budgeted* cost of a maximum $5,000 per client, including all support, brokerage and operational costs\textsuperscript{11}.

An evaluation of the *Brighter Futures* child abuse prevention program in NSW has estimated that for families managed by a non-government provider (including case management and brokerage) there is an average total cost to the program of $22,785 per family and for a limited support period of 6 to 12 months an average cost per family of $10,991 (Hilferty et al p172).

An AHURI report on the cost-effectiveness of homelessness services (Flatau et al 2008 p9) found the total costs per client across a range of housing support programs varied from $1,912 (Re-entry Link - support for people exiting prison, without accommodation) to $3,483 (Supported Housing Assistance Program, to sustain existing social housing tenancies). This was set against a cost of $25,923 for medium/long-term SAAP clients, such as women staying in refuges. Offset costs were then calculated to give a measure of value/cost-effectiveness, finding that significant net savings occurred.

The difficulty here is that whilst these costings are relevant in that the programs variously address the intersections of homelessness, domestic violence and child protection, there can be no meaningful comparison between the different types of services and cost calculations in relation to client outcomes, complexity of need, length of support and offset costs. The Productivity Commission’s Report on Government Services (SCRGSP 2012) also notes that lower costs per unit may in some cases indicate efficiency but can also indicate lower quality of service provision, thus undermining the project’s aims.

In terms of expenditure per client, the project (along with its ‘sister’ HAP DV projects in other regions) is positioned mid-range when compared to other client support services. This expenditure has achieved successful housing outcomes. Another source of information on client outcomes is exit surveys, which were conducted by the project and reported in the process evaluation. These surveys show that, of the respondents (n=76):

- 36 women (47 per cent) left the program because they had reached the end of their support period
- 21 women (28 per cent) were no longer eligible either because they returned to the perpetrator (5), were evicted (3) or had Start Safely cancelled (6) or were unable to be contacted (7)

\textsuperscript{11} SHLV figures indicate $150,000 total annual budget per project and a *minimum* of 30 packages of client support per year, depending on complexity and necessary length of engagement. In reality, far greater numbers of clients receive support.
CGRVS and SPRC

- 11 women (17 per cent) either moved from the area (5) or into different accommodation (3) or no longer required support (3)
- 3 were never able to find accommodation so could not participate in the program; and
- 3 were escalated into social housing. (Cohen, 2012: 85)

Although these figures may not be representative (it cannot be determined if they are), they indicate that less than a third of participants returned to housed homelessness or risk of homelessness. They also align with the self-evaluation report, which indicates that, of the 282 women given assistance to maintain existing accommodation until the end of the self-evaluation reporting period, 251 (88 per cent) maintained those tenancies. Given the limitations of the evaluation, it is not possible to calculate the cost-benefit ratio or cost effectiveness of the project, however given the complexity for this client group in sustaining tenancies, it seems likely that they represent good value for money.

The capacity to address both housing and ‘non-housing’ needs within an overall focus on sustainable housing goals is an especially important element of this success. Based on a sample of client experiences and the auspice agency reports, there are indications that the use of tailored case management in conjunction with relatively generous and flexible brokerage funds maximises the effectiveness of a range of support services. This not only prevents homelessness but also supports early intervention more broadly, especially in the lives of children adversely affected by domestic violence. Baldry et al (2012) point to the lack of intensive support early in the lives of vulnerable individuals that would prevent significant costs to multiple service systems as they age and become increasingly in need of higher and more complex layers of support and this is a key point for consideration.

As Baldry et al also suggest, homelessness services may carry an inequitable cost burden from failures within health, corrective, community services and justice system responses. The HAP DV program model supports integrated service delivery and critically, the individual’s capacity to seek help and engage optimally with these non-housing services. As an effective service model that directs resources in a timely and adequately supported manner, it can be said to be value for money.

**Contextual issues**

Positive, existing working relationships in the region across sectors and agencies, combined with the Coordinating Group structure of the DVS WSS project have created productive collaborations that enhance the efficiency of the project. These relationships and structures enable joint problem-solving and systems improvements to be enacted, which is especially important over an area as large and diverse as Greater Western Sydney. A total of 42 services are involved in the coordination groups, and the auspicing agency is also part of a number of additional networks. The project therefore has considerable capacity to provide integrated services and draw on the knowledge and skills of a large, connected range of services. As within any regional working
environment, we can assume the interagency or interdisciplinary engagements are not always simple or without conflict. However on balance, from the evaluation data provided it can be said that the DVS WSS project both benefits from and contributes to efficient and effective regional collaboration, thus keeping client costs down through enhancing integrated practice.

