Developing a Shared Outcome Framework for the Housing and Homelessness Sectors

Project 2: Homelessness sector outcomes

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Centre for Social Impact

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Research Team

The project research team consists of Stephen Bennett, Lena Etuk and Dr Abigail Powell.

Address for Correspondence

Stephen Bennett, the Centre for Social Impact, Ph: (02) 8936 0901, e: s.bennett@unsw.edu.au

Abigail Powell, Centre for Social Impact, Ph: (02) 8936 0916, e: a.powell@unsw.edu.au

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The Centre for Social Impact (CSI) is a national research and education centre dedicated to catalysing social change for a better world. CSI is built on the foundation of three of Australia's leading universities: UNSW Sydney, The University of Western Australia, and Swinburne University of Technology.

Our research develops and brings together knowledge to understand current social challenges and opportunities; our postgraduate and undergraduate education develops social impact leaders; and we aim to catalyse change by drawing on these foundations and translating knowledge, creating leaders, developing usable resources, and reaching across traditional divides to facilitate collaborations. Acknowledgements

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MORE INFORMATION

This report contains information on project, approach, and prioritised indicators. For more information about the project, team, resources and webinars please visit the project website - http://www.csi.edu.au/research/project/developing-shared-outcomes-housing-and-homelessness-sectors-project/

This report is supplemented by additional resources including:

Overview report	Data collection Guide	Indicator list
This report contains information on: • Project background • Relevant context and information • Prioritised indicators and rationale	Contains information on: • Considerations for collecting the indicators and measures • Methods and approaches • Situations and context	Contains: • Full list of indicators and measures • Prioritised indicators • Reference sources for information

CONTENTS

GLOSSARY AND KEY TERMS

Ecological	The different elements of the system such as the individual, family, community and ecosystem. The ecological model is used to illustrate the different elements that may influence an outcome.
Impact	The longer-term social, economic, and/or environmental outcomes (effects or consequences) of a program. They may be positive, negative or neutral; intended or unintended.
Indicator	Indicators are the measurable markers that show whether change has occurred in an outcome. They are predominantly reported quantitatively, but can be measured qualitatively.
Outcome	The result or effects expected by a program/activity/strategy and the changes that can occur in attitudes, values, behaviour or conditions.
Outputs	The direct products or services resulting from your program or interventions activities. For example, the number of people, places, supports or activities your program has produced.

OVERVIEW

In January 2017, the Centre for Social Impact (CSI) in collaboration with Homelessness Sector Development, a partnership between Homelessness NSW, Domestic Violence NSW and Yfoundations led a project to develop a shared outcome framework for the homelessness sector.

The goal is to support Specialist Homelessness Services (SHS) and others, to identify and select appropriate outcome indicators that can best demonstrate change that occurs in people's lives because of receiving services from homelessness services and community housing providers.

This report contains information on the overall approach for developing the outcome framework, describing the approach to identify common outcomes for people supported by homelessness services and the prioritisation process to identify shared indicators.

Table 1 on the next page shows the priority indicators identified by outcome area.

Establishing a shared outcomes framework that is high-quality, relevant and useful requires identifying outcomes that matter, identifying indicators that can best demonstrate whether the outcomes are being achieved, and ensuring that the indicators that are selected are valid, relevant, useful and applicable across organisations and communities.

This will support and foster the development of a shared language and understanding of outcomes and indicators across the sector. It will also give service providers access to information they can use in tracking and evaluating their impact on people's lives.

Across the social purpose eco-system there is a growing shift towards focusing on outcomes rather than outputs. This is being driven by a range of purposes to understand if services are making a difference in peoples' lives, to support continuous improvement, develop new innovative and integrated solutions to complex problems, and movements towards commissioning and funding process that focus on outcomes rather than inputs.

A key challenge are the implications of the different intents and purposes for an outcome focus and measurement. Each of the drivers raise different technical, methodological and ethical challenges, such as the level of rigor and evidence required for contracting vs learning and improvements, the skills and capacity and systems across the eco-system to support outcome measurement and the cultural shift to support outcome measurement.

This project provides a foundation for the housing and homelessness sectors to consider the range of intended outcomes and establish common tools and provides an important step towards establishing a shared learning culture and tools to build readiness for outcome measurement. This project aligns with and builds upon the Social Housing Indicator Framework for the NSW Federation of Housing Associations and the NSW Human Services Outcome Framework (HSOF).

