FAMILIES CAUGHT IN THE HOMELESSNESS AND CHILD PROTECTION CYCLE

A SUPPORTIVE HOUSING MODEL FOR KEEPING FAMILIES TOGETHER
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1. Executive Summary

1.1. The problem

“...the current child protection system — despite the hard work and good intentions of many and the large amounts of money invested in it since 2000 — is not ensuring the safety, wellbeing and best interests of children as well as it should or could” (Carmody, 2013: xi).

We must find a better way to respond to demand from women, children and families in crisis, as well as develop preventative and early intervention responses that break the cycle of disadvantage.

A depth of evidence highlights the pivotal role safe, secure, fit for purpose housing plays in supporting families to stabilise. Yet the progressive decline in affordable housing investment, coupled with the housing affordability crisis, compounds a failing system. Evidence also indicates that housing alone is insufficient to make sustained change. Housing must be coupled with consistent, tailored, case management support.

1.2. Research objectives and method

This ‘problem’ compelled Common Ground Queensland and Micah Projects to commission research to explore a better way to drive system change. This paper builds an evidence based ‘case for change’. The research:

1. Explored the causes of family breakdown and homelessness and the impacts of both;
2. Identified evidence-based models from overseas that would address the causes through a supportive housing model that bridges the gap between housing and case management support;
3. Identified system and policy blockers that inhibit the implementation of this emerging model; and
4. Scoped the potential for a Queensland pilot to test emerging practice international responses in the Brisbane context.

Research methods included a literature and documentary review, one-on-one interviews, a cross-sector interactive forum and a joint Common Ground Queensland and Micah Projects Board presentation with the Minister for Housing and Public works, the Minister for Communities, Child Safety and Disability Services and key departmental staff. A Working Party comprising stakeholders from Common Ground Queensland, Micah Projects, the Department of Housing and Public Works and the Department of Communities, Child Safety and Disability Services was also established to provide oversight.

1.3. Findings Part I: The cause and the impact

The drivers for homelessness

A range of factors impact families’ vulnerability to all forms of homelessness. These factors include: poverty, underemployment compounded by low education, inadequate social support, relationship breakdown, previous abuse and neglect, substance abuse, mental health issues and domestic violence (David et al, 2012; Gibson and Johnstone, 2010). Evidence is emerging that the main reason women with children are homeless is due to domestic violence, sexual assault and family breakdown (Australian Human Rights and Equal Opportunity Commission, 2012).

The lack of suitable housing options

In the capital cities of Australia the lack of affordable housing is an emerging crisis (Economic References Committee, 2015). Appropriate housing (suitable size, safety, location, standard and tenure), services and incentives that tackle housing stress for families such as private rental subsidies are virtually non-existent. In Brisbane, despite increases in supply, affordability is almost unreachable for families, particularly for a single headed household on Centrelink benefits or the minimum wage plus Family Tax Benefit (Anglicare Australia, 2015). Further to this is the declining stock of available social housing in Brisbane (Groenhart and Burke, 2014).
The impact on families and children of homelessness and its drivers

This confluence of factors means some families cycle in and out of insecure housing. This instability undermines a family’s sense of certainty, control and autonomy and places undue strain on families and their routines (Taylor and Edwards, 2012). Familial breakdown, stress and tension negatively affect simple things, such as daily routines and can result in issues such as reduced school attendance and disengagement with education and learning (Fantuzzo et al, 2012; Masten et al, 2012; Wilson and Squires, 2014).

Housing stress, family homelessness and other poverty related issues have a profound effect on children’s health and wellbeing (Moore et al, 2011) and have been identified as a common pathway to future homelessness for young adults (Flatau et al, 2012; Swick, 2008).

Children from families with housing instability are more likely to be investigated by child protection services, placed in out-of-home care and stay longer in foster care (Culhane et al, 2003; Courtney et al, 2004). A significant proportion of notifications occur because of other factors such as unhygienic living conditions (a factor of overcrowding, insecure tenure and couch surfing) and limited parenting skills (an attribute of intergenerational poverty). Issues of intergenerational poverty, institutionalisation and ethnicity cannot be underestimated in these situations. Child abuse and neglect can have severe and ongoing consequences for individuals and children removed from their families tend to suffer negative outcomes, such as lower educational and employment achievements than their peers (Okpych and Courtney, 2014). The evidence suggests that keeping families together or reunification is in the best interest of families, if safe to do so and should be the emphasis of child protection agencies (Fernandez and Lee, 2011).

1.4. Findings Part II: An emerging model

There is an evolving body of evidence that outlines the benefits of a supportive housing model for families and the success criteria required to deliver its compelling social and financial benefits. Supportive housing refers to housing which is good quality, permanent and affordable, is coupled with housing stability services, has informed property or landlord management and has linked family tailored case management and service coordination (CSH, 2012).

The US Family Unification Program (FUP) started with the recognition that intervention to stabilise housing for families can avoid costly parent-child separation through child welfare services (White, 2012 cited in Fowler and Chavira, 2014). It provides housing subsidies, through vouchers, to eligible families. Since its inception in the 1990s over 200,000 children have avoided foster care placement altogether or have been reunited with their families (NCHCW, n.d.). The savings are considerable. For an average family whose children have been removed, the average costs to government annually for foster care is $47,608, compared to an annual cost of approximately $13,412 which includes vouchers from the initiative as well as supportive services (NCHCW, n.d.).

Another US program ‘Housing First’ started in 1992 made housing no longer contingent on drug and alcohol rehabilitation or any other restriction or condition. This approach led to the notion of Supportive Housing, which focuses on linking housing with intensive and integrated support. The US National Center for Housing and Child Welfare has demonstrated that the cost of supportive housing is approximately 70% less than the cost of maintaining children in foster care. Further there is evidence that by reducing the incidence of abuse and neglect and of child removal intervention, the model also reduces the emotional and social costs to individuals and families.

Evaluation of a Supported Housing Project in the US ‘Keeping Families Together’ found that families placed into supportive housing through the pilot reduced their actual and potential use of foster care services by 5,415 days over two years and their shelter use by 13,703 days over two years. Together these reductions in foster care and shelter represented a total cost offset of $1,866,592 over two years, or $64,365 per family. Assuming a two year per unit cost of supportive housing of $66,552, foster care and shelter reductions alone offset 97% of the cost of supportive housing. This does not take into account offsets in other emergency public service systems (CSH, n.d.).

Closer to home, the recent evaluation of the Brisbane Common Ground Supportive Housing Program found substantial savings when comparing the cost of services consumed by tenants in the year before and after moving into Brisbane Common Ground. This was in addition to findings of improved health and wellbeing and satisfaction for tenants (Parsell et al, 2015).
The evidence demonstrates that supportive housing offers an integrated approach for providing early intervention and secondary family support services earlier to families at risk of child protection intervention due to unstable housing, homelessness and associated issues such as addiction, poverty, intergenerational trauma, domestic violence and unsafe family functioning. Additionally, supportive housing can prevent foster care placements, reduce the time a child is in foster care and provide a basis for family reunification (Metis Associates, 2010). The supportive housing model is in line with five of the seven strategic directions of the Supporting Families Changing Futures Strategy, including building an accountable, transparent and cost effective Queensland System.

1.5. Findings Part III: System and policy improvements

A range of system and policy improvements were identified through the stakeholder engagement process. These themes are conducive to fostering the successful adoption of a supportive housing model.

- Cross-sector collaboration: more efficient and timely communication between government departments and NGOs regarding families’ individual circumstances.
- Flexible funding: to reduce red tape, address needs on an individualised basis and fund support which falls outside of program scope.
- Link housing with support: combining intentional support with housing in cases where homelessness is a resented factor.
- Early intervention / prevention: fast track referrals to a dedicated area in Child Safety when rapid rehousing is required; ask families what they need, develop and promote non-punitive pathways for engagement and provide ‘in-home’ program delivery and tailored support for parents / carers.
- Housing supply, design and tenure: housing needs to be well located and family friendly. Innovative financing and tenure options are needed to stimulate greater investment in the supply of affordable housing.
- Government support: investment in local pilots to test and evaluate proven overseas models is required and there is a need for government to stimulate opportunities through tax and planning incentives or subsidy programs to attract private investment for affordable housing supply.

1.6. Key Recommendations: Where to from here?

The conclusions of the research support a packaged solution to address the systemic issues experienced by families caught in the homelessness and child protection cycle.

The two key recommendations put forth seek to strengthen the reform approaches already taken by government agencies and outline pragmatic measures that can inform program design and funding allocations and promote cross-sector collaboration.

**Recommendation 1: Funding and implementing a Families Supportive Housing Pilot**

There is an immediate need to launch a Families Supportive Housing pilot that brings three evidence-based models together in the Brisbane Local Government Area (LGA). The pilot would integrate: the ‘Keeping Families Together’ approach, the Parents as Teachers (PAT) approach and The Brisbane Common Ground supportive housing model.

Through local consultation with the Department of Communities, Child Safety and Disability Services in Brisbane the pilot would focus on families with children:

- From pregnancy to five years of age;
- Who are engaged with Child Safety due to housing instability and other risk factors such as addiction, mental health, disability of the parent;
- Who are accessing homelessness services and are at risk of intervention; and
- Who are in foster care and the barrier to reunification is housing.

The pilot assumes that 50 families are provided two (2) years of supportive housing and support services with a six month scale up period to reach the total of 50 families involved in the program. An average of two children per family has been factored into the modelling.
Under the pilot participants would be allocated a caseworker who would work collaboratively with the family to develop and implement a support plan to achieve increased housing stability and family well-being. The plan would involve short term, intermediate and long term goals. Due to the capital costs requirements and the timeframe limitations of the pilot, the modelling has been developed around a scattered site model with outreach family support. A housing subsidy would enable access to private market rental housing for low income families.

The total expected costs for the two year pilot are $4,205,000, representing a saving of $6,507,076 over the two year period when compared to the costs of homelessness and out of home care for the same period.

This costing would include evaluation, with the ultimate goal of preventing foster care placement, promoting housing stability and breaking the cycle of intergenerational poverty for parents and children.

**Recommendation 2: Form a cross-sector working group to remove pilot system and policy blockers and drive learning's across the system**

A cross-sector working group would enable effective targeting and development of a framework based on cross-sector referral (Specialist Homelessness Services, Domestic Violence Services, Child Safety Services, Department of Housing and Public Works and Queensland Health).

This group should reflect on and respond to the findings from the interactive forum, integrate these reflections into the pilot and make recommendations for system wide adoption.
2. Introduction

2.1. Overview

It is well recognised through policy and practice that Queensland has developed an expensive tertiary child protection system at the cost of the provision of services, resources and opportunities for families who experience adversity, poverty and significant personal and family challenges (Carmody, 2013). The system is both expensive and not meeting the basic needs of families and children. Whilst investment into child protection has been steadily growing over the past decade, largely due to public Inquiries, the investment into affordable housing for families has been on a steady decline (Economic References Committee, 2015). This is coupled within the context of a general housing market which is increasingly unable to deliver affordable housing for people including families on the lowest incomes.

In the child protection statutory system, specialist domestic violence services and the specialist homelessness service systems the increase in presentation of vulnerable women and children and families is leaving too many children living in poverty or separated from their family and culture. The consequence is over reliance on tertiary intervention after harm and adversity have accumulated over time.