5.4 How effective was the use of brokerage funding

Brokerage funding linked to case management is a significant factor in the success of this project because it enables client access to critical resources and services at specific times of need and it has been used to great effect. A separate process evaluation undertaken in 2012 for the HAP DV project in Greater Western Sydney notes that brokerage has ‘a profound effect on case management’ (Cohen, 2012: 51). It must be noted that the total brokerage available per client is not always fully expended as this is determined by need and a subsequent, detailed case plan. Money therefore comes back into the project and is used for existing clients who require more support or for new clients. We find this capacity and level of flexibility to be of great benefit to client outcomes.

There are five key findings in relation to brokerage use that are listed here and then further explained below:

1. That flexible brokerage is effectively used to cover one-off costs for household items or daily living materials to establish adequate living conditions
2. That flexible brokerage is effectively used to increase the capacity for clients to access critical services to identify and prevent escalation of health and wellbeing problems
3. That flexible brokerage is effectively used to enable clients to access training and employment to develop financial independence, thus contributing to their long term capacity to remain safe and stable
4. That flexible brokerage is effectively used as a mechanism and resource to increase self-efficacy. Engaging with the planning and prioritisation of brokerage expenditure supports clients’ confidence and sense of competence for future independence
5. That a high degree of control over the use of brokerage funds is located at the level of client case managers and this increases its positive effect.

The top five categories of brokerage expenditure in 2011-2012 were: home establishment packs, rent arrears, life skills courses, groceries and formal education/employment services.
Table 5.3: GWS HAP DV, top five categories of brokerage expenditure

<table>
<thead>
<tr>
<th>Category</th>
<th>Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home establishment (linen, beds, mattresses, white goods, crockery etc..)</td>
<td>$62,868</td>
</tr>
<tr>
<td>Rent arrears</td>
<td>$28,642</td>
</tr>
<tr>
<td>Life skills courses (financial counselling, ‘rent it keep it’, property maintenance etc)</td>
<td>$21,717</td>
</tr>
<tr>
<td>Groceries</td>
<td>$16,487</td>
</tr>
<tr>
<td>Formal education/employment services</td>
<td>$15,070</td>
</tr>
</tbody>
</table>

It is clear the majority of brokerage funds have been directed towards setting up a new home and clearing past debt to enable a fresh start with a rental record. However, gaining skills, supporting ongoing stability and planning for future independence are also important benefits of the program. An analysis of GWS brokerage expenditure overall reveals four main areas of use: namely, equipment; poverty relief; goods and services to enable participation; and specialist services to alleviate health.

- **Equipment**: one-off items to establish a safe and functioning home environment; enable children’s appropriate engagement in education; and support their mother to maintain study or employment.

- **Poverty relief**: A significant contribution has been made towards poverty relief through meeting the cost of utilities, groceries, rent arrears or bond payments and urgent home repair to prevent debt as a foundation of spiralling poverty.

- **Participation**: Goods and services that enable clients to participate fully in life and attend support and education activities also draw on brokerage funding. This includes things such as meeting the costs of transport, motor vehicles, child care, children’s sport and recreation activities...etc...

- **Specialist services**: There has been a need for brokerage to be spent on specialist services outside of the case managers’ role for things such as psychological support, legal advice, life skills courses, formal education fees etc... The timeliness of the specialist service is a critical issue in sustaining the client in long term accommodation and enabling children to settle and cope with the consequences of domestic violence.

As indicated above, not only is brokerage being used to cover one-off material costs, access to critical services, training and employment but also to increase self-efficacy. By this we mean that workers have mentored clients in the development of confidence for financial decision-making, budgeting and resource management. Having a small amount of brokerage money to use at critical times has provided an opportunity for clients to consider priorities and ‘practice’ how to optimise expenditure. This has been strongly evident in the qualitative interviews conducted for
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this evaluation as an important aspect of sustainable outcomes from the overall HAP DV intervention.

Looking at the brokerage expenditure for 2011-12 some clarifications may be required with regards to the proportion of money allocated to what we have termed ‘poverty relief’ and whether some of this is not more appropriately the responsibility of existing services (for example ‘urgent home repairs’ or ‘groceries’). The GWS 2012 process evaluation report offers some indication of how this spending has occurred, in pointing to the initially high demand for brokerage payments without case management for the newly created supported referral clients. The project responded to this demand by tightening up monitoring and ‘governance’ processes to ensure payments were tied to case plans and fit more appropriately within the funding aims. However, without more detailed investigation it is not possible to comment on this further.

Overall, brokerage funding is a significant factor in the success of this project because it enables client access to critical resources and services at specific times of need and it has been used to great effect. The 2012 process evaluation for the Greater Western Sydney HAP DV project notes that brokerage has ‘a profound effect on case management’ (Cohen, 2012: 51) and this finding is echoed here. It appears that the level of brokerage available is greater than in other programmes such as SHLV, but it must be noted that the total brokerage available is not always expended on an individual client as this is determined by need and subsequent detailed case plan.
6 Assessment of the Effectiveness of the Model

6.1 Success factors for the model

The critical success factors for the model are summarised below.