Table 1 Identified Outcomes and prioritized indicators

Priority Outcome areas	Priority Indicators identified from survey, for each outcome area
Access to employment	% of clients who are employed, unemployed, or not in labour force
Basic needs are met	% of clients who believe their basic needs are met
	% of clients who have access to food and safe water
Financial position	% of clients with income below the poverty line
Material resources	% of clients who have experienced a shortage of money and subsequently could not pay mortgage or rent
Participation in education	Level of engagement at school by clients who are students
	% of clients enrolled in preschool, infant, primary, secondary, non-school further education, or tertiary school
Client goal setting	% of clients who agree that the goals set are aligned with their aspirations and that they have participated in setting them
Self-determination	% of clients who feel empowered to make or keep themselves safe
	% of clients who see themselves as being in control of the forces that importantly affect their lives
Positive growth from trauma	Average client score for the degree to which they feel they've increased their personal strength as a result of as a result of support for trauma
Satisfied with housing	% of clients satisfied with the home they live in
Access to appropriate and affordable housing	% of clients whose housing costs exceed 30 percent of their income
Access to stable housing	% of clients who are homeless
Child exposure to domestic violence	% of child clients who have experienced or witnessed their mother's partner abusing their mother
Safety	% of clients who are satisfied with their overall safety
	% of clients who have experienced physical violence against them in the last 12 months
Connection and belonging to community	% of clients who feel part of their community
	Level of attachment of Aboriginal or Torres Strait Islander clients with their tribal or language group and traditional country
	% of Aboriginal or Torres Strait Islander clients who identify with a clan, tribal or language group, mission or regional group
Healthy relationships	% of clients who feel socially supported and connected
Access to referrals and appropriate services	% of referred clients who completed referral at receiving service
	% of clients satisfied with the service received (from specific programs/sectors)
Trust in the service(s) they are receiving	% of clients who trust the organisation to serve them well
Overall wellbeing	% of clients who are satisfied overall with their life
	% of clients who are satisfied with their quality of life

A shared outcome framework

What is it?	Why is it important?	What does it mean for the sector?

A shared outcome framework is a resource to support organisations working across complex issues.
 	
Developing a shared outcome framework involves working with others to establish a shared vision, identify expected outcomes, to prioritising indicators and measures and developing common tools to collect, report and communicate findings. An outcome framework can consist of:
 	
• **Outcomes**: the expected changes for people.
   – For example, improved client physical health.
 	
• **Indicators**: the measurable markers of an outcome.
   – For example, % of client progress against identified needs.
 	
• **Measures**: the tools or instruments to collect data. For human services, these are often questions asked of people.
   – For example, the Personal Wellbeing Index.
 	
• **Data collection approaches and methods**: plans detailing how, when and who will collect the data.
	A shared outcome framework is important for coordinating a systematic response to complex issues.
	
	• Build a common understanding of outcomes across a program or department.
	
	• Saves time and resources, by pooling expertise and reducing duplication of effort by providing tools and resources.
	
	• Help to communicate the value and impact of the sectors.
	
	• Strengthen collaborative relationships by engaging the sector in the development and refinement of the framework.
	
	• Improves the standard and consistency of measurement.
		For the housing and homelessness sectors, a shared outcome framework can help support organisations, works and ultimately people by:
		
		• Building a common language and understanding of the issue and what interventions work in different conditions.
		
		• Developing a measurement and learning approach that is flexible and adaptable to the diverse needs across the sectors.
		
		• Foster and support a learning culture and innovation capacity.
		
		• Identify shared indicators to compare client outcomes across cohorts, areas and programs.
		
		• Support organisational capacity building and development.
		
		• Establish common tools and process for identifying, assessing and identifying levers to influence outcomes.
		
		• Understand the ecosystem of services to support outcomes and the relationship between those parts.

APPROACH

The project was guided by a governance group that included members of, Homelessness NSW, NSW Federation of Housing Associations, NSW Family and Community Services Community Housing providers and Specialist Homelessness Services. A key guiding principle for the development was engagement, inclusion and consultation with the sectors across the project.