2.2. Supportive Housing – an emerging model

In order to break this cycle, communities internationally have been working towards a policy shift by intentionally linking housing resources with family and child support services in what is known as supportive housing policy and practice (Metis Associates, 2010). Emerging practices and policy setting in the United States (US), Europe and England are showing promising results in relation to costs to government and outcomes for families and children. The core elements are the underpinning of affordable and secure housing linked with the appropriate services to specific population groups such as families in the child protection systems, or families experiencing homelessness, or combinations.

The model’s efficacy is achieved by offsetting the need and demand for more expensive tertiary services in the areas of mental health, chronic homelessness, primary and specialist healthcare (addiction and behavioural health) family self-sufficiency programs and child protection.

Both the United Kingdom (UK) and US have piloted supportive housing approaches for families in situations where poverty and homelessness are major factors in the substantiation of abuse and neglect. The US National Center for Housing and Child Welfare has demonstrated that the cost of supportive housing is approximately 70% less than the cost of maintaining children in foster care.1 Furthermore, research in the US has established that it is the combination of housing subsidy and focused case work support services that assists in achieving housing stability and family well-being outcomes, not just cash subsidies alone (White, 2016).

Evidence also indicates that by reducing the incidence of abuse and neglect and of child removal intervention, the model also reduces the emotional and social costs to individuals and families. It is well established that child abuse and neglect can have severe and ongoing consequences for individuals and that children removed from their families tend to suffer negative outcomes such as lower educational and employment achievements than their peers (Okpych, N. and Courtney, M., 2014).

2.3. Queensland context: supporting families, changing futures


“On current trends, the number of children known to Child Safety services (1 in 4.2 of All Qld Children; and 1 in 1.6 Aboriginal and Torres Strait Islander children according to 2012-13 data) and the number of children in the care of the state are likely to continue to grow at an unsustainable rate”.

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1 NCHCW Housing-Child Welfare Cost Study 2015 (Appendix C).
This expected trend in demand for tertiary child protection services impedes a more balanced investment by government across the system, specifically in social housing where the private market and local economy is preventing an increase in both supply and affordability for low income families.

In response to the 2013 Queensland Child Protection Commission of Inquiry report, the Queensland Government has outlined a wide ranging 10 year reform program for the child protection and family support system in Supporting Families Changing Futures: Advancing Queensland’s child protection and family support reforms (Queensland Government, 2016).

In the reform implementation process, government is actively engaging with interested people and organisations in designing and delivering new services, initiatives and policies where there is a shared vision in which:

- Queensland children and young people are cared for, protected, safe and able to reach their full potential; and
- Queensland families and communities are empowered to become stronger more capable, more resilient and are supported by a child and family support system that understands the importance of family, community and culture.

Supportive housing offers an integrated approach for providing early intervention and secondary family support services earlier to families at risk of child protection intervention due to unstable housing, homelessness and associated issues such as addiction, poverty, intergenerational trauma, domestic violence and unsafe family functioning. Additionally supportive housing can prevent foster care placements, reduce the time a child is in foster care and provide a basis for family reunification (Metis Associates, 2010). The supportive housing model is in line with five of the seven strategic directions of the Supporting Families Changing Futures Strategy, including building an accountable, transparent and cost effective Queensland System.

2.4. Purpose and objectives of this project

The purpose of this project was: (1) to explore the complex interactions between family poverty, family housing insecurity and other stresses and the child protection system, including interventions involving removal of children to out-of-home care; and (2) to propose options for alternative cost-effective responses to child removal that realise more sustainable immediate and long-term outcomes for children, families and the community.

The objectives were:
- To provide an analysis of the cost-benefits of out-of-home care versus housing with support;
- To develop a criteria for targeting families within the Brisbane Local Government Area (LGA) for intervention to maximise social benefits and cost savings; and
- To develop a tool (“financial model”) which can inform government program design and funding allocations and be replicated in other jurisdictions.

This report assesses the applicability to the Brisbane context of overseas evidence-based and emerging practice models in addressing housing exclusion and instability of families. The potential for replication in other settings is also considered.

The report outlines supportive housing as a service model which can realise significant benefits in both social and financial costs as an early intervention to prevent removal of children to out-of-home care from at-risk families or as a basis to support earlier reunification of families where children have already been placed in out-of-home care.

Within the limits of available cost data, the report models indicative cost benefits of implementing the model and proposes a pilot to more accurately test and evaluate the model’s cost-effectiveness as an outcomes-driven alternative to families entering into the child protection system due to instability in housing or homelessness.

The conclusions of the research support a packaged solution to address the systemic issues experienced by families caught in the homelessness and child protection cycle.

The two key recommendations put forth seek to strengthen the reform approaches already taken by government agencies and outline pragmatic measures that can inform program design and funding allocations and promote cross-sector collaboration.
3. Research methodology

Multiple research methods were combined in this report, including literature and documentary reviews, stakeholder engagement and financial modelling.

3.1. Literature review

A preliminary literature review was conducted to identify definitions, broad indicators and target groups relevant to this research and to examine the complex nexus between poverty, housing stress, homelessness and interrelated issues such as domestic violence and child safety and foster care.

The literature review addresses three research questions. The first question is: what are the links between poverty, family housing stress and the child safety and foster care cycle? Evidence is drawn from various government reports, commissioned studies, non-government organisation (NGO) reports, academic material and grey literature. The review substantiates that poverty, particularly intergenerational poverty, directly impact on family homelessness.

There is strong evidence that families are the fastest growing group experiencing housing stress and hence becoming homeless. There is a direct correlation between poverty and a lack of affordable housing stock and the unaffordability of existing stock, which places further stress on families. Child safety involvement and notifications to families is highest amongst this group and some of these notifications are due to neglect or other issues associated with homelessness and poverty. Cycles emerge that take a heavy toll on families, children, society at large and government funding.

The second question is: can supportive housing for families with the goal of family preservation or reunification offer an effective alternative to this cycle of poverty, homelessness and child safety interventions? This question is explored through evidence of similar initiatives which offer insights into how this model might provide an alternative. The evidence established in these initiatives and studies suggests supportive housing might not only provide better outcomes for families, parents, children and the broader society but also generate genuine savings across government departments if they work within a collaborative framework.

The third question asks: what would an effective Families Supportive Housing Model look like and how could this model be transferred to local practice? Elements and factors critical to target selection, referral pathways and integrated program delivery will be unpacked to establish a framework which can mediate successful outcomes in keeping families together.

The results of this literature review can be found in Section 4. The review of international initiatives that demonstrate the efficacy of cross-sectoral models for at risk families is included in Section 5. The third question is addressed in Section 7.

3.2. Stakeholder engagement

Extensive stakeholder engagement was conducted with key informants from not-for-profit organisations and government agencies involved in child protection housing, homelessness support, domestic violence, family support, education and allied health to identify funding and service gaps and potential areas for reform to maximise social benefits and financial savings. The informants covered policy development and implementation, program design and management and direct service delivery.

Consultation methods included one-on-one interviews, a cross-sector interactive forum and a joint Common Ground Queensland and Micah Projects Board presentation and discussion with the Minister for Housing and Public works, the Minister for Communities, Child Safety and Disability Services and key departmental staff facilitated by Ms Ruth Anne White MSSA, a US expert on the nexus between housing policy and child welfare.

A Working Party comprising key stakeholders from Common Ground Queensland, Micah Projects, the Department of Housing and Public Works and the Department of Communities, Child Safety and Disability Services further guided direction on research scope, data inputs and the development of the Families Supportive Housing Model and a proposed pilot.
Expert advice on theory, practice and cost-benefit analysis was provided by Ruth Anne White, Executive Director of the National Centre for Housing and Child Welfare and former Director of Housing and Homelessness for the Child Welfare League of America. In her former capacity, Ruth co-edited the landmark issue of the League’s journal, Child Welfare, documenting the extent to which children are needlessly held in foster care because their parents lack decent housing. Ruth also coordinated conference site visits and advisory committees and wrote a newsletter concerning the Family Unification Program which provides federal housing vouchers to families where lack of housing is keeping children and parents apart.

A summary of the organisations / agencies consulted as part of this research is contained in Table 1.

Table 1: Stakeholder engagement – organisations / agencies

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<thead>
<tr>
<th>Organisation / Agency</th>
<th>Interactive Forum Participant</th>
<th>One on one interview</th>
<th>Working Party</th>
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<td>Brisbane Housing Corporation</td>
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<td>Churches of Christ Care</td>
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<td>Create Foundation</td>
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<td>Department of Social Services (Cwlth)</td>
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<td>Family Inclusion Network (FIS)</td>
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<td>Hummingbird House</td>
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<td>Queensland Network of Alcohol and Other Drug Agencies Ltd (QNADA)</td>
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<td>Save the Children</td>
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The information gathered through stakeholder engagement has been directly incorporated into the content of the report where appropriate. Additionally it has guided the literature review, case study and modelling process. A summary of key themes identified by participants attending the cross-sector interactive forum is provided in Section 6.

3.3. Supportive housing program design and application

The Families Supportive Housing Model developed for this report incorporates the learnings and principles of researched US supportive housing models which are applicable to families as well as the successful evaluation outcomes from the Brisbane Common Ground Supportive Housing program.

Based on a scattered site configuration, the subsidy model provides an alternative way of increasing the supply of affordable housing available to low income families from stock in the private rental market.

The multi-disciplinary support structure has been adapted to add resources that focus on the Parents as Teachers (PAT) model to foster two generational support as well as increasing the amount of resource allocations for parents to access employment and training opportunities so they can better support their families over the long-term.

A detailed cost benefit analysis has been conducted for a two year pilot project utilising the methodology developed by the United States National Center for Housing and Child Welfare. Where available, data collected and reported in the annual Report on Government Services (RoGS) or other published data was used to determine current costs associated with the provision of services in the homelessness and child safety areas. Learnings from the Brisbane Common Ground Supportive Housing program, information on the local housing market, knowledge of the local service system and inputs for the intended service model were utilised to determine the anticipated costs of the alternative response outlined in the Familie Supportive Housing Model.
4. Definitions, broad indicators and target groups

This section investigates the first question of this report by dissecting the complex interconnections between poverty, family housing stress, child safety and foster care and provides an understanding of how these interrelated issues impact on poor and disadvantaged families within the Australian context.

4.1. Poverty and Family Homelessness

Overall, 2.2 million Australians (nearly 14% of all Australians) are living below the poverty line after taking their housing costs into account (Australian Council of Social Service, 2014). Poverty has consistently been shown to contribute to families’ vulnerability to homelessness (Kolar, 2004; Kolar, 2005; McCaughey, 1992). Families that are homeless often only have Centrelink as an income source and are caught in a cycle of chronic unemployment due to frequently low education levels (Healy and Gal, 2007).

According to the Supported Accommodation Assistance Program Act 1994 (SAAP Act):

“...a person is homeless if, and only if he/she has inadequate access to safe and secure housing”.

“...a person is taken to have inadequate access to safe and secure housing if the only housing to which a person has access is: (a) damaged or is likely to damage a person’s health; or (b) threatens a person’s safety; or (c) marginalises the person by failing to provide: (i) adequate personal amenities; or (ii) economic and social support that a home normally affords; or (iii) places the person in circumstances which threaten or adversely affect the adequacy, safety, security and affordability of that housing” (Commonwealth Government, 1994).

While it is noted that there is no internationally agreed definition of homelessness, most definitions recognise the lack of safety, security and basic shelter as pivotal indicators of homelessness.