1. A combination of program elements that mutually enhance one another

The data collected in this evaluation identify a number of key individual factors contributing to the success of the HAP DV model, but it is also apparent that the particular combination of program elements directly supported its’ overall effectiveness. Specifically, the combination and inter-relationships of the following four elements optimised housing outcomes:

1. access to safe and affordable housing (through Start Safely or social housing)
2. flexible support underpinned by an individually tailored and coordinated case plan
3. the possibility of intensive assistance for up to 12 months
4. brokerage dollars to fund further goods and services not constrained to a narrow definition of housing purposes

The reliability and possibility of intensive support over a 12 month period enabled good case planning; subsequently, the individually tailored case plan that was focussed on housing outcomes, ensured timely and appropriate brokerage expenditure; and all of these things were underpinned by the availability of a ‘bricks and mortar’ safe place from which to rebuild a life, following (and often within a continuation of) domestic violence. It is the combined presence and relationship of these elements to one another that significantly strengthened the service model.

2. Ongoing, flexible case management with a shared DV/housing focus

The capacity to provide intensive, extensive support through a coordinated case plan was extremely effective in supporting women to maintain their tenancies. The model allowed for intensive support when it was needed, typically dropping back to less intensive support over time. The complex support needs of many women who have experienced domestic and family violence could be met with this flexible approach.

A significant contribution to effective support was the assistance the projects could provide in managing debt. Women leaving violent relationships often have debt from that relationship, and a bad or zero credit rating. Through providing access to NILS, financial counselling, and support in managing budgets, the projects enabled women to deal with their previous debts and manage their finances. This was critical in ensuring the housing and non-housing outcomes described in Section 4.1.

3. Brokerage aligned to the case plan

Each of the projects emphasised the importance of individualised case plans and support. Brokerage was a critical part of this, because it enabled services to meet the needs that were
identified through the design and implementation of the case plans. As the internal evaluation report from one of the projects noted, brokerage was in general not used because women were asking for things, but because support workers identified goods and services that would help to meet their needs. Many of the agencies involved in the partnerships have long experience of supporting women and children who have experienced violence, and described brokerage as transformative in enabling extra support.

The process evaluation notes that:

Because the support period is for up to one year, case plans can be amended over time to add new goals and increasingly address more areas. For example, some women over time have been able to add education and future employment as a goal, something that could not have been considered when threatened with homelessness. “One client was a victim of ....(extensive)... domestic violence. (Initially) brokerage went to support visits to her children by buying new tyres for her car... Eventually she registered for TAFE (and brokerage is helping to pay for to establish a massage business). Altogether this woman has had brokerage up to $8000.” This is less than a third of the original Brokerage package meant for high needs clients and at the high end of brokerage packages that have been given out, yet it has helped a woman get educated, start a small business, and reunite with her children. (Cohen, 2012: 53)

4. A housing focus but not housing constrained

The HAP project model has proven beneficial at the sector level for various reasons. The capacity building of different organisations within the sector is one such strength of the model as workers are recognising the importance of working with clients around tenancy and are becoming much more attuned to respond to the needs of clients regarding the housing crisis. Prior to HAP and the collaboration between SHS and non-SHS services, non SHS services were not equipped to assist their client with housing needs or managing the appropriate paperwork, however this has since improved through interagency support and skill building.

Similarly, services that may not have focused on domestic violence before are gaining insight into the specific needs and challenges faced by this group of clients. This specific target criteria of HAP clients has enabled a broader outlook requiring workers to adopt a holistic approach beyond their service specifications.

5. Eligibility screening within Housing NSW

The location of initial screening and eligibility assessment within Housing NSW has been significant for collaboration and integration. In spite of an acknowledged need for improvement in some areas of DV knowledge in the Access and Demand teams, it has been important to continue this role within Housing since it then requires ongoing engagement and joint problem-solving. A short
term solution to the issue would be to move responsibility for initial screening to the auspice agency. However, a developmental approach will have longer term benefits for integrated practice and these gains are already being seen in the project.

6. **Inter-agency influence, education and knowledge exchange**

Services supporting women and children are often small and poorly resourced. Initiatives to increase integration and collaboration have achieved less than anticipated because of agencies do not have the resources required to change practice and connect with other services in new ways. In contrast, the HAP projects were a positive experience for the partnership agencies involved, because they provided new opportunities to learn about other services, were local and so relevant to local agencies, and required active, client-centred engagement around case planning.