This project was undertaken in four stages:

- Determine **outcomes** for the homelessness sector

- Identify **indicators and measures**

- **Engage and consult** with the sector and key stakeholders to ensure applicability, acceptability and appropriateness of the framework, outcomes and indicators

- Synthesise findings into **a shared outcomes framework**

To develop the shared outcome framework, the CSI research team:

- Hosted nine webinars to **determine, explore and prioritise anticipated outcomes** across a range of cohorts and issues including young people, mental health, drug and alcohol, family violence, Aboriginal and Torres Strait Islanders, rough sleepers, ex-prisoners, LBGTQUIA and CALD groups.
  - **Over 100 people representing around 60 organisations attended**, representing a diversity of providers, both in type of services as well as location across New South Wales.
  - Identified and prioritised 17 outcomes areas

- Gathered and reviewed **academic and grey literature on indicators and measures** across the identified outcome areas.
  - **225 Indicators were assessed** using CSI's indicator assessment criteria[i], which focus on the technical quality of the indicators.

- Sought feedback from sector stakeholders through an online survey to prioritise indicators.
  - **Response rate of 58% (98 out of 169).**
  - Identified **26 priority indicators**

- Drew on own internal expertise and resources to assess the range of data collection approaches and road map for further development and implementation of the shared outcomes framework.

CSI's scope was constrained by:

- Identifying outcomes from sector stakeholders rather than from an evidence base

- Focus on individual outcomes (vs. organisational, structural or system); those at risk of or currently experiencing homelessness

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ii Bennett, S., Reeve, R., Muir, K., Marjolin, A., Powell, A. (2016), Orienting your journey: An approach for indicator assessment and selection, Toolkit, Sydney: Centre for Social Impact.

- Identifying existing indicators / measures, not developing new tools

- Not including of process for organisations to collect or report the data

DETERMINING OUTCOMES FOR THE HOMELESSNESS SECTOR

This project started with a consultation with Specialist Homelessness Services to identify what outcomes service providers are trying to achieve for the people they support. In the series of nine online webinars we explored and prioritise anticipated outcomes across a range of cohorts and issues including:

What we wanted to know from Service Providers in the webinars

- What are the expected outcomes for people?
  - In the short, medium and long-term

- How do these outcomes differ across the sector?
  - By region, issue or type of activity/service

- What expected outcomes are a priority?
  - Based on their importance for the organisation
  - Based on their feasibility to achieve by the organisation

Who attended the webinars

Over 100 people representing around 60 organisations attended, representing a diversity of providers, both in type of services as well as location across New South Wales.

What we heard: outcomes

A wide range of outcomes emerged from the webinars, including:

- Housing outcomes: safe, stable, appropriate, affordable

- Services: access to, appropriateness of, relationships with, knowledge, referrals

- Employment and financial assistance

- Education and training

- Empowerment: Self-determination, control, setting goals

- Connection to community: Belonging, connection to culture and country, social inclusion

- Health: physical and mental, "stabilising" health needs, improvement in wellbeing, trauma recovery, rehabilitation

- Feeling listened to and respected

What we heard: outcomes of greatest importance and feasibility to help clients achieve

For the general population of homelessness service seekers, priority outcomes were:

- Housing stability
- Safety

For specific cohorts, prioritised outcomes included:

- Feeling safe, welcome, and supported (applicable to cohorts: Young People; Aboriginal and Torres Strait Islanders; LGBTQUIA; Family violence; and Culturally and Linguistically Diverse)
- Access to opportunities that will lead to employment, housing, and sense of connection and belonging (applicable to Young People cohort)
- Linkages made to other services (applicable to cohorts: Mental Health, Drug & Alcohol; Rough Sleepers; and Family Violence)
- Improved control, choice, and self-determination (applicable to Family Violence cohort)
- Social inclusion (applicable to Ex-prisoner cohort)
- Improved wellbeing (applicable to cohorts: Aboriginal and Torres Strait Islanders; and Rough Sleepers)

IDENTIFYING INDICATORS AND MEASURES

This stage involved a rapid literature review to identify indicators and measures for the prioritised outcomes. This built on the previous work including the FACS Social Housing Outcome Framework indicators and measures, the Social Housing Indicator Framework and other government and industry indicator banks such as AHIW's SHS Data Collection and Australia's Social Value Bank.

As indicators were identified they were assessed against the technical criteria from CSI's indicator assessment criteria, which look at the 'quality' of indicators. Specifically, the degree to which the indicators are:

- **Specific** in what the indicator is trying to measure, its key terms and variables
- **Validated** in measuring what it intends to measure
- **Reliable** to produce consistent results over time
- **Comparable** across areas, groups, and against existing benchmarks

The review processes shortlisted 225 indicators for sector prioritisation.