According to Chamberlain and MacKenzie (1992), there are three types of homelessness that people often experience:

1. Primary homelessness: people without conventional accommodation (‘street homelessness’ or rooflessness’ – living on the streets, in deserted buildings, in improvised dwellings, under bridges, in parks and so on);
2. Secondary homelessness: people moving between various forms of temporary shelter (including friends’ houses, emergency accommodation, youth refuges, hostels and boarding houses); and
3. Tertiary homelessness: people living in single rooms in private boarding houses without their own bathroom, kitchen or security of tenure.

This three tiered model forms the basis of a cultural definition based on ‘minimum community standards’ of housing. Thus, anyone living below what is accepted as a minimum standard can be classified as ‘homeless’ (McIntosh and Phillips, 2000).

Families are particularly susceptible to secondary homelessness, but are increasingly presenting to support services with primary homelessness. A similar connected type of homelessness that families experience is iterative homelessness. This is the repeated movement through accommodation due to housing instability. According to Robinson (2003) families experiencing iterative homelessness often cycle through tenuous and unacceptable forms of accommodation such as hostels, licensed and unlicensed boarding housings, caravan parks, staying with friends, etc.

In 2010-2011, approximately 80,800 children aged 0-14 years from across Australia accompanied a parent or guardian in seeking assistance from a specialist homelessness agency. In 81% of cases children accompanied an adult female, 5% accompanied a male and 14% accompanied a couple (AIHW, 2012). According to the AIHW data for 2014-2015, families account for 47% of all those accessing specialist homelessness agencies. Single parents with one or more children accounted for 34% of that 47% (AIHW, 2016). Further to this, children aged 0-5 years accompanied by their parents are the fastest growing group presenting to these services. As such it is a concern that homeless families with children are becoming the “new face of homelessness” in Australia (Barker et al, 2013: 22).
There are a range of other factors besides poverty and unemployment that impact families’ vulnerability to iterative homelessness or other forms of homelessness. These factors include: inadequate social support, relationship breakdown, previous abuse and neglect, substance abuse, mental health issues and domestic violence (David et al, 2012; Gibson and Johnstone, 2010). Evidence is emerging that the main reason women with children are homeless is due to domestic violence, sexual assault and family breakdown (Australian Human Rights and Equal Opportunity Commission, 2012). In the 2014-2015 period, one in three accessing specialist homelessness agencies sought support due to family and domestic violence (AIHW, 2016).

4.2. Family housing stress and its impacts

As noted above, family housing stress is exacerbated by factors such as poverty, domestic violence and an inadequate supply of affordable housing. Moreover, appropriate housing (suitable size, safety, standard and tenure), services and incentives that tackle housing stress for families such as private rental subsidies are virtually non-existent.

In the capital cities of Australia the lack of affordable housing has reached crisis levels (Economic References Committee, 2015). In Brisbane, despite increases in supply, affordability is almost unreachable for families, particularly for a single headed household on Centrelink benefits or the minimum wage plus Family Tax Benefit (Anglicare Australia, 2015). Even if families are able to find private rentals in Brisbane the housing will cost considerably more than 30% of their household income, which can compromise other needs important to the family (Anglicare Australia, 2015). Such unaffordability means that families often, unless they have secured subsidised public or community housing, cycle in and out of insecure housing tenures. This instability undermines a family’s sense of certainty, control and autonomy and places undue strain on families and their routines (Taylor and Edwards, 2012).

Further to this is the declining stock of available social housing (both public housing and community managed) in Brisbane. According to Groenhart and Burke (2014), contraction of funding for social housing has steadily declined since the 1980s resulting in smaller investment in social housing as a proportion of all housing. This means that the increase in homeless and low-income family numbers is outstripping any nett gain in social housing, be it public or community managed.

Housing that is available is often not suitable for the needs of many families. The ‘Future Living’ Discussion Paper from the City of Melbourne (2013),

“...provides a picture of a growing but increasingly one-dimensional housing market comprised of small, high density, and high-rise apartments developed for the investor-rental market. In the Melbourne local government area, 93% of all new dwellings constructed between 2006 and 2012 were apartments, and 92% of them were 1 or 2 bedroom apartments (City of Melbourne, 2013: 53)” (Martel, 2013: 5).

Similar anecdotal evidence exists in Brisbane with an oversupply of private and social housing which does not suit the needs of families. This leads to families being forced further to the fringes of the city. New models and approaches to tackle this issue of affordability are necessary both from the private and public sector before this ‘new face of homelessness’ escalates further.

Housing stress, family homelessness and other poverty related issues are also known to have profound effects on children’s health and wellbeing (Moore et al, 2011) and have been identified as a common pathway to future homelessness for young people in their teenage years and into adulthood (Flatau et al, 2012; Swick, 2008). Adverse experiences for families such as homelessness have a greater impact on children the younger the child (Moore et al, 2006). Evidence also suggests that the more frequent the moves, such as iterative homelessness the greater the negative effects on children’s health and wellbeing (Kirkman et al, 2010; Moore et al, 2006; Taylor and Edwards, 2012).
According to Gibson and Johnstone (2009), cited in Healy (2011: 10):

“Homelessness and unstable housing can have a profound effect on children’s physical and mental wellbeing and development. Children from these vulnerable families experience mental health disorders, difficulty with attachments, poor physical health, developmental delays, social exclusion, poor education performance and attainment, and generally elevated feelings of stress and insecurity.”

Homelessness further impacts on family relationships (Keys, 2009; Moore et al, 2011). Familial breakdown, stress and tension negatively affect simple things such as daily routines and can result in issues such as reduced school attendance and disengagement with education and learning (Fantuzzo et al, 2012; Masten et al, 2012; Wilson and Squires, 2014).

In 2014 the Brisbane 500 Lives 500 Homes collective impact initiative established a registry based on surveys of 1182 individuals and families across the Brisbane LGA who were homeless or vulnerably housed. The snapshot provided by the registry data showed that, of the 193 adult and 74 young families surveyed, 15.5% and 2.7% respectively had school-aged children who were either not enrolled in school or had missed more days of school than had attended in the past semester (Micah Projects, 2014a; 2014b).

Moore et al (2011: 5) states:

“Gaps in family functioning are cumulative: the more advantaged families are initially, the better they are able to capitalise and build on the enhanced opportunities available, so that the gap between them and those unable to do so progressively widens. The result is that there has been an increase in the numbers of families with complex needs and more pockets of intergenerational disadvantage, underachievement and poor health and developmental outcomes.”

4.3. Family homelessness and the Child Protection connection

National and international evidence suggests that family homelessness substantially increases a child’s risk of coming to the attention of the child protection service system and of being removed from their families (Metis Associates, 2010). In 2015 the proportion of Queensland children subject to child protection notifications was 20.8% of total intakes (Queensland Department of Communities, 2016). Families experiencing homelessness are over-represented among families notified to child protection services with one qualitative study showing that up to 50% of the homeless families participating in the study had contact with child protection services in the preceding year (Noble-Carr, 2006). Within the Brisbane LGA, the 500 Lives 500 Homes registry showed that 24.4% of the 193 adult families who were homeless or vulnerably housed had contact with child protection services within the previous six months (Micah Projects, 2014b). In the same registry, 12.4% of those families had interactions with the Family Court within the previous six months. Similar trends were reflected for the 74 young families surveyed with 24.3% having contact with child protection services within the previous six months and 10.8% having interactions with the Family Court for the same period (Micah Projects, 2014a).

Family homelessness increases the risk of child abuse and neglect for a range of reasons including:

- Reduced family access to health, educational and community service infrastructure needed to promote and support the well-being of families (Healy, 2011); and
- Increased financial stress on families due to the high costs often associated with temporary or transient housing.

It is clear that housing does matter when it comes to child protection. According to the National Centre for Housing and Child Welfare (2016), homelessness and housing challenges shapes each decision point in the child protection continuum. Children from families with housing instability are more likely to be investigated by child protection services, placed in out-of-home care and stay longer in foster care (Culhane et al 2003; Courtney et al, 2004). Research in the US found that housing problems were a factor in the removal of 30% of children removed (National Centre for Housing and Child Welfare, 2016). Evidence is also mounting that housing insecurity, a tangible

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2 Parent completing the survey aged 25 years or older.
3 Head of household aged under 25 years.
manifestation of poverty, is a strong indicator of whether a child will enter out of home care (Sedlak et al, 2010). While detailed research in Australia is lacking, the data from 500 Lives 500 Homes Registry and Noble-Carr’s (2006) review, indicate that child protection and homelessness agencies are often working with the same families and children. The problem is they often work in silos with little interaction between the two (Gibson and Johnstone, 2010).

According to Gibson and Johnstone (2010: 8):

“[i]t is worth noting that homelessness may be considered a factor when a determination of ‘neglect’ is made by the various child protection agencies. The available data suggests that the number of homeless children coming to the attention of child protection systems may be sufficiently sizeable to warrant closer scrutiny.”

Although the exact numbers are unknown there are a proportion of interventions by child safety that are due to poverty and homelessness. These are associated with unintentional neglect rather than intentional abuse. According to AIHW (2015), in the 2013-2014 period in Queensland, 43% of all substantiated harms of child maltreatment were ‘neglect’ as opposed to the remaining 57% being made up of emotional, physical and sexual abuse.

In an unpublished analysis from the Department of Communities, Child Safety and Disability Services (2015), homelessness alone only made up a small proportion of notified concerns. A significant proportion of all notifications occurred because of other factors such as unhygienic living conditions (a factor of overcrowding, insecure tenure and couch surfing) and limited parenting skills (an attribute of intergenerational poverty). The number of children that have a substantiation of a notification of abuse or neglect in 2013-2014 was 40,844 Australia wide (AIHW, 2015).

An associated issue is domestic violence, which can lead to homelessness and/or child safety involvement. According to the Carmody Inquiry (2013), domestic violence is a leading risk factor for statutory intervention. As stated earlier, domestic violence is also one of the leading reasons for presenting in Australia to homelessness agencies. The correlation highlights this as a major area where service system improvements to better protect and keep women and their children stably housed, would prevent unnecessary removals or support rapid reunification once the danger has been eliminated.

Issues of intergenerational poverty, institutionalisation and ethnicity cannot be underestimated. Aboriginal and Torres Strait Islander Peoples are over represented in homelessness presentations, notifications, domestic violence and institutionalisation. Similarly, families with parents who have previously themselves experienced intergenerational abuse and might have been in the foster care system are 25% more likely to have child safety involvement (Carmody, 2013). Snapshot data from the 2014 Registry of Brisbane of families experiencing homelessness or vulnerably housed, showed that of the 193 adult and 74 young families surveyed, 25.7% and 23% of parents respectively had themselves been in foster care or institutional care as a child (Micah Projects, 2014a; 2014b).

The evidence is that keeping families together or reunifying is in the best interest of families, if safe to do so and should be the emphasis of child protection agencies (Fernandez and Lee, 2011).
5. Cross-sectoral models

This section explores the potential for established overseas models that address the issues presented above through an integrated approach by housing/homelessness agencies and child protection services. This section first examines the Family Unification Program in the US that aimed to overcome siloed approaches to the issue, then explores supportive housing as an alternative approach to working with child welfare-involved families. This section then turns to the importance of effective targeting families for this intervention to ensure that both social and economic returns on investment are realised. Finally effectiveness of studies assessing the outcomes delivered by supportive housing for families with child welfare involvement, for children, families and the community at large is discussed.