7. **Local adaptation of the overall program model**

As contract manager, Community Services brought a flexible approach to implementation. Although the original HAP DV service model set out prescribed roles for all participants involved in service delivery, it has been possible to negotiate local adaptations such as changes to the coordination groups, enhanced centralisation of case plan and brokerage approval and temporary variations to eligibility criteria. This variation has depended upon local relationships and the particularities of the service system in the region. The ability to respond flexibly to these local conditions has optimised project efficiency, good practice with clients and many workers’ satisfaction with their participation in collaborative approaches.

8. **Strong management, coordination skills and practice expertise in the auspice agency**

The coordination groups were specific to a geographic area, which meant that they built on existing service networks and relationships, and exploited local knowledge. The groups were functional and engaged because they were supported by the HAP coordinator role, who was able to build and maintain engagement, provide secretariat support, and ensure compliance with guidelines and service specifications.

The DVS WSS project, unlike the HAP DV projects in the Hunter and Illawarra, provides an option one-off brokerage for clients who are assessed as not needing a support worker. This flexibility was highly valued by some stakeholders, although others noted that clients appear to benefit much more from support work than from brokerage, and that support workers build skills and resources in preparation for exiting the project.

9. **Additional resources for local service providers**

Initiatives to increase integration and collaboration in the homelessness and DV sectors have frequently achieved less than anticipated because organisations often do not have the resources required to connect with other services in new ways and change or extend client interventions. In contrast, the HAP DV project provided training, coordination and leadership of multi-agency
meetings, specialised professional support and the option of funding for support hours, goods and services.

Existing services have been able to increase their client numbers through becoming registered service providers for HAP DV. This has re-oriented them to homelessness work within the context of their core work and so expanded the ‘reach’ of housing support.

10. **Case management focused on client empowerment and learning to use the service system**

Evidence demonstrates that a substantial number of women who leave a violent relationship struggle to counter the effects of having lived in a situation of on-going coercive control with the accompanying traumatic stress of chronic, intermittent violence. Women have usually been isolated by the perpetrator and may have become effectively ‘de-skilled’ by perpetrator tactics such as denigration and psychological abuse. Enforced isolation may result in women not being aware of services available to them, particularly if they have been compelled to move locations a number of times by the perpetrator or have chosen to move to escape the violence.

The approach in the HAP DV project involved shared planning and decision-making with the client. This can be an important means of empowering women who have been living in situations of coercive control. They were given the option to plan and allocate brokerage money themselves before final approval and they also received intense support to gradually re-gain skills in how to effectively utilise help services.

6.2 **Challenges for the model**

Eligibility

The eligibility rules for the projects were described by service providers as too strict to enable support for all the women who could have otherwise been assisted. Specifically:

- Women who were not willing or able to leave the violent environment could not be assisted (this presents a tension for services who work with women in diverse circumstances, because those services can readily identify how women who are not eligible for HAP could be assisted by the resources available to HAP clients)

- Women categorised as unsuitable for social housing (because of the outcomes of previous tenancies, which may have been brought about by the actions of her ex-partner) were ineligible

In addition, it appears as though ambiguities and lack of clarity in the guidelines—especially around whether only people with established tenancies were eligible—were not always resolved consistently.

The original model for the projects was designed around two types of support package. In practice, the assumptions as to who would benefit from which package, and the budget needed
for each type of package, turned out to be inaccurate and were revised. It was assumed that
women who received Start Safely would have fewer or less complex needs than women eligible
for priority social housing. However, many women who received Start Safely have complex or
ongoing support needs, and moreover have higher expenses for housing as they need to pay for
private rental. The initial allocation of $20,000 for high needs was unrealistic, as none of the sites
came close to allocating that amount of money for individual cases.

The model required a single NGO, in each case a women’s refuge, to take on significant additional
responsibilities, including financial management and leadership. Although each of these agencies
demonstrated their competence in taking on these roles, a number of participants expressed
disquiet about the expectations inherent in this role, and about the relationships between the
auspicing agency and other organisations, especially other refuges in the region.

Low/high needs

As the process evaluation notes, in common with the other two sites, DVS WSS found that the
initial classification of client groups as ‘high needs’ or ‘low needs’ was not realistic.

The initial brief refers to these two groups as being ‘low need’ and ‘high need’
respectively. In practice, the level of need does not necessarily correspond to
these groupings, which is in line with the findings by AHURI, which called for
individual case management over a longer period because of the complex and
cyclical nature of the problem. It also matches the definition of domestic
violence used by the DVS WSS program, which recognises that domestic
violence, because of its pervasive nature, manifests physically, psychologically,
economically, socially and/or spiritually, and these problems may manifest long
after the event has occurred. (Cohen, 2012: 47)

In practice, as in the Hunter, support packages were recalibrated and the classification of clients as
high needs or low needs was abandoned (although data portal reporting retains the distinction).