Prioritisation process

Building on the indicators identified in the desk review, the aim of the prioritisation process was to seek stakeholders' views of the indicators and to determine the extent to which there was consensus around shortlist of priority indicators.

The prioritisation consultation involved:

- An online survey with services that receive FACS funding and deliver homelessness services.

- The survey presented the list of indicators that were identified for each outcome area and respondents were asked to select up to five that they felt were most important for the homelessness service sector to use to track client outcomes in that area.

Participation:

- The survey was open for 10 days at the beginning of August 2017. Response rate of 58% (98 out of 169).

- Managers and Coordinators were most common respondents on behalf of their services (43%). SHS Providers were most common among the 98 responding services (78%)

- Sydney and the Hunter/New England regions were the most common areas in which responding services were located, but all regions were represented.

- Services targeting women or children escaping family violence, families, single women, and indigenous people were most common among the 98 responding services.

Prioritised indicators:

To arrive at a narrow list of one to two indicators per outcome area, average ranking scores for each indicator were calculated.

Each indicator was assigned a value between 1 and 6 for each survey respondent, based on their selection and ranking of that indicator. Indicators that were selected by a given respondent as important for the sector to track and ranked in slots 1 through 5 received values of 1, 2, 3, 4, or 5 respectively. Indicators that were not selected as important (in the top five) were assigned a value of 6, for that respondent.

Then an average was taken across respondents for each indicator to determine a ranking score. Respondents who indicated that they did not know about the importance of the indictors were excluded from the calculation of the average for all indicators in that outcome area.

Within each outcome area the indicators with the lowest scores were identified as the most important across respondents. The goal was to identify one indicator per outcome area, but in some instances the ranking scores were so close among the top two or three that they were all retained.

Table 2 displays the priority indicators identified from the survey, by outcome area.

Other resources:

- Appendix 1 A detailed description of the consensus survey findings

- Indicator list for the full list of outcomes, indicators and measures

Table 2 Priority indicators for each outcome area

Priority Outcome areas	Priority Indicators identified from survey, for each outcome area	Average importance rank score^				
		1	2	3	4	5
Access to employment	% of clients who are employed, unemployed, or not in labour force			3.4		
Basic needs are met	% of clients who believe their basic needs are met			3.7		
	% of clients who have access to food and safe water			3.9		
Financial position	% of clients with income below the poverty line			3.6		
Material resources	% of clients who have experienced a shortage of money and subsequently could not pay mortgage or rent		2.7			
Participation in education	Level of engagement at school by clients who are students			3.7		
	% of clients enrolled in preschool, infant, primary, secondary, non-school further education, or tertiary school			3.9 4.0		
Client goal setting	% of clients who agree that the goals set are aligned with their aspirations and that they have participated in setting them	1.2 *				
Self-determination	% of clients who feel empowered to make or keep themselves safe			3.9		
	% of clients who see themselves as being in control of the forces that importantly affect their lives			3.9		
Positive growth from trauma	Average client score for the degree to which they feel they've increased their personal strength as a result of as a result of support for trauma		2.5			
Satisfied with housing	% of clients satisfied with the home they live in	1.2 *				
Access to appropriate and affordable housing	% of clients whose housing costs exceed 30 percent of their income			3		
Access to stable housing	% of clients who are homeless			3.5		
Child exposure to domestic violence	% of child clients who have experienced or witnessed their mother's partner abusing their mother			3		
Safety	% of clients who are satisfied with their overall safety				4	
	% of clients who have experienced physical violence against them in the last 12 months				4	
Connection and belonging to community	% of clients who feel part of their community			3.8		
	Level of attachment of Aboriginal or Torres Strait Islander clients with their tribal or language group and traditional country				4	
	% of Aboriginal or Torres Strait Islander clients who identify with a clan, tribal or language group, mission or regional group				4.6	
Healthy relationships	% of clients who feel socially supported and connected			3.4		
Access to referrals and appropriate services	% of referred clients who completed referral at receiving service			3.7		
	% of clients satisfied with the service received (from specific programs/sectors)				4	
Trust in the service(s) they are receiving	% of clients who trust the organisation to serve them well	1.0 *				
Overall wellbeing	% of clients who are satisfied overall with their life			3.5		
	% of clients who are satisfied with their quality of life			3.8		

*respondents did not rank these indicators, they were only asked if they were or were not important (1=yes, 2=no, 3=don't know)

^ 1 ranked highest, 5 ranked lowest

LIMITATIONS AND CHALLENGES

Consultation process

There is considerable diversity across the homelessness sectors in terms of people supported, types of services and interventions, different geographic locations, and the size, scale and scope of resources and providers. While our approach captured the perspectives on what outcomes, there are some limitations of the data.