5.1. Family Unification Program

The Family Unification Program (FUP) is a federal initiative in the US to address the housing needs of families in contact with child welfare agencies (Fowler and Chavira, 2014). FUP works through local partnerships between public housing authorities and child welfare agencies (NCHCW, n.d.). Its impetus was the recognition that intervention to stabilise housing for families whose housing is threatened can avoid costly parent-child separation through child welfare services (White, 2012 cited in Fowler and Chavira, 2014).

According to the National Centre for Housing and Child Welfare (n.d.: 1), the FUP “...aims to provide the child welfare system with the resources necessary to prevent family separation due to homelessness and to prevent homelessness among aging-out youth.” Families who are eligible include families whose inadequate housing threatens to result in formal out-of-home placement and families whose housing situation delays or prevents reunification with a child already removed. Inadequate housing and housing situations recognised in FUP include direct homelessness, imminent risk of eviction, displacement because of domestic violence, substandard or dilapidated living conditions, overcrowding and inaccessible housing for disabled children (Fowler and Chavira, 2014).

FUP works through providing housing subsidies, through vouchers, to eligible families. Since its inception in the 1990s over 46,000 vouchers have been dispensed with over 200,000 children either being able to avoid foster care placement altogether or be reunited with their families (NCHCW, n.d.). Setting aside the positive benefit on children and families, the national savings of such a program is considerable. For an average family whose children have been removed, the average costs to government annually for foster care is $47,608, compared to an annual cost of approximately $13,412 which includes vouchers from the initiative as well as supportive services (NCHCW, n.d.).

According to Dworsky (2014: 4), “an early evaluation of the program in 31 communities demonstrated the program’s potential to promote stable housing as well as family preservation and reunification.” While controls in this evaluation were not used, a more recent study by Fowler and Chavira (2014), using randomised controls for one FUP trial, found that it could offer an effective alternative to foster care.

5.2. Housing First and Supportive Housing

Housing First is a model developed out of New York in 1992 initially intended to support and house people with psychiatric diagnoses and substance abuse problems. The philosophy behind Housing First grew out of consumer choice: contrary to received wisdom that people should become housing-ready before being housed, consumers wanted a home first. With Housing First, housing was no longer contingent on drug and alcohol rehabilitation or any other restriction or condition. This approach was a revolutionary paradigm shift from traditional programs, which undermined choice and autonomy, put strict limits on tenancy rights and segregated those with mental illness from others (Greenwood et al, 2013).

Supportive housing, based on a Housing First approach, focuses on the intentional linking of housing with intensive and integrated support. Initially established in the 1990s in New York for individuals who had experienced chronic homelessness, the Common Ground model is now operational in six Australian capital cities and in Port Augusta. Quality housing on long-term tenure is linked to a range of wrap-around support and health services, accessed by tenants on a voluntary basis (Costello et al, 2013).
The points below list key features of supportive housing (CSH, 2015; Rog et al, 2014):

- Targets individuals or families experiencing homelessness or at-risk of homelessness who may also be facing multiple barriers to employment and housing stability, including mental illness, substance use and/or other disabling or chronic health conditions;
- Tenants have full rights of tenancy, including a lease in their name as well as standard tenancy obligations;
- Service participation is not a condition of housing;
- Housing is affordable, with tenants paying no more than 30% of their income toward rent;
- Housing is integrated into the community;
- No limits on length of tenancy as long as tenancy conditions are met; and
- Tenants can choose from a range of services based on their needs and preferences which can be adjusted over time as needs change.

Overseas jurisdictions have established that supportive housing has positive outcomes for tenants and generates savings for government in expenditure on expensive tertiary services that tenants over utilise when homeless, such as the criminal justice system, emergency health system and acute mental health system. Similar findings have been made in Australia with the recent evaluation of the Brisbane Common Ground Supportive Housing program finding substantial savings when comparing cost of services consumed by tenants in the year before and the year after moving into Brisbane Common Ground. This was in addition to findings of improved health and wellbeing and satisfaction for tenants (Parsell et al, 2015).

There is also developing evidence of the success of supportive housing for formerly homeless families. In the US, a growing body of research suggests that families with long histories of homelessness who struggle to maintain self-sufficiency and stability have promising results when provided with supportive housing (Bassuk et al, 2006). While most homeless families experience homelessness as a short once-off episodic event, there are families that cycle in and out of homelessness often due to issues such as mental health and substance misuse problems (CSH, 2016). According to Burt (2006) cited in Dworsky, (2014: 5), “evaluations of these programs have generally found that homeless families experience an increase in housing stability as well as improvements in other outcomes.”

Amy Dworsky (2014: 5-6) in ‘Families at the Nexus of Housing and Child Welfare’, states that:

“A number of supportive housing programs specifically targeting homeless families with child welfare system involvement have been developed in recent years. A few programs have been evaluated (e.g. Keeping Families Together in New York City; Serna Village in Sacramento; and Supportive Housing for Families in Connecticut) and some promising findings have emerged. These include increase in housing stability and child welfare closures as well as reduction in the foster care re-entry rate.”

Encouraging evidence of this model in a New York City pilot project called ‘Keeping Families Together’ shows real merit in pursuing such an approach. This project involved the implementation of evidence-based practices to improve outcomes for 29 families with young children (0-5) who are homeless, at risk of homelessness and child protection intervention. The initiative is based on indicative modelling with the Centre for Housing and Child Welfare, Washington USA. Potential savings to the child protection system have been identified by investing in housing plus family support and early childhood services.

The external evaluation titled ‘Keeping Families Together: An evaluation of the implementation and outcomes of a pilot supportive housing model for families’ involved in the child welfare system found that:

- The pilot project maintained housing stability for 89% of families;
- Reduced child welfare involvement with 61.6% of child welfare cases that were open at the time of moving in being closed during tenancy; and
- High reunification rates of those families’ whose children had been removed (Metis Associates, 2010: iv-v).
A cost offset analysis of this pilot project was also undertaken. It found that families placed into supportive housing through the pilot reduced their actual and potential use of foster care services by 5,415 days over two years and their shelter use by 13,703 days over two years. Together these reductions in foster care and shelter represented a total cost offset of $1,866,592 over two years, or $64,365 per family. Assuming a two year per unit cost of supportive housing of $66,552, foster care and shelter reductions alone offset 97% of the cost of supportive housing. This does not take into account offsets in other emergency public service systems (CSH, n.d.).

While indicative findings show this model’s positive impact on reducing child welfare involvement, increasing housing stability and enabling family reunification when tailored correctly, the initial studies were not controlled studies and were based on reasonably limited sample size. Forthcoming evaluations that address these issues were commissioned in 2012. These studies aim to definitively establish whether such a model decreases child abuse and neglect, keeps families together, strengthens parenting, improves outcomes for children, reduces the number of child in foster care, shrinks child welfare caseloads, saves taxpayers money and leads to long-lasting system change (Cunningham et al, 2014).

5.3. Emerging components of the model

From the evidence available to date, the Corporation for Supportive Housing (CSH) has identified key components that should be taken into account by any community wishing to undertake a similar initiative for homeless and/or welfare involved families. This includes:

- Appropriate supportive housing;
- Targeted recruitment using appropriate criteria to select the right families;
- Multisystem collaboration to support the complex needs of families and integrate between agencies; and
- Clinical consultation to equip case managers with skills and evidence-informed practice; and evaluation to improve praxis and build evidence (CSH, 2012: 4-5).

Supportive housing refers to housing which is good quality, permanent and affordable, is coupled with housing stability services, has informed property or landlord management and has linked family tailored case management and service coordination (CSH, 2012). In regards to scattered-site versus single-site models with this target group the verdict is still out. Single-site, with onsite case managers, supports higher needs families but the flip side is families can become dependent and this might impede growth towards future self-sufficiency (Metis Associates, 2010: 50).

The clinical consultants play a key role and train case managers to provide appropriate support to high-needs families with specific needs. Case managers need to be equipped with knowledge and skills in wellness and self-management intervention, addiction and harm reduction strategies, as well as child development and trauma-informed practice (Metis Associates, 2010: 52).

The ‘Keeping Families Together’ pilot project identified that the most cost-effective outcomes are realised for families with the following characteristics:

1. Family is extremely low-income;
2. Family has history of persistent and repeated contact with child welfare system either through multiple reports, family is under court supervision or a child has been removed;
3. Caregiver has persistent challenges and little social support which means they have more than one chronic condition or other factors such as history of domestic violence or children with special needs or similar issues; and
4. Family has long-term or repeated pattern of homelessness and/or housing instability (CSH, 2012: 10).

Setting these characteristics as criteria for selection of families, requires collaboration between homelessness and child protection systems, if recruitment is to be effective. The ‘Keeping Families Together’ pilot project did experience these challenges initially but they were able to be addressed through cross-sectorial collaboration, data sharing between agencies and case conferencing (CSH, 2012: 11).

4 The annual public cost of supportive housing was calculated by totalling the annual public funding provided to cover operating (rental assistance) and supportive services costs for all 29 units, along with the annualised public capital grants used to finance the 24 single-site units (CSH, n.d.).
6. Stakeholder engagement: what works, what doesn’t work, what could we do better?

Individuals representing NGOs, local, state and federal government agencies and academia were invited to attend an interactive forum on Wednesday, 3rd February, 2016 to explore links between the lack of affordable housing, family functioning and child safety. The event was organised and sponsored by Common Ground Queensland.

The interactive workshop was preceded by presentations from leading US expert, Ruth Anne White (Executive Director of the National Centre for Housing and Child Welfare), Lindsay Wegener (CEO of Peakcare) and Karyn Walsh (CEO of Micah Projects). Presentation topics included ‘After Carmody – the relevance of supportive housing to child protection in Queensland’ and ‘Keeping Families Together – the US evidence’. Participants for the interactive forum were identified by Common Ground Queensland and Micah Projects.

Table 2 provides a summary of the number of invitees and participants.

Table 2: Interactive Forum Attendance

<table>
<thead>
<tr>
<th>Sector</th>
<th>Invited</th>
<th>Accepted</th>
<th>Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-government Organisations</td>
<td>116</td>
<td>46</td>
<td>36</td>
</tr>
<tr>
<td>Government Agencies</td>
<td>60</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Academia</td>
<td>9</td>
<td>1</td>
<td>0</td>
</tr>
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The interactive forum session was facilitated by Kerry Batchler from Micah Projects.

Participants were asked to workshop the following questions in small groups and present their views to the larger group for broader discussion and consideration:

1. In your work / contact with vulnerable families:
   a. What would support better outcomes for the children, the families and the community?
   b. What is missing? How often does this occur?

2. If we were to do better, what would it look like?

Responses to these questions are reported under subheadings relating to the objectives of the research. A detailed summary of the interactive forum is provided in Appendix A.

Please note, recurring themes were also raised by individuals during the one on one interviews.

6.1 Cross-sector Collaboration

Discussion pointed to the value of partnerships to remove barriers that prevent information sharing across government portfolios and NGO support services. The need for greater communication and collaboration was a key theme raised, with informants citing that cross-disciplinary knowledge and cooperation would facilitate better matching of services and client outcomes. In particular, it was identified that more efficient and timely communication between government departments regarding families’ individual circumstances would help foster a response culture where actions are inter-linked and connected to integrated strategies of support. The benefits of cross-sector training were also supported by the group.