Housing availability and accessibility

Access to private rentals for women on Start Safely relies on real estate agents being willing to
grant tenancy to single women/mothers leaving domestic violence. While some strategies are
being implemented to educate agents about the benefits of taking on Start Safely tenants, a
stigma still does exist whereby single mothers or women are perceived to be unreliable or risky
tenants.

Private rents often increase after 12 months, and the property becomes unaffordable. This may be
addressed with the extension of Start Safely to 24 months; however private rents often increase
annually, so may also increase after 24 months. A number of clients have gained employment
while on the program, but this is not feasible for every client.
In this context, the different private rental support packages offered by NSW Housing are not thought to work well together: a service provider quoted in the process evaluation notes that: ‘Women need to pay their own bond as housing wont assist with this. There is a mismatch between Housing Programs – as they need an AVO for a bond but not an AVO for Start Safely’.

Duration of support

For these clients who are ready and willing to live independently free from social supports the one year time limit of the DVS WSS program is ideal. However, for those clients with complex needs, the outcomes produced through the DVS WSS program are unlikely to be sustainable without further case management to address ongoing issues. As expressed by one service provider, ‘‘When you’ve got clients that experience many years of domestic violence or sexual assault, it will be extremely hard for them to get back on their feet in one year or two years, find a job, you know, have completed a course and found a job is very hard’ (Cheyanne DVS WSS service provider).

The impact of Family Court proceedings on women who have experienced family violence, and the extended duration of these proceedings, indicates that longer periods of support would benefit some clients. This point was made by service providers, and also by clients, as illustrated by this comment:

Personally, given the circumstances that I’m in, I believed that I would benefited from longer term with them because my issues aren’t resolved yet. I’m still, like I said, still going through Family law court through a horrendous set of circumstances (Renae).

The self-evaluation report notes that as well as being too short for some clients, the fact that support ends abruptly rather than tapering can result in a shock to clients with the potential to precipitate a return to the previous violent relationship or another form of homelessness.

Lack of acknowledgement of children

The service monitoring requirements explicitly exclude numbers of children being assisted by the project, which may demonstrate a lack of relevance or priority for children’s needs for the HAP DV strategy. However, the auspice agency nevertheless collected numbers of children and over the duration of the project there were 324 adult clients with 422 accompanying children. It can reasonably be assumed that a significant proportion of the service providers’ time will be spent on considering these children and supporting women to respond effectively to their needs. The number of children in a family is also likely to directly affect brokerage expenditure. This has been demonstrated in the variety of activities and necessities project funds have spent on children including paying for school fees, clothing, equipment and excursions, and meeting costs of health care needs such as counselling and medical specialists.

Children’s stability, education, health and wellbeing are often major factors in a woman’s capacity to sustain her separation from the perpetrator. These issues are also highly significant in her
CGRVS and SPRC

willingness to seek and engage well with support services and strongly influential for her own mental health and personal capacity. The flexible, tailored use of case management hours and brokerage resources in fact appears to have responded well to children’s needs and this is a strength of the model. The challenge however, is to retain this flexibility and to recognise the work involved for the auspice agency and service providers so that it continues to be adequately reflected in any future budgets and performance measures.
7 Conclusion

7.1 Summary of key lessons learnt

The HAP projects represented a significant shift in the provision of support for women leaving violence and their children. Some elements of the project that were extensions or enhancements of existing practices: for example, the projects were effective partly because services had a history of collaboration prior to HAP, so the coordination groups built on existing networks. However, other elements were new: in particular, the administration of brokerage funds required new systems of invoicing and acquittal, which were challenging for smaller agencies.

It should also be noted that the service model involved quite specific prescriptions, which were therefore subject to questions of interpretation and judgement. Not surprisingly, each of the sites took time to establish groups and get up and running, a process which was further complicated by the need for new relationships between the NGOs, NSW Housing and Community Services.

The key lessons learnt are a reflection of these characteristics of the service model and the way it was introduced.

1. Although both case planning and brokerage are well established means of supporting women leaving violence, there was little specific evidence guiding the allocations for initial packages, and the amounts turned out to be unrealistic. This led to significant administrative challenges in managing and carrying forward unspent funds. The subsequent adjustment to the packages was effective, and the fact that these adjustments were made speaks to productive relationships and competence in implementing the service model. However, future projects with similar models would benefit from a more comprehensive planning process around likely expenditures.

2. A key strength of the model is its flexibility, especially in responding to women’s changing needs over time. Although the sites anticipated that needs would become less intense over time, there was also capacity to increase intensity where needed. However, the time limits on support mean that women with ongoing needs, which last longer than two years, could be denied support essential to enable them to maintain their tenancy and stay safe. Equally, the interpretation of the service model in one site ties brokerage or Start Safely support to a case plan, whether it is needed or not. Future projects with similar models would benefit from allowing even greater flexibility: to extend the time support is provided to women who need it, and to end support early when it’s no longer needed.