First, our sample frame was not representative of the range of organisations across the sector and the recruitment methodology relied on Homelessness NSW directing the invitation to appropriate organisations.

Second, the identified outcomes across the sector were based on perspectives from SHS and stakeholders, as such the outcomes may not align with external evidence based reviews (evaluations, meta analyses of outcomes), as in the Application of the Human Services Outcome Framework to Social Housing[ii]. Additional work to provide an evidence base to the outcomes will help to improve the quality of the shared outcome framework and indicators.

Third, due to constraints we were unable to engage people at risk of/currently experiencing homelessness in the consultation process. As such, the expected outcomes may not reflect their views. We recommend engaging people who use SHS programs or at those at risk of /currently experiencing homelessness in further consultation to refine the outcomes, indicators and measures to ensure that the framework and data collection is appropriate and acceptable for those whom information will be collected.

Gaps in the evidence base for indicators and measures

There are significant gaps in the data and evidence to support the technical quality (validity, reliability, comparability) of identified indicators and measures. For example, if indicators and measures have been validated or tested for different groups or been validated for different

Alignment with external frameworks

Additional work should be undertaken to assess the alignment of the outcome framework with existing outcome frameworks, data collection approaches and systems at the organisational, state and national levels. This includes reviewing the literature and pilot testing the indicators to identify to what extent these contribute to national frameworks, such as the NSW Human Services Outcome Framework.

While there are gaps in current data collection and reporting processes when focusing on social outcomes, there are opportunities to leverage existing data and to minimise (or, ideally avoid) the duplication of data collection and reporting and ensuring that data is collected once use often.

Data collection capacity

A large proportion of the prioritized indicators are based on measures that require direct client engagement and feedback, as they are not currently collected or reported through other

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[ii] New South Wales Department of Family and Community Services, 2016.

means. These indicators will require additional data collection by service providers or through other means. It is important to consider the feasibility of collecting this information and the resources and capacity required, if the prioritized indicators are to be collected systematically across the sector. Future would should investigate and review the feasibility of implementing the prioritized indicators and identify opportunities to use secondary data sources to supplement the client satisfaction measures.

NEXT STEPS

Following on from the limitations and challenges we recommend the following next steps to help support a pathway to outcomes measurement to implement and refine this foundation work.

Consultation	Pilot test	Roadmap

Recommend further consultation to:

- Review outcomes, indicators, measures
- Identify initiatives to test and pilot outcomes
- Map and incorporate existing data

Recommend starting small and pilot testing:

- Small-scale / focused tests
- Different contexts and settings
- Learn and adapt before scaling approach

Recommend developing a roadmap:

- Clarity around purpose for outcome measurement and evaluation
- Identify resources and supports
- Capacity building and skills development
- Align with other projects

APPENDIX 1 A DETAILED DESCRIPTION OF THE CONSENSUS SURVEY FINDINGS

This appendix details the Stage 3 consensus survey to prioritise the indicators. See the main body of the report for a description of the project purpose, distribution and methodology.

To engage the homelessness service sector in narrowing the list of indicators identified from the literature review to those most important to the sector, we administered an online survey to the 169 services that receive FACS (NSW Family & Community Services) funding and deliver homelessness services. The survey was developed by CSI staff, but the survey was sent out to service providers by Homelessness New South Wales as they hold the list of homelessness service providers for the state.

The survey presented the list of indicators that were identified for each outcome area and respondents were asked to select up to five that they felt were most important for the homelessness service sector to use to track client outcomes in that area.

Respondents were also given the option of selecting "don't know about the importance of these indicators", to opt out of selecting any of the indicators, and provided an opportunity to comment on the indicators listed. If respondents chose any of the indicators as most important, the next question presented the five or fewer indicators they selected and asked them to rank those indicators in order of importance where a rank of 1 was most important.

The survey continued in this way for each outcome area, and then concluded with demographic questions about the respondent and their service. Each respondent was presented with four or five outcome areas out of the 18 total outcome areas, in order to reduce the burden of the survey on them. This meant that the 169 services were randomly divided into four survey groups and no one service was asked to assess all of the indicators for all of the outcome areas.