6.2 Flexible Funding

Models which incorporated flexible funds were considered advantageous to reduce red tape, address needs on an individualised basis and fund support which falls outside of program scope. For example, one informant suggested that in cases where families were working towards reunification, adequate entitlements are maintained to foster the circumstances which would allow children to return home (i.e. housing stability is not compromised by reduced Centrelink payments while children are in Out of Home Care). Informants also indicated flexible funds could facilitate rapid re-housing responses in cases where children were at risk of removal due to homelessness or housing instability (i.e. families facing eviction or experiencing domestic violence, etc.) and could also provide more medium to long term responses such as permanent supportive housing for the most vulnerable families.
The Wraparound Milwaukee...One Child, One Plan system was identified as one effective model of flexible funding in which a combination of state and county agency funds are pooled to create maximum flexibility and sufficient funding for children with serious emotional, behavioural and mental health needs and their families.

6.3 Link Housing with Support

Informants raised the value of combining intentional support with housing in cases where homelessness or inadequate housing is a presenting factor for removal or a barrier to reunification. A number of informants suggested the benefits of incorporating skilled housing workers within Child Safety or to create a specialist housing role which could bridge the expertise gap between the departments. One informant noted that it often takes strong advocacy from a caseworker to secure housing for families in need. Firstly they don’t know what housing options are available and secondly they lack housing-specific knowledge and skills to broker tenancy agreements.

6.4 Early intervention / prevention

A number of informants noted the importance of early invention and prevention to avoid or minimise the ongoing impacts of child safety interventions. Suggestions included:

- Fast track referrals to a dedicated area in Child Safety when housing is the primary concern for the family or is the presenting factor for potential removal (i.e. facilitate rapid re-housing);
- Create linkage touch points rather than over-servicing – provide a way for families to access services, information and community support to circumvent the need for child safety intervention (i.e. through schools, doctors, generic services, etc);
- Ask families what they need – inform and empower families by involving them in the decision-making process;
- Develop and promote non-punitive pathways for engagement (i.e. build trust with families so they can ask for help without the fear that their children will be unnecessarily removed); and
- Provide ‘in-home’ program delivery and tailored support for parents / carers.

6.5 Housing Supply, Design and Tenure

There was general agreement that housing affordability is an escalating problem in Brisbane and that increasing rental levels and a lack of affordable supply were causing housing stress. Insecure tenure, decreased stock of larger dwellings (i.e. 3+ bedrooms) and inadequate siting of housing to transport, employment markets, schools and health care were considered additional barriers affecting many low-income families.

Informants advocated that housing needs to be in the right location – near the infrastructure that families need to use. It also needs to be family friendly – enough space and well connected to community.

Informants also discussed a need for innovative financing and tenure options to stimulate greater investment in the long-term supply of affordable housing such as tax incentives for owners to support families on low incomes through long-term leases and joint equity models.

6.6 Government Support

Government support and leadership, at various levels, was considered an essential driver to initiate reform and appears to unpin the success of many of the examples cited by informants and identified in the preceding literature review.

Informants advocated investment in local pilot trials to test and evaluate models that have proven outcomes overseas and discussed the need for government to stimulate opportunities either through tax and planning incentives or subsidy programs to attract private investment for affordable housing supply.

Informants also spoke of a need to create a sense of urgency to encourage government to develop alternative models of delivery which can address current system gaps and provide more sustainable outcomes for families and communities.
7. Families Supportive Housing Model – the case for change

The Families Supportive Housing Model would target families identified at risk in both the child protection system and the homelessness services system. The model is compatible with current philosophical changes within the Queensland child protection system which emphasise:

1. Keeping children at home with their families except in the most precarious situations; and
2. Assessing rather than investigating families where safety risks have been identified.

The supportive housing approach integrates a housing subsidy with “permanent, affordable housing combined with a range of supportive services that help people with special needs live stable and independent lives” (Metis Associates, 2010: 3). The supportive housing model uses “…stable housing as a platform for health, recovery and personal growth.” (CSH, 2015: 2).

The model is applicable to two child protection scenarios: (1) as an early intervention to keep families together and child safe in situations where unstable housing circumstances have contributed to ongoing risk of child protection concerns; and (2) a basis for family reunification where housing issues are a factor preventing a child’s return to the family.

7.1. Social value proposition: theory of change

The theory of change underpinning the proposed program model is that the provision of secure stable housing coupled with a range of supportive services (family support, health, early childhood, financial stability) for complex families who are homeless or unstably housed and at risk of child protection intervention will strengthen, skill and stabilise families, thereby reducing avoidable (where housing is a key contributing factor) child removals or facilitate early family reunification where children are already in care.

As a result, the adverse intergenerational life outcomes (and their costs to the community) associated with poverty, disadvantage and family separation will be reduced.

The supportive housing model focuses on a coordinated and integrated response to promoting housing and family stability. This requires increasing the supply of affordable housing plus investment into multi-disciplinary family support services.

The proposed model draws from evidence arising from a current longitudinal study of the ‘Keeping Families Together’ project (Metis Associates, 2010) discussed in Section 5.2. This model would prevent the removal of children whilst investigations continue and support earlier reunification of children with their families when removal has occurred. Additional savings to government would occur in high cost areas of government spending including crisis responses, crisis accommodation, child protection interventions (removal often leads to multiple placements and separation of siblings and family members), a broad spectrum of health, criminal justice and education costs. The early childhood services would focus on school readiness with children and their families to prevent delays in educational attendance and achievements. The core assumptions of a supportive housing application to families are:

- Supportive services without stable, safe and affordable housing are insufficient for the most at risk families;
- Housing alone without services, will not result in long term stability and positive family functioning;
- Housing instability and behavioural challenges interfere with the capacity of parents to properly care for their children; and
- Housing stability and long term support focused on healthy family functioning and parental skill-building can bring an end to child neglect.

The key pre-requisites or interim outcomes on the path to achieving long term goals are to end or greatly reduce child protection involvement and increase housing stability. To achieve these long term outcomes CSH identifies the following key factors that are required:

- Families take psychological ownership of their homes and gain the insight needed to recognise their behavioural health needs and work with service providers on their goals;
• Parents build child–centred social skills, that is parents must recognise and understand their needs and be committed to family drive decisions regarding their addictions, relationships, community engagement, health and wellness, as well as prepared to learn and understand their children's needs and goals for school readiness or school attendance;
• Each family has a flexible plan that recognises the family strengths;
• Families have collaborative, long term relationships with service providers for which the families and service providers must together build and sustain a network of care and empathy around the families; and
• Families stay together.

In order for all this to be possible the theory of supportive housing has three fundamental preconditions:

• Permanent, safe, secure and affordable housing is available;
• The program can recruit and identify families who will most benefit from this intervention; and
• The program has skilled service providers in tenancy management and family support who will work in partnership to coordinate efforts around the families as tenants and citizens in the community.

7.2. Adapting emerging practice in Brisbane – Families Supportive Housing Pilot

Current and Projected Demand for the Model

Within the Brisbane LGA we know that families are being prevented from reunification due to homelessness in some incidences. We also know that domestic violence, the biggest reason for presenting at homelessness agencies, is often a factor in child safety issues and also in impeding reunification. Likewise we know that some cases of substantiated reports of harm are due to neglect accounted for by iterative or other types of homelessness and insecure tenure.

Evidence from abroad indicates that a pilot to replicate and build on the ‘Keeping Families Together’ model successfully implemented in New York has real potential to reduce child maltreatment risk among vulnerable families within our own communities. Also indicated is generation of substantial cost savings, particularly if targeted effectively for families experiencing:

• Homelessness or at high risk of homelessness as indicated by housing insecurity (highly transient or emergency arrangements and may include no tenure through to tenure of less than six months), housing unsustainability (housing costs constitute 30% or more of the household income), or unsuitability (overcrowding or unsafe housing);
• Homelessness or at risk of homelessness due to domestic violence;
• Instances where Child Safety Services has identified the children as being at significant risk of harm requiring ongoing intervention for at least three months with the family such as Intervention with Parent Agreement or similar to secure the child’s safety;
• At least one of the following high risk criteria for child abuse or neglect – a parent or caregiver in the family has a mental health condition or substance misuse challenge, where the family has a prior history of domestic violence, the parent is young (under 25 years) or in families where the unborn child is subject to a notification of concern;
• Instances where children’s vulnerability is exacerbated due to young age or developmental disability; and
• Instances where children are in foster care and the barrier to reunification is housing.

Wrap-around services

Supportive housing policy and practice provides the evidence for tenancy management and coordination with family support services through case management. A proposed Families Supportive Housing Pilot would integrate three evidence models: the ‘Keeping Families Together’ approach (refer Section 5.2); the Parents as Teachers (PAT) approach and The Brisbane Common Ground Supportive Housing model.

PAT is an evidence-based approach to working with parents of preschool children to support family functioning and respond to the developmental needs of children to promote school readiness and early childhood competencies. The model has been developed and tested in the US and is being implemented by non-government family support programs in several States of Australia. Micah Projects has begun implementation of this model in Young Mothers
for Young Women, its support and advocacy service for young women. The program provides a non-stigmatising vehicle through which parents learn new skills in supporting the emotional and intellectual development of their children.

Application of this program under a Families Supportive Housing Pilot would see participants allocated a case worker whose responsibility would be to work collaboratively with the family to develop and implement a support plan to achieve increased housing stability and family well-being. The plan would involve short term, intermediate and long term goals. The case worker would meet at least fortnightly with the family to review and continue to develop, implement and evaluate the case plan.

While the case work plans would be negotiated with each family, it is anticipated that the plan would have an early intervention focus aimed at identifying and addressing risks to housing and family stability including:

- Risks to housing such as rent arrears or early resolution of neighbourhood disputes through coordination between property managers and family support case managers;
- Child protection risks;
- Child well-being needs and concerns, such as identification and early intervention to ensure that children’s health and educational needs are met in ways that promote achievement of developmental milestones;
- Implementation of PAT early childhood program; and
- Actively linking families with universal and specialist services in the community.

In a local context the pilot would also build on the success of the Brisbane Common Ground Supportive Housing program. Operational for three (3) years, this program targets the population group of rough sleepers transitioning to a ‘Housing First Model’, that is moving straight from the streets, cars, or squats into secure affordable housing with onsite security, individualised support (case management) and health services (clinical support). The recent evaluation which provided a comparative cost study of actual service utilisation pre and post tenancy identifies cost offsets to government of $13,100 per formerly homeless tenant per year for the 41 tenants who consented to access to their administrative records. Brisbane Common Ground provides housing to 73 formerly homeless tenants at any one time (50% of the tenant body with the other 50% being people on low incomes) which offers a potential total cost offset saving to government of $956,300 per annum.

**Program logic and targeting**

A Families Supportive Housing Pilot would apply the same principles and program logic (Appendix B) to children and families for engaging, housing and providing family support service to high need families with the ultimate goal of preventing foster care placement, promoting housing stability, and breaking the cycle of intergenerational poverty, homelessness and systems involvement for parents and children.

Through local consultation it has been agreed between Department of Communities, Child Safety and Disability Services in Brisbane to focus on families with children:

- From pregnancy to five years of age;
- Who are engaged with Child Safety due to housing instability and other risk factors such as addiction, mental health, disability of the parent;
- Who are accessing homelessness services and are at risk of intervention; and
- Who are in foster care and the barrier to reunification is housing.