3. New service models, which require the implementation of specific support services and include specific eligibility criteria, generate questions of interpretation and adaptation. Projects with these characteristics would be strengthened if these questions were resolved consistently.
7.2 Implications for the future response to homelessness for the client group/s in this project

The service model is aligned with the research evidence on women leaving violence—as the Homelessness Action Plan notes, family violence affects women’s capacity for financial independence by harming their sense of self-worth and value. Case plans are responsive to these harms because they are designed to enable individualised responses to these complex effects of family violence on women’s sense of self, as well as the practical needs that women and their children have when setting up a new life. Future responses for women and children experiencing family violence will benefit from replicating these core elements of the projects.

7.3 Implications for the homelessness system in this region

Lack of affordable housing continues to be a constraint on the effectiveness of responses.

A number of stakeholders reported that other vulnerable groups would also be assisted by case plans and brokerage, and recommended that the service model be extended.

7.4 Other insights gained that can enrich the evidence base

A strength of the service model is the role and expectations of the coordination groups. Agencies had incentives to become involved and remain involved, and there are clear aims and purposes of meetings. This has resulted in improved relationships and knowledge, and should result in better service provision and more coordinated responses, beyond the specific projects. Given many initiatives to improve collaboration between agencies flounder, this can be regarded as a significant achievement.

Although the projects were required to report on activities, outputs and outcomes of the projects, and invested considerable effort in complying with these requirements, there are problems with data quality and some inconsistencies with the way that data was collected. The process of recording monitoring and evaluation data can be challenging for small agencies, and it is not clear if these agencies gained any benefits from this process, or from the invoicing and accounts management associated with brokerage.

7.5 Future research that could strengthen the evidence in this area.

Future research could productively focus on:

- Workforce: Much of the evidence on case management comes from the health sector, with clients who have psychiatric illness. There is little research on whether specific skills are needed for effective support work with women and children who have experienced family violence.

- Outcomes: In the absence of long-term outcomes data, economic evaluations that monetise the benefits of the projects, and allow comparison of the cost: benefit ratio with other service models, are not possible. There are well-known difficulties with evaluating interventions that
CGRVS and SPRC

target women and children who have experienced family violence, however if economic evaluations are a priority, rigorous research into outcomes is needed.
Appendix A  List of agencies participating in the evaluation

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Number of workers interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women's counselling service</td>
<td>1</td>
</tr>
<tr>
<td>NSW Housing</td>
<td>2</td>
</tr>
<tr>
<td>Bonnie's Refuge</td>
<td>1</td>
</tr>
<tr>
<td>Drug and Alcohol Women’s network (DAWN)</td>
<td>1</td>
</tr>
<tr>
<td>Green Valley Liverpool Domestic Violence Service</td>
<td>1</td>
</tr>
<tr>
<td>Wimlah Women’s and Children’s Refuge</td>
<td>1</td>
</tr>
<tr>
<td>The Women’s Cottage</td>
<td>1</td>
</tr>
<tr>
<td>Muslim Women's Association</td>
<td>2</td>
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### Appendix B Cost analysis

<table>
<thead>
<tr>
<th></th>
<th>2011/12 Units</th>
<th>2011/12 Quantity</th>
<th>2011/12 $ Value</th>
<th>Percentage</th>
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<tbody>
<tr>
<td><strong>Project income - Inputs</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Income</td>
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<td>HAP funding</td>
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<tr>
<td>In-kind</td>
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<tr>
<td>Third party donations</td>
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</tr>
<tr>
<td>Staff costs</td>
<td></td>
<td></td>
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<tr>
<td>Direct Client Services</td>
<td></td>
<td>Staff</td>
<td>38</td>
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<td>Admin and support</td>
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<td>Staff</td>
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<tr>
<td>Staff related on-costs</td>
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<td></td>
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<tr>
<td>External consultants / professional services</td>
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<td>$ 68,443</td>
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<td>Staff costs</td>
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<td>Total Staff costs</td>
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<td>$ 538,548</td>
<td>62.68383</td>
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<td>Operating costs</td>
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<td>Meetings, workshop, catering</td>
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<td>Staff training and development</td>
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<td>Motor vehicle expenses</td>
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<td>$ 11,284</td>
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<tr>
<td>Other travel</td>
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**CGRVS and SPRC**

<table>
<thead>
<tr>
<th>Operating costs</th>
<th>Host Organisation Management Fee and Administration costs</th>
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<tr>
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<td>Other</td>
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<td>Operating costs</td>
<td>Other</td>
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<td>1.1639423</td>
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<td>Total Operating costs</td>
<td>Total Operating costs</td>
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**Brokerage Outputs**