Invitations to respond to the survey were sent out to the 169 services listed in the database that Homelessness NSW maintains. These services represent the district offices out of which homelessness services are delivered. Each branch location of any given organisation was invited to respond to the survey, so long as they operated in NSW. The person responsible for overseeing and leading homelessness services for their service district office was directed to respond on behalf of their service. Unfortunately, we did not have a list of those named individuals so there is a chance that some people who responded to the survey were not those responsible for overseeing and leading homelessness services. In addition, there is a chance that some people who responded to the survey provided responses based on discussion of the survey questions with other people in their office who are responsible for overseeing or leading homelessness services. Respondents were directed to do so if that was appropriate and possible for their office.

The survey was open for 10 days at the beginning of August 2017, and two reminder emails were sent to non-responders in that period. At the close of the survey there had been 110 respondents to the four surveys, but after removing partially completed surveys there were a total of 98 responding services, for a response rate of 58% (98 out of 169). Table 3 presents the number of responses received and response rates for each survey group.

Table 3 Survey groups and outcome areas covered

Survey Group	Outcome Areas covered in survey	# of responding services	Response rate
1	1. Connection and belonging to community 2. Referral and access to appropriate services 3. Overall improvement in wellbeing 4. Children's exposure to domestic violence	24	56%
2	1. Healthy relationships 2. Financial position 3. Positive growth from trauma 4. Satisfaction with home	25	60%
3	1. Access to stable housing 2. Material Resources 3. Increased self-determination 4. Meeting basic needs 5. Client goal setting	20	48%
4	1. Safety (Feeling and perceptions of safety) 2. Access to employment opportunities 3. Access to appropriate and affordable housing 4. Participation in education 5. Relational trust with service	29	69%

The following charts present the characteristics of the 98 responding services and the individuals who responded on their behalf.

Managers and Coordinators were most common respondents on behalf of their services, among the 98 responding services

Project managers, officers, and fundraisers were least represented
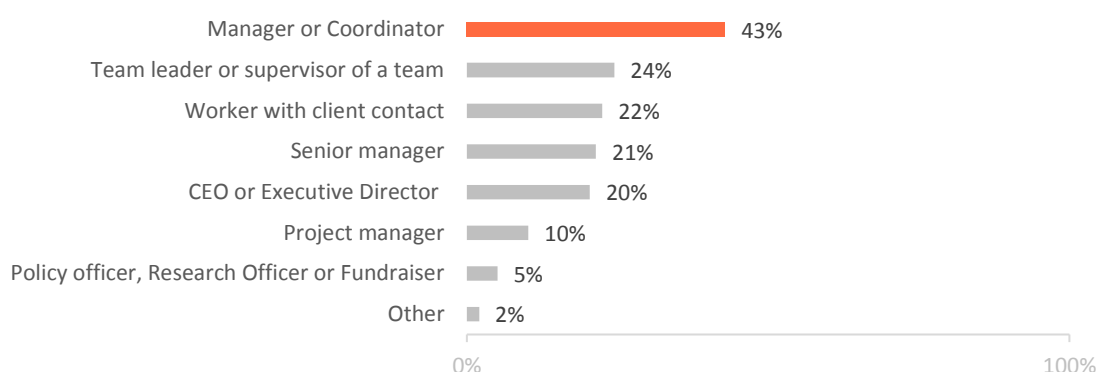
Manager or Coordinator	43%
Team leader or supervisor of a team	24%
Worker with client contact	22%
Senior manager	21%
CEO or Executive Director	20%
Project manager	10%
Policy officer, Research Officer or Fundraiser	5%
Other	2%

0%   100%

SHS Providers were most common among the 98 responding services
Sole Agents were least represented

Specialist Homelessness Service Provider	78%
Partner	19%
Lead	17%
Service Support Fund (SSF)	16%
HYAP (Homeless Youth Assistance Program)	12%
Sole Agent	7%

Sydney and the Hunter/New England regions were the most common areas in which responding services were located, but all regions were represented

Sydney	22%
Hunter New England	22%
Western Sydney	12%
Northern NSW	10%
Southern NSW	9%
Western NSW	8%
Illawarra Shoalhaven	6%
South Western Sydney	5%
No answer	1%
Don't know	1%

0%   100%

Targeting women or children escaping family violence, families, single women, and indigenous people were most common among the 98 responding services