With effective targeting and a framework based on cross-sector referral (Specialist Homelessness Services, Domestic Violence Services, Child Safety Services, Department of Housing and Public Works and Queensland Health) such a pilot would allow agencies to better manage the complex needs of clients, provide a more coordinated service and achieve a cost benefit savings across the child protection / homelessness systems.

**Geographic Scope**

The geographic scope of the pilot is proposed for the Brisbane LGA due to the acute shortage of permanent adequate affordable housing for families. Rental properties in Brisbane Inner City are largely unaffordable and / or inappropriate for low income households (nearly half are two bedroom units) (Anglicare Australia, 2015). There are
further challenges with social housing including long wait times to secure a tenancy, lack of housing diversity and age of housing stock.

The model’s application however, could easily be replicated to accommodate local and regional variations and would be particularly suited to areas which are affected by major social and economic disadvantage and lack coordinated funded family support services. Whatever region or local communities are chosen, the modelling would be adjusted to market variables.

7.3. Securing housing supply – an essential program condition

Central to the concept of supportive housing is that it is both integrated into the community and responds to community needs.

Two (2) approaches are commonly used to increase the supply of affordable and secure housing required for family supportive housing programs; single site models and scattered site models.

Single site models generally require capital funding for a purpose designed building with provisions for on-site services for children and parents.

Under the scattered site approach, housing is allocated across the community with outreach family support provided. A housing subsidy to the provider of private or community housing is required to enable low income families to access private market rent housing.

Table 3 provides a summary of considerations for each approach.

Table 3: Single Site / Scattered Site considerations

<table>
<thead>
<tr>
<th>Consideration</th>
<th>Single site (purpose-designed)</th>
<th>Scattered site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selective targeting</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Secure tenure</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>On-site service interventions for families (children and adults)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Outreach service interventions for families (children and adults)</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>24/7 services provided</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>On-site security</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Housing subsidy (private rental)</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Annual operational subsidy and security costs (dependent on style of housing and after hours coverage)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Purpose built to best meet needs of families (location, physical design, unit mix and use of space)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Land availability and land purchase costs</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Property development (planning and construction costs)</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Leverage resources available for affordable housing development</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Knowledge of local area planning and design in relation to density and allowable design features</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Upgrade / retrofit costs (security features, universal modifications, etc.)</td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>
Due to the capital costs requirements and the timeframe limitations of the pilot, the modelling has been developed around a scattered site model. It is envisaged, future interest and investment in a single site model could potentially be stimulated by the successful outcomes of the pilot with opportunities to target families that would benefit from additional security and on-site intensive support (i.e. highly vulnerable and those escaping domestic violence).

7.4. Evaluation

It is hypothesised that the Families Supportive Housing Pilot will reduce child protection risk and improve family functioning and social integration by:

- Enabling vulnerable families’ access to housing through provision of a housing subsidy;
- Enhancing families’ capacity to sustain housing by early intervention to address issues associated with loss of housing;
- Providing home based family support including parenting skill development; and
- Facilitating families’ engagement with community support services such as child care, early childhood education and family support groups.

The evaluation approach will involve a quasi-randomised control model in which the data from the intervention group will be matched to a similar population using Micah Project services. A traditional randomised control model will not be used on the grounds that it involves deliberately withholding services from the non-intervention group even though there are grounds to justify these interventions are effective and that deliberately withholding them may be disadvantageous to the non-intervention group. Instead data from the intervention group will be matched to other clients involved with Micah Projects outside the trial period; that is families already involved with Micah Projects or who became involved after recruitment to the trial ceased.

Table 4 indicates the dimensions of the proposed evaluation, the data that will be gathered and analysed to comprehensively assess the impact of the pilot on child protection, health and well-being, social and economic integration and housing outcomes.
**Table 4: Evaluation Indicators**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Indicators</th>
<th>How measured?</th>
<th>Comparative data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child development outcomes</td>
<td>• Meeting child-development outcomes&lt;br&gt;• School readiness&lt;br&gt;• Participation in childcare, early childhood learning, school attendance</td>
<td>Child development assessments&lt;br&gt;Case records</td>
<td>• Compare matched families for:&lt;br&gt;- Child developmental outcomes&lt;br&gt;- Participation in childcare, early childhood learning and school attendance</td>
</tr>
<tr>
<td>Family Well-being outcomes</td>
<td>• Satisfaction with family life&lt;br&gt;• Improvement in parenting skills such as managing difficult situations</td>
<td>Survey&lt;br&gt;Interview&lt;br&gt;Case record</td>
<td>• Compare matched families for:&lt;br&gt;- Parenting skills&lt;br&gt;- Satisfaction with family life</td>
</tr>
<tr>
<td>Housing stability</td>
<td>• Length that housing is maintained&lt;br&gt;• Reduction in number and range of threats to tenancy caused by rental arrears or behavioural issues</td>
<td>Interviews&lt;br&gt;Case record audit</td>
<td>• Compare matched families for:&lt;br&gt;- Length of housing tenure&lt;br&gt;- Frequency and range of threats to tenure</td>
</tr>
<tr>
<td>Social integration</td>
<td>• Increased participation in community activities&lt;br&gt;• Increased use of community services (library, community house)</td>
<td>Survey/ interview&lt;br&gt;Case record audit</td>
<td>• Before and after comparative data&lt;br&gt;• Data with matched families not involved in project</td>
</tr>
<tr>
<td>Education and employment</td>
<td>• Increased adult family members involvement in education or employment</td>
<td>Interview&lt;br&gt;Case record audit</td>
<td>• Before and after comparative data&lt;br&gt;• Data with matched families not involved in project</td>
</tr>
<tr>
<td>Improved health outcomes</td>
<td>• Reduced hospitalisation&lt;br&gt;• Increased use of preventative health services&lt;br&gt;• Increased use of community based health services (GP and community nurse)&lt;br&gt;• Increased use of allied health services&lt;br&gt;• Increased use of community based drug / alcohol services&lt;br&gt;• Increased use of community based mental health services</td>
<td>Survey of participants&lt;br&gt;Case record review</td>
<td>• Before and after comparative data</td>
</tr>
</tbody>
</table>
7.5. Cost Benefit Analysis

The following cost offset analysis has been developed in accordance with the methodology used by Ruth Anne White in the United States National Center for Housing and Child Welfare cost analysis project (Appendix C).

The modelling has been conducted in order to estimate the current service system costs for families who experience homelessness and have children placed in out of home care and compare these costs to those expected to be incurred if the proposed supportive housing model was delivered as an alternate response.

Analysis has been completed based on the recommended 24 month (2 year) pilot project timeframe with a six month scale up period, being a total of 30 months.

The pilot project assumes that 50 families are inducted into the program and are provided two (2) years of supportive housing and support services with a six month scale up period to reach the total of 50 families involved in the program. It is assumed families have an average of 2 children per family.5

The modelling posits that the families engaged in the program are experiencing homelessness, or are in unstable or unsuitable accommodation and if not for the intervention would likely have their children removed due to their housing instability and child safety concerns.

It is assumed that families who are currently experiencing homelessness and are in contact with child safety would be accessing supports from homelessness service providers and in 76% of cases domestic and family violence support services. It is also assumed for the purposes of modelling that the family will undergo a child safety notification, investigation, and substantiation prior to having their children removed for an “average” length stay in out of home care. Based on the assumption that the children will be placed in out of home care, the Report on Government Services (RoGS) 2015 data relating to the length of time children stay in out of home care and out of home care costs is utilised to predict the likely length of stay and related costs (Productivity Commission, 2016). The total cost of these services and interventions over a two year period is estimated to be $10,712,076.

The supportive housing model for supporting families experiencing homelessness and child safety interaction is based on the provision of stable, affordable, safe housing being provided to the family coupled with wrap around service supports that negate the need for children to be removed from the family. The delivery of the model is undertaken by at least two separate entities; a property and tenancy manager and a multidisciplinary service support organisation.

The property and tenancy manager is responsible for sourcing and where possible head leasing rental properties that are made available to families. Families are charged rent at the rate of 30% of income plus Commonwealth Rent Assistance (CRA). The rental subsidy funds the gap between the rent paid by families and the market rate of rent for the rental property. Head leasing of the property will be undertaken by the property and tenancy manager to enable longer term leases to be offered to families along with specialist supportive housing tenancy management. Costs associated with the housing component of the model include property and tenancy management staff, rental subsidy, rent to cover vacancies in head leased properties, maintenance costs and required upgrades to improve housing security and / or security response service.

The service support component of the model offers a multidisciplinary team that will organise support utilising the Parents as Teachers (PAT) program. The PAT methodology is an evidence-based model developed in the US. This methodology adopts an approach that provides a broader context of parenting education and family support, building protective factors, especially for those families in vulnerable situations. This builds strong families and promotes positive parent-child interaction, so children are healthy, safe and ready to learn.

The PAT methodology incorporates five elements:

- Home visiting & early childhood education;
- Group connections;

5. According to the ABS 2011 census data there are 1.9 children per family (Queensland). For the purposes of the modelling the average number of children per family has been increased to 2 to reflect that families within the child protection space often have a higher than average number of children.
• Case management;
• Screening; and
• Networking.

The multidisciplinary support team will include trained case managers, specialist staff trained in the PAT program delivery and an adult learning and employment facilitator to link adults in the program to training and employment opportunities.

The pilot proposal also incorporates funds to oversee and evaluate the project to confirm outcomes and costs of the delivery of the model.

The total expected costs for the two year pilot are calculated to be $4,205,000, representing a saving of $6,507,076 over the two year period when compared to the costs of homelessness and Out Of Home Care for the same period.

A cost benefit analysis is detailed in Figure 1.
## Pilot Project Cost Offset Analysis

### Service System Costs Without Intervention

#### Project Assumptions
- **Number of families**: 50
- **Number of families who access DV services**: 50
- **Number of support workers (1 per 50 families)**: 1
- **Cost of tenant worker**: $90,000
- **Maintenance per property**: $5,000
- **Safety upgrade / response**: $5,000

### Length of Stay for Children Exiting Out of Home Care (OOHC)

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of children in pilot</th>
<th>Cost per month per child</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$385,500</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$52,460</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$1,419,120</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$2,132,640</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$2,132,640</td>
</tr>
</tbody>
</table>

**Source**: RoGS 2016 Volume E, Chapter 13, attachment Table 15.A.22

### Family Rental Subsidy Full Year Costs Scale Up

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of families</th>
<th>Cost of support worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$80,000</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$80,000</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$160,000</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
</tbody>
</table>

### Adult Learning and Employment Support Full Year Costs Scale Up

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of families</th>
<th>Cost of support worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$40,000</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$40,000</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$80,000</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$80,000</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$80,000</td>
</tr>
</tbody>
</table>

### Base on Exit Data, Expected Duration of OOHC If Not for the Intervention

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of families</th>
<th>Average Cost of OOHC Over 2 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$385,500</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$52,460</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$1,419,120</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$2,132,640</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$2,132,640</td>
</tr>
</tbody>
</table>

### Family Educational and Support Full Year Costs Scale Up

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of families</th>
<th>Cost of Family Support Worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$80,000</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$80,000</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$160,000</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
</tbody>
</table>

### Case Management Full Year Costs Scale Up

<table>
<thead>
<tr>
<th>Duration</th>
<th>%</th>
<th>Number of families</th>
<th>Cost of Family Support Worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 6 months</td>
<td>0.25</td>
<td>25</td>
<td>$80,000</td>
</tr>
<tr>
<td>6 - 12 months</td>
<td>0.13</td>
<td>13</td>
<td>$80,000</td>
</tr>
<tr>
<td>1 - 2 years</td>
<td>0.18</td>
<td>18</td>
<td>$160,000</td>
</tr>
<tr>
<td>2 - 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
<tr>
<td>+ 5 years</td>
<td>0.22</td>
<td>22</td>
<td>$160,000</td>
</tr>
</tbody>
</table>

### Total Cost for Pilot Project

<table>
<thead>
<tr>
<th>Description</th>
<th>Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total cost per family</td>
<td>$214,242</td>
</tr>
<tr>
<td>Total cost for all families</td>
<td>$4,205,000</td>
</tr>
<tr>
<td>Total Cost for 50 Families</td>
<td>$10,712,076</td>
</tr>
</tbody>
</table>

### Cost Assumptions

- **Average daily OOHC costs per child per day over 2 years**: $9.4
- **Average number of children in pilot**: 146
- **Average cost per child per day based on 100 children for 730 days**: $9.4
- **Domestic violence service support costs / year**: $8,352
- **% of families homeless families who access DV services**: 0.76

### Total Cost Offsets

- **Service system costs without intervention**: $1,071,076
- **Cost of supportive housing for families pilot**: $4,205,000
- **Total costs on housing**: $6,572,076
- **Cost of support per family over 2 years**: $130,142
8. Recommendations

The conclusions of the research support a packaged solution to address the systemic issues experienced by families caught in the homelessness and child protection cycle.