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<thead>
<tr>
<th>Goods</th>
<th>Groceries</th>
<th>Clients assisted</th>
<th>$</th>
<th>1.9189672</th>
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</thead>
<tbody>
<tr>
<td>Home establishment packs (eg linen, beds, mattresses, whitegoods, furniture, crockery/cutlery, cleaning equipment, lawn mower, tools)</td>
<td>Clients assisted</td>
<td>84</td>
<td>$ 62,868</td>
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</table>

<table>
<thead>
<tr>
<th>Goods</th>
<th>Educational/vocational items (eg computers, protective equipment)</th>
<th>Clients assisted</th>
<th>$</th>
<th>0.2295876</th>
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</thead>
<tbody>
<tr>
<td>Children's items (eg school uniforms/textbooks, pushbikes)</td>
<td>Clients assisted</td>
<td>23</td>
<td>$ 10,579</td>
<td>1.2313345</td>
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</table>

<table>
<thead>
<tr>
<th>Goods</th>
<th>Safety &amp; security</th>
<th>Clients assisted</th>
<th>$</th>
<th>0.1258513</th>
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<tbody>
<tr>
<td>Health items (eg essential medication, spectacles)</td>
<td>Clients assisted</td>
<td>6</td>
<td>$ 1,282</td>
<td>0.1491825</td>
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</table>
### CGRVS and SPRC

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
<th>Clients assisted</th>
<th>Sessions delivered</th>
<th>Amount</th>
<th>Unit Price</th>
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<tbody>
<tr>
<td><strong>Goods</strong></td>
<td>Petrol</td>
<td>0</td>
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<td>0</td>
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<tr>
<td><strong>Goods</strong></td>
<td>Other</td>
<td>0</td>
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<td>0</td>
</tr>
<tr>
<td><strong>Goods</strong></td>
<td>Other</td>
<td>0</td>
<td></td>
<td>$ 0</td>
<td>0</td>
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<td><strong>Total Goods</strong></td>
<td>Total Goods</td>
<td>0</td>
<td></td>
<td>$ 94,269</td>
<td>10.972352</td>
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<tr>
<td><strong>Services</strong></td>
<td>Psychological services (eg. drug &amp; alcohol/ trauma counselling)</td>
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<td>4</td>
<td>$ 1,803</td>
<td>0.2098355</td>
</tr>
<tr>
<td><strong>Services</strong></td>
<td>Life skills (financial counselling, Rent It Keep It, tenancy management skills, property maintenance and care services, property care mentors)</td>
<td></td>
<td>44</td>
<td>$ 21,717</td>
<td>2.5277335</td>
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<tr>
<td><strong>Services</strong></td>
<td>Specialist health services (eg rehabilitation, dental/medical)</td>
<td></td>
<td></td>
<td>$ 0</td>
<td>0</td>
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<tr>
<td><strong>Services</strong></td>
<td>Legal services</td>
<td></td>
<td>6</td>
<td>$ 4,832</td>
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<tr>
<td><strong>Services</strong></td>
<td>Education/training (eg specialist educations services, school/TAFE fees, employment assistance, driving lessons)</td>
<td></td>
<td>Courses</td>
<td>$ 15,070</td>
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<tr>
<td><strong>Services</strong></td>
<td>Case management (external)</td>
<td></td>
<td></td>
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<tr>
<td><strong>Services</strong></td>
<td>Urgent home repairs</td>
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<td></td>
<td>$ 6,651</td>
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</table>

GWS HAP Domestic Violence Project evaluation

66
<table>
<thead>
<tr>
<th>Services</th>
<th>Hours</th>
<th>Clients assisted</th>
<th>$</th>
<th>1.0154698</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child care</td>
<td></td>
<td></td>
<td>$ 8,724</td>
<td>1.0154698</td>
</tr>
<tr>
<td>Removalists (eg furniture, rubbish)</td>
<td></td>
<td></td>
<td>1.0154698</td>
<td>0</td>
</tr>
<tr>
<td>Initial housing hygiene clean</td>
<td></td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Furniture storage</td>
<td></td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Brighter Futures</td>
<td></td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Disability Support</td>
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<td></td>
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<td>0</td>
</tr>
<tr>
<td>Other</td>
<td></td>
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<tr>
<td>Total Services</td>
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<td>Rent arrears</td>
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<td>3.3337961</td>
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<tr>
<td>Utilities bills</td>
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<td>25</td>
<td>1.3921855</td>
</tr>
<tr>
<td>Bond assistance</td>
<td></td>
<td></td>
<td>10</td>
<td>0.3795686</td>
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<tr>
<td>Motor vehicle expenses (eg registration, maintenance)</td>
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<td>11</td>
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<td>Other</td>
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<tr>
<td>Total Payments</td>
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<td>Transport fees for clients, not staff (eg. bus/rail)</td>
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<td></td>
<td>10</td>
<td>0.4517702</td>
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<tr>
<td>Accommodation (eg emergency, temporary)</td>
<td></td>
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<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