Group	Percentage
Women or children experiencing or escaping domestic or…	61%
Families	61%
Single women	61%
Aboriginal or Torres Strait Islander people	60%
Unaccompanied young people (age 16-24)	56%
Single men	53%
People experiencing mental health issues	51%
People with drug or alcohol abuse issues	44%
People from Culturally and Linguistically Diverse (CALD)…	42%
Rough sleepers	40%
People leaving prison/custody	39%
Unemployed persons	34%
Older adults (age 60+)	33% *
People leaving hospitals or psychiatric institutions	31% *
Gay, Lesbian, Bisexual, Transgender, Queer, Asexual,…	27% *
Men experiencing or escaping domestic or family violence	24% **
Migrants, refugees or asylum seekers	23% *
People with disabilities	22%
Unaccompanied young people (age 0-15)	17%
Veterans and/or their families	9%
Did not target any of these groups	1%

* Services targeting these groups were represented at slightly lower rates among Survey Group 1, compared to their representation in Survey Groups 2, 3, and 4
** Services targeting this group were represented at slightly lower rates among Survey Group 2, compared to their representation in Survey Groups 1, 3, and 4

To arrive at a narrow list of one to two indicators per outcome area, average ranking scores for each indicator were calculated. Each indicator was assigned a value between 1 and 6 for each survey respondent, based on their selection and ranking of that indicator. Indicators that were selected by a given respondent as important for the sector to track and ranked in slots 1 through 5 received values of 1, 2, 3, 4, or 5 respectively. Indicators that were not selected as important (in the top five) were assigned a value of 6, for that respondent. Then an average was taken across respondents for each indicator to determine a ranking score. Respondents who indicated that they did not know about the importance of the indictors were excluded from the calculation of the average for all indicators in that outcome area.

Within each outcome area the indicators with the lowest scores were identified as the most important across respondents. The goal was to identify one indicator per outcome area, but in some instances the ranking scores were so close among the top two or three that they were all retained. The following table displays the priority indicators identified from the survey, by outcome area, along with their average importance ranking scores.

The table shows the indicators within each outcome area that were deemed most important by the survey respondents. Of note is that the average importance scores were generally in the 3 to 4 range, indicating that on average respondents felt these indicators were moderately important for the sector to track and that there was a diversity of opinions across responding services about their importance. For only two indicators was there agreement in their being fairly important (in the 2 range) – an indicator of positive growth from trauma and an indicator of clients' material resources. The three indicators with scores in the 1 range are unique because they were not presented to respondents the same way as the other indicators. These were sole indicators within outcome areas. So instead of having respondents rank the one indicator, they were simply asked if they felt the indicator was important for the homelessness service sector to track, and they could indicate yes (1), no (2), or don't know (3). The vast majority of respondents indicated that, yes, these three indicators were important for the sector to track, and this is why they received scores so close to 1.

From the table, we also see that one indicator received a score of 3.9/4.0. This one indicator is actually a combination of two indicators that received those scores respectively and that were the next highest ranking set of indicators in that outcome area. One indicator was about enrolment of children in preschool, infant, or primary school and the other was about enrolment of clients in secondary, non-school further education, or tertiary education. As the scores were so close and both have to do with enrolment in education they were combined for inclusion as a priority indicator of participation in education.

The following charts and figures display the average importance ranking score all the indicators received, by outcome area.