The two key recommendations put forth seek to strengthen the reform approaches already taken by government agencies and outline pragmatic measures that can inform program design and funding allocations and promote cross-sector collaboration.

8.1. Recommendation 1: Funding and implementing a Families Supportive Housing Pilot

There is an immediate need to launch a pilot that brings three evidence-based models together in the Brisbane LGA. The pilot would integrate: the ‘Keeping Families Together’ approach, the Parents as Teachers (PAT) approach and The Brisbane Common Ground Supportive Housing Model.

Through local consultation with the Department of Communities, Child Safety and Disability Services in Brisbane the pilot would focus on families with children:

- From pregnancy to five years of age;
- Who are engaged with Child Safety due to housing instability and other risk factors such as addiction, mental health, disability of the parent;
- Who are accessing homelessness services and are at risk of intervention; and
- Who are in foster care and the barrier to reunification is housing.

The pilot assumes that 50 families are provided two (2) years of supportive housing and support services with a six month scale up period to reach the total of 50 families involved in the program. An average of 2 children per family has been factored into the modelling.

Under the pilot participants would be allocated a caseworker who would work collaboratively with the family to develop and implement a support plan to achieve increased housing stability and family well-being. The plan would involve short term, intermediate and long term goals.

Due to the capital costs requirements and the timeframe limitations of the pilot, the modelling has been developed around a scattered site model with outreach family support. A housing subsidy would enable access to private market rent housing for low income families.

The total expected costs for the two year pilot are $4,205,000, representing a saving of $6,507,076 over the two year period when compared to the costs homelessness and Out of Home Care for the same period.

This costing would include evaluation, with the ultimate goal of preventing foster care placement, promoting housing stability and breaking the cycle of intergenerational poverty, homelessness, and systems involvement for parents and children.

8.2. Recommendation 2: Form a cross-sector working group to remove pilot system and policy blockers and drive learning’s across the system

A cross-sector working group would enable effective targeting and development of a framework based on cross-sector referral (Specialist Homelessness Services, Domestic Violence Services, Child Safety Services, Department of Housing and Public Works and Queensland Health). This group should reflect on and respond to the findings from the interactive forum, integrate these reflections into the pilot and make recommendations for system wide adoption.
9. Conclusion

This report has illustrated the complex nexus between poverty, housing stress, homelessness and interrelated issues such as domestic violence, child safety and foster care. Unfortunately the siloed nature of the systems and agencies that work to support families in crisis comes at an additional cost to family outcomes and government expenditure.

A depth of evidence highlights the pivotal role safe, secure, fit for purpose, housing plays in supporting families to stabilise. Yet the progressive decline in affordable housing investment, coupled with the housing affordability crisis, compounds a failing system. Evidence also indicates that housing alone is insufficient to make sustained change. Housing must be coupled with consistent, tailored, case management support.

Within the Brisbane LGA we know that families are being prevented from reunification due to homelessness in some incidences. We also know that domestic violence, the biggest reason for presenting at homelessness agencies, is often a factor in child safety issues and also in impeding reunification. Likewise we know that some cases of substantiated reports of harm are due to neglect accounted for by iterative or other types of homelessness and insecure tenure.

Evidence from abroad indicates that a pilot to replicate and build on the ‘Keeping Families Together’ model successfully implemented in New York has real potential to reduce child maltreatment risk among vulnerable families within our own communities.

A Families Supportive Housing Model would target families identified at risk in both the child protection system and the homelessness services system. The model is compatible with current philosophical changes within the Queensland child protection system which emphasise:

1. Keeping children at home with their families except in the most precarious situations; and
2. Assessing rather than investigating families where safety risks have been identified.

The model is applicable to two child protection scenarios: (1) as an early intervention to keep families together and child safe in situations where unstable housing circumstances have contributed to ongoing risk of child protection concerns; and (2) a basis for family reunification where housing issues are a factor preventing a child’s return to the family.

The conclusions of the research support a packaged solution to address the systemic issues experienced by families caught in the homelessness and child protection cycle. The report makes two (2) key recommendations:

**Recommendation 1:** Funding and implementing a Families Supportive Housing Pilot; and

**Recommendation 2:** Form a cross-sector working group to remove pilot system and policy blockers and drive learning’ across the system.

These recommendations seek to strengthen the reform approaches already taken by government agencies and outline pragmatic measures that can inform program design and funding allocations and promote cross-sector collaboration.
10. References


Appendix A: Interactive Forum Notes
1. What would support better outcomes for the children, the families and the community?

- Combining intentional support with housing – linking housing with support
- Transition to / from care to include housing, access to employment / education, transport (UK Model Legislated) – proven to deliver outcomes (i.e. reduced contact with juvenile justice, increase employment, etc.)
- Affordable / accessible Housing Model for families (i.e. Housing First Model, etc.)
- Early intervention / prevention
  - Fast-track to a dedicated area of Child Safety when housing is the primary concern for the family or reason for potential removal
  - Touch points linking rather than over-servicing
  - Families able to access services and information
  - A way for families to access support without Child Safety intervention
  - Asking families what they need?
  - Through schools, doctor, generic services
- Housing workers in Child Safety
- Transition from care – must have access to appropriate housing, employment, education support
- Flexible funding – ‘Milwaukee’ Model – work across domains / departments – one bucket $ $, needs assessed and paid for, single case plan – all responsible and all save (prevent ‘Wrong Pocket’ Syndrome)
- Education / training – workers and clients / consumers
- Information sharing and collaboration (cross-sector)
- Focus on outcomes not outputs
- Greater communication across portfolios and support services working with individual - promote better understanding
- Type and amount of housing stock
- More Affordable Housing stock – appropriate housing for families (i.e. with space for kids to run around the yard)
- Accommodation needs to be in the right location – near the infrastructure that families need to use – i.e. schools, child care, easy access to public transport and health facilities
- Stronger partnerships – remove barriers that prevent information sharing between NGOs and Government to address issues, i.e. Partners in Recovery
- Local Pilot trials – action-based on overseas research
- Ongoing case management support whilst in permanent housing (needs-based)
- Skilled Case Managers / Care Workers – ‘in-home’ program delivery for parents / carers
- Links to social groups and community supports – assistance with facilitating attendance
- Specialist roles for:
  - Sustaining tenancy support
  - Housing management
  - Child Safety support
- Opportunities for housing workers / system to train / work with Child Safety workers / system – housing specialist in Intensive Family Support (IFS)
- Organisational vs personal relationships – sustainability
- Outcomes Model vs Social Benefits Bond
- Baseline data / tracking outcomes
- Tailored support for kinship carers
- Sense of urgency – campaign / using Cost-Benefit Analysis to lobby government
- All levels of government working together in particular combining funding and providing flexibility and trust to community providers to meet outcomes (matching needs and outcomes)
- Services to sustain families’ tenancies, integrate families and access to these supports earlier
- Changing the criteria for access to public housing (i.e. non-Australians who are seeking accommodation)
- Low income earners having priority
- Easier access to the housing system for everyone – it often takes strong advocacy from a caseworker to get a needy family into housing if they can find anything available and they are not trained as housing workers (they are generic caseworkers who are trying to do a housing worker’s job)
2. What is missing? How often does this occur?