GWS HAP Domestic Violence Project evaluation 67
CGRVS and SPRC

<table>
<thead>
<tr>
<th>Description</th>
<th>Clients assisted</th>
<th>Cost</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Identification documents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Social integration/ Community engagement/cultural and sports activities for children (eg swimming lessons, dance lessons, parenting groups)</td>
<td>6</td>
<td>$4,365</td>
<td>0.5080701</td>
</tr>
<tr>
<td>Other Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Other</td>
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<tr>
<td>Total Brokerage costs</td>
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**Total Expenditure**

<table>
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<tr>
<th>Cost</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>$859,149</td>
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</table>
Appendix C Recruitment flyer

We are researchers from the University of New South Wales, evaluating projects funded by the NSW government to help reduce homelessness. [your organisation] has been involved in these projects, and we are speaking with clients of the service to find out what worked well, how the service has made a difference (if any) to your life and what can be improved.

We would like to speak with you, in person or on the phone, about your experiences with Jenny’s Place and how helpful the support you received was to you. The interview will take around an hour. This is a completely voluntary process. You can choose not to be interviewed and it will have no effect on your relationship with [the organisation] or the support they provide.

If you choose to go ahead, we will give everyone who completes an interview a $30 voucher to thank them for their time and participation.

For further information please let [your support worker] know and we can call you, or you can contact us directly:

BJ Newton, b.newton@unsw.edu.au, 9385 4013 (Mon-Wed), or kylie valentine, k.valentine@unsw.edu.au, 9385 7825
Appendix D Interview schedules

Extended evaluation of Long-Term Accommodation and Support for Women and Children Experiencing Domestic Violence provided under the NSW Homelessness Action Plan

Discussion guide for interviews with service providers

4. Can you tell me a little about the work that you do, and your role in the HAP DV project?
5. How were you introduced to the project?
6. How would you describe your experience of working in the project? (prompts: meetings, governance, guidelines)
7. In your experience, what are the benefits of the HAP project model? What outcomes has it produced for clients?
8. Has involvement in the HAP DV project changed your relationship with other services in the area? (prompts: improved communication, greater understanding, more streamlined referral)
9. In your experience, are there any elements of the project model that could be improved?
10. Brokerage uses? (What have you used it for, with how many clients, does the org record uses with individual clients, what is the process for applying for and providing brokerage?)
11. In your experience, what are the benefits of access to brokerage funding? Are there any ways that the program could be improved? (prompts: eligibility criteria, wait for approvals, availability of resources)
12. In your experience, what are the benefits of the Start Safely scheme? Are there any ways it can be improved? (prompts: amount, duration, eligibility criteria, wait for approvals)
13. Can you describe a case where all aspects of the service worked extremely well? What made this possible?
14. Can you describe a case where you were not able to provide an effective service for a client? What would have made a difference?
15. What advice would you give service providers in another area who were considering implementing a similar project?
16. Is there anything you would like to add?
17. Clients to interview?

SHLV specific considerations:

18. How does the agency present the two programs – what is written about the 2 programs? Are they separately promoted? What do they say is available to clients from each project?
19. How do they make decisions about clients going into each program? (elibility / screening criteria?)
CGRVS and SPRC

20. What brokerage money is available in each program and how is it used?
21. Do any of your SHLV clients access start safely or HAP brokerage money – explore any overlaps.

**Extended evaluation of Long-Term Accommodation and Support for Women and Children Experiencing Domestic Violence provided under the NSW Homelessness Action Plan**

**Discussion guide for interviews with clients**

Can you tell me a little about where you’re living now, and who you’re living with?

How long have you been living here? (if less than 12 months) How did you find your home? What was important to you when you were looking for somewhere to live?

I’m going to ask a few questions about your experiences of receiving services from (agency/service). Can you tell me how you first found out about this service?

What’s been your experience with (agency/service)? What services have they provided, or helped you find?

How useful has that support been?

Could you tell me the areas in your life that the (agency/service) has made the most difference? (prompts: feelings of safety/security, plans for the future, overall well-being, better physical/mental health)

(explain what Start Safely is). Have you ever applied for or received Start Safely?

How did you find out about Start Safely, and what was your experience of applying for it?

(for those who applied but didn’t receive it) Why didn’t you end up receiving Start Safely?

(for those who have received it) Are you still receiving Start Safely? How important has it been to you?

Thinking about the last few years, what person or service has been most helpful for you?

If you could change anything about the services available to people who have had similar experiences to you, what would it be?
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References