Table 4 Prioritized indicators

Priority Outcome areas	Priority Indicators identified from survey, for each outcome area	Average importance rank score^				
		1	2	3	4	5
Access to employment	% of clients who are employed, unemployed, or not in labour force			3.4		
Basic needs are met	% of clients who believe their basic needs are met			3.7		
	% of clients who have access to food and safe water			3.9		
Financial position	% of clients with income below the poverty line			3.6		
Material resources	% of clients who have experienced a shortage of money and subsequently could not pay mortgage or rent		2.7			
Participation in education	Level of engagement at school by clients who are students			3.7		
	% of clients enrolled in preschool, infant, primary, secondary, non-school further education, or tertiary school			3.9/ 4.0		
Client goal setting	% of clients who agree that the goals set are aligned with their aspirations and that they have participated in setting them	1.2*				
Self-determination	% of clients who feel empowered to make or keep themselves safe			3.9		
	% of clients who see themselves as being in control of the forces that importantly affect their lives			3.9		
Positive growth from trauma	Average client score for the degree to which they feel they've increased their personal strength as a result of as a result of support for trauma		2.5			
Satisfied with housing	% of clients satisfied with the home they live in	1.2*				
Access to appropriate and affordable housing	% of clients whose housing costs exceed 30 percent of their income			3		
Access to stable housing	% of clients who are homeless			3.5		
Child exposure to domestic violence	% of child clients who have experienced or witnessed their mother's partner abusing their mother			3		
Safety	% of clients who are satisfied with their overall safety				4	
	% of clients who have experienced physical violence against them in the last 12 months				4	
Connection and belonging to community	% of clients who feel part of their community			3.8		
	Level of attachment of Aboriginal or Torres Strait Islander clients with their tribal or language group and traditional country				4	
	% of Aboriginal or Torres Strait Islander clients who identify with a clan, tribal or language group, mission or regional group				4.6	
Healthy relationships	% of clients who feel socially supported and connected			3.4		
Access to referrals and appropriate services	% of referred clients who completed referral at receiving service			3.7		
	% of clients satisfied with the service received (from specific programs/sectors)				4	
Trust in the service(s) they are receiving	% of clients who trust the organisation to serve them well	1.0*				
Overall wellbeing	% of clients who are satisfied overall with their life			3.5		
	% of clients who are satisfied with their quality of life			3.8		

respondents did not rank these indicators, they were only asked if they were or were not important (1=yes, 2=no, 3=don't know)

^ 1 ranked highest, 5 ranked lowest

The following charts and figures display the average importance ranking score all the indicators received, by outcome area.

Access to referrals and appropriate services

Respondents identified two indicators of clients' access to referrals and appropriate services as **most important** for the sector to track, though on average they felt they were moderately important
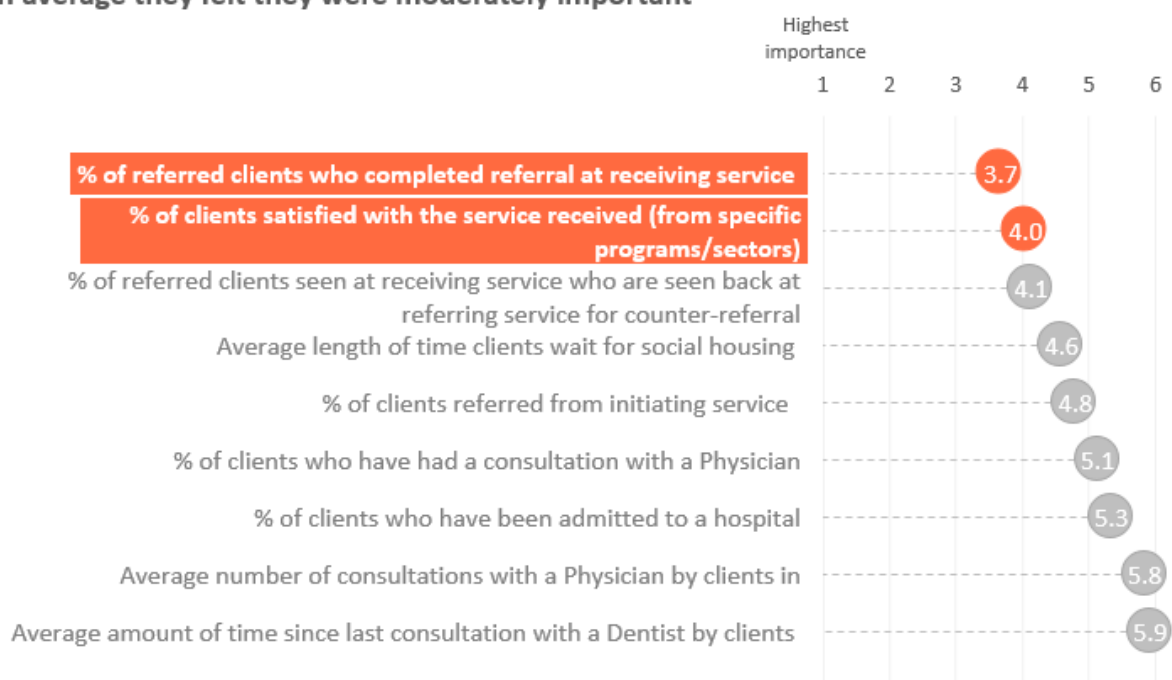
In this outcome area (client access to referrals and appropriate services), though the ranking score received by the "% of referred