- Cross-disciplinary knowledge
- Flexible funding
- Efficient / timely communication between Housing and Child Safety
- More communication between Government departments (i.e. Housing and Centrelink) regarding families individual circumstances – a one size approach doesn’t work
- Loss of community / family – social fabric
- Community discussion
- Child Safety / Housing – working together
- Information sharing between services – hands are tied (risk adverse culture and privacy wall)
- Affordable Housing Options / Investment
  - Private investment models
  - ‘Defence’ model as an example
  - Child Safety investment
  - Joint Equity
- Asking families what they need
- Suitable housing for families – space & location
- Appropriate reporting (often a mismatch between real needs and reporting outputs)
- Longer term private rental arrangements
- Adequate housing stock – appropriate and available housing for families that is long term and stable
- 7 year TICA listing needs to go or to be reviewed (i.e. 3 years instead of 7)
- Specific Child Safety / Housing Workers to deal with the cases involving housing instability
- Transition from care planning for housing
- Lack services for families – A+D (mum and kids), 0 (dad and kids)
- Not enough housing available
- Decreased stock of larger dwellings (i.e. 2 bedrooms may not be suitable) – not enough space in available stock
  - Issues with housing families with teenage children with diverse genders
- Cooperation between partners (systems level) – when systems don’t converge, there is a clash
- Implications for indigenous women who don’t want to be involved with the system to gain support (ramifications)
- Housing issue is often a low priority re. notifications
- In the RAI Program – housing is an issue in many cases – makes it hard to serve and engage with families – can be a catalyst to leave the program
- Lack of information or information ‘too late’
- Connection between available funding and flexibility in use
- Joint action plan takes six (6) months – not fast enough
- Political and social support
- Lack of options for women experiencing violence
- Option for relocation rather than eviction – flexibility in dealing with notifications
- Specialist Homelessness Services (SHS) need to provide outcomes and output reporting so they often can’t allocate a family property to a family whose children aren’t in their care – SHS accommodation have targets to meet
- Government strategy / policy, e.g. new developments in UK need to provide 30% Affordable Housing
- Linking Centrelink family payments and child safety (payment continuity while children are in out-of-home care)
- Emergency accommodation options for families (not motels) – creates fear in families around Child Safety removing their children
- Lack of housing for young people that cannot live at home
- One large Support Agency stated that they commonly receive referrals for families experiencing homelessness or housing instability who can be couch surfing between friends and relatives / have move countries and have nowhere to stay / or have been evicted or are facing eviction for a variety of reasons and often due to domestic or family violence – or the women refuses to leave the home because she knows she won’t get anything else or doesn’t want to stay in the shelter (so therefore she and the children remain at risk)
Appendix B: Program Logic
<table>
<thead>
<tr>
<th>Program Logic</th>
<th>INPUTS</th>
<th>ACTIVITIES</th>
<th>OUTPUTS</th>
<th>OUTCOMES</th>
<th>INTERIM (what will have happened for a family within 1 year of engagement with this program e.g., behaviour, decisions, practices)</th>
<th>LONGER TERM OUTCOMES (what will have happened for a family within 2 years of engagement with this program)</th>
<th>IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHORT-TERM (what will have happened for a family within 6 months of engagement with this program e.g., knowledge, skills, awareness, motivation)</td>
<td>• Training and ongoing professional development of staff in the Parents as Teachers (PAT) model, integrated case management, property management and tenancy support</td>
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<tr>
<td></td>
<td>• The staffing, assets, resources, knowledge, experience, infrastructure and capacities provided by service providers</td>
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<td></td>
<td>• The evidence base underpinning the PAT, Housing First, Supportive Housing, Strengthening Families, the Two-Generation Early Intervention models</td>
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<td></td>
<td>• The legitimacy provided by existing integrated service delivery with vulnerable families</td>
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<td></td>
<td>• Provide access to quality permanent housing</td>
<td>• Number and types of relationships with mainstream and specialist services developed – including across education and health</td>
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<td></td>
<td>- social housing</td>
<td>Number of families housed and receiving intentional integrated family support services</td>
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<td></td>
<td>- affordable housing</td>
<td>Number of hours of needs assessment and management of case/service plans provided and number of clients who received this output</td>
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<td>- private housing</td>
<td>Number of occasions that information, advice and referral services were provided (not provided elsewhere)</td>
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<td>Number of case/service plans closed as a result of the majority of identified needs being met</td>
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<td>Number of parents engaging in meaningful activity</td>
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<td>Homelessness for vulnerable families is rapidly resolved</td>
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<td>Homelessness is prevented for Families at risk of homelessness sustain tenancy (for 3 months)</td>
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<td>Parents increase their knowledge of and skills to access, available early childhood, health and specialist services for families and children in the community</td>
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<td>Reduced connection with Child Safety</td>
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<td></td>
<td>Reduced incidences of children being referred to Out of Home Care</td>
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<td></td>
<td></td>
<td>Children have increased identification and referral to services for possible developmental and social/mental delays and vision/hearing/other health issues</td>
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<td>Families who presented as homeless have sustained permanent affordable housing for 6 months</td>
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<td>Homelessness is prevented for Families at risk of homelessness sustain tenancy for 6 months</td>
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<td></td>
<td>Increased capacity of parents to avoid future homelessness through improved skills and understanding in sustaining tenancies</td>
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<td></td>
<td></td>
<td>Improved parenting confidence</td>
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<td>Improved parent-child relationships</td>
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<td>Improved family safety</td>
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<td>Improved family stability and functioning</td>
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<td>Reduced connection with Child Safety</td>
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<td>Reduced incidences of children being referred to Out Of Home Care</td>
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<td></td>
<td>Families who presented as homeless have sustained permanent (long term, affordable housing for &gt; 12 months</td>
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<td>Homelessness is prevented for Families at risk of homelessness sustain tenancy for &gt; 12 months</td>
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<td>Improved family functioning and stability</td>
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<td>Improved school readiness</td>
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<td></td>
<td>Improved child health and development</td>
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<td>Improved family health</td>
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<td>Increased parent involvement in children’s care and education</td>
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<td></td>
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<td>Families are strengthened and have a home, an income and are healthy and connected to community of choice.</td>
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<td></td>
<td></td>
<td>Children 0-5 are safe and healthy and are socially, emotionally and developmentally competent</td>
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<tr>
<td>INPUTS</td>
<td>ACTIVITIES</td>
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<td>OUTCOMES</td>
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<tr>
<td>• The core values underpinning support including the importance of the early years; working with parents and children together; all young children and families deserve the same opportunities</td>
<td>• Determine level of acuity if family currently homeless</td>
<td>• Number of families receiving PAT support</td>
<td>• Increase in parents' knowledge and understanding of developmental topics, including children's language and literacy and their child's emerging development and age appropriate child development</td>
<td>• Reduced connection with Child Safety</td>
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<tr>
<td>• Development of crisis plan when needed</td>
<td>• Number of children receiving PAT support</td>
<td>• Number of children knowledge, stressors, strengths, skills, needs - strengths and stressors informs planning process</td>
<td>• Improved parenting confidence</td>
<td>• Reduced incidences of children being referred to Out of Home Care</td>
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<tr>
<td>• Development of safety plan when needed</td>
<td>• Number of parent-child groups</td>
<td>• Number of home visits and no. hours' home visits conducted by Early Childhood teachers</td>
<td>• Improved parent-child relationships</td>
<td>• Families integrated into community</td>
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<tr>
<td>• Establishment of relationships with mainstream and specialist services to meet needs of children and parents – including across education and health</td>
<td>• Number of child only groups</td>
<td>• Number of children accessing Queensland child health clinic</td>
<td>• Early detection of developmental delays and health issues</td>
<td>• Increased parents’ engagement with meaningful activity</td>
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<tr>
<td>• Advocacy with systems such as child protection, housing income support, justice, family law, education and employment, childcare</td>
<td>• Number of parent only groups</td>
<td>• Number of consultations done through child health clinic</td>
<td>• Families have improved social support and connection to community services</td>
<td>• Improved economic stability</td>
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<tr>
<td>• Support with completing and submitting housing applications</td>
<td>• Numbers accessing groups</td>
<td>• Increase in parents' knowledge and understanding of developmental topics, including children's language and literacy and their child's emerging development and age appropriate child development</td>
<td>• Parents promote children's healthy development, language and literacy in the home</td>
<td>• Parents who are able to work are actively seeking education, training or employment</td>
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<tr>
<td>• Assessment of parents’ knowledge, stressors, strengths, skills, needs - strengths and stressors informs planning process</td>
<td>• Number of home visits and no. hours' home visits conducted by Early Childhood teachers</td>
<td>• Number of children accessing Queensland child health clinic</td>
<td>• Increased family and child access/transition to available early childhood education and care, health and specialist programs/services and schools</td>
<td>• Parents who are able to work are actively seeking education, training or employment</td>
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<td></td>
<td>• Number of consultations done through child health clinic</td>
<td>• Increase in parents' knowledge and understanding of developmental topics, including children's language and literacy and their child's emerging development and age appropriate child development</td>
<td>• Families have improved social support and connection to community services</td>
<td>• Parents who are able to work are actively seeking education, training or employment</td>
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</table>
### Program Logic

<table>
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<tr>
<th>INPUTS</th>
<th>ACTIVITIES</th>
<th>OUTPUTS</th>
<th>OUTCOMES</th>
<th>IMPACT</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>SHORT-TERM (what will have happened for a family within 6 months of engagement with this program e.g., knowledge, skills, awareness, motivation)</td>
<td>INTERIM (what will have happened for a family within 1 year of engagement with this program e.g., behaviour, decisions, practices)</td>
</tr>
</tbody>
</table>

- Screening to identify children 0-5 developmental strengths and vulnerabilities (ASQ)
- Development of support plan in partnership with parents
- Supported and effective referrals to other services/supports to meet needs of children and families as needed
- Create opportunities for parents to engage in meaningful activity and active participation in wider community

### Assumption

- Parent education staff have knowledge of age appropriate child development, positive parenting skills and behaviours, assessment and screening of child needs and strengths and child-parent activities to promote development and positive interactions.
- Case management and property management staff are highly qualified and experienced in integrated case management, property management and tenancy support.
- Access to sufficient quality affordable accommodation on a permanent basis.
- Staff have knowledge of housing systems and process, child protection system and process.
- Staff identify and make linkages/partnership with early childhood, schools, health and specialist services in the community.
- Family support programs are successfully integrated.
- Referral support from Department of Communities, Child Safety and Disability Services (for the cohort) and appropriate contractual risk allocation.
- Many factors influence participant outcomes.

### Environment

- Extreme shortage of permanent quality affordable housing stock for families with young children within the City of Brisbane.
- Significant percentage of children have to be placed into foster care or out of home care due to lack of adequate housing causing disruption within the family unit, distress and trauma parents and children whilst incurring high costs in the areas of crisis accommodation and child protection.
- Lack of funded integrated support services for families in affordable housing.
- Lack of joined up services between housing and client support agencies.
- High level of ‘churn’ through the homelessness and housing process/system.
- Recent Queensland Child Protection Commission of Inquiry.
- QLD Government Homelessness Program Guidelines.
- QLD Government Supportive Housing Program Guidelines.
Appendix C:
NCHCW Housing-Child Welfare Cost Study 2015
FAMILIES CAUGHT IN THE HOMELESSNESS AND CHILD PROTECTION CYCLE: A SUPPORTIVE HOUSING MODEL FOR KEEPING FAMILIES TOGETHER

In the absence of an adequate supply of safe, decent, and affordable housing, child welfare workers often must separate homeless and precariously housed families in order to protect children from the lingering effects of homelessness. In fact, nearly 30 percent of the children in foster care are there because their parents lack adequate housing. The federal funding available to help these families will cover the cost of foster care, but not the cost of housing and supportive services to keep the families together and safe.

In an effort to encourage policy makers to allow flexibility in these funds so that these children can return home, or avoid foster care altogether, NCHCW recently conducted a study of federal child welfare funds (Title IV-E) to compare the cost of foster care to the cost of using federal funds to subsidize housing and provide services for these families in order to reunite them.

This research shows considerable savings to states when Title IV-E funding is used to subsidize housing and supportive services. In fact, the U.S. would save $773,773,269 if housing plus services intervention were applied to all Title IV-E eligible families who need it, or $32,885 per family. The provision of housing and services is a good use of public dollars but also offers front line workers the resources they need to adequately address the problems they confront along with the families they serve every day. The state by state savings are included in the chart below.

State by State Comparison of Potential Savings

<table>
<thead>
<tr>
<th>State</th>
<th>Foster care plus services for children separated because of housing problems</th>
<th>Total cost for housing plus services to reunite families who are separated because of housing problems</th>
<th>Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>$9,181,113</td>
<td>$4,159,497</td>
<td>$5,021,617</td>
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<tr>
<td>Alaska</td>
<td>$5,670,385</td>
<td>$1,362,401</td>
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<tr>
<td>Arizona</td>
<td>$25,839,105</td>
<td>$12,634,635</td>
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<td>Arkansas</td>
<td>$11,467,174</td>
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<tr>
<td>California</td>
<td>$157,044,176</td>
<td>$89,030,347</td>
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<tr>
<td>Colorado</td>
<td>$16,322,647</td>
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<tr>
<td>Connecticut</td>
<td>$13,907,226</td>
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<td>Delaware</td>
<td>$1,110,122</td>
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<td>District of Columbia</td>
<td>$11,333,619</td>
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<td>Florida</td>
<td>$763,709</td>
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<td>Georgia</td>
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<td>Hawaii</td>
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<td>Idaho</td>
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<td>Illinois</td>
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<td>Indiana</td>
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<td>Iowa</td>
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<td>Maine</td>
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<td>Minnesota</td>
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<td>State</td>
<td>Foster care plus services for children separated because of housing problems</td>
<td>Total cost for housing plus services to reunite families who are separated because of housing problems</td>
<td>Savings</td>
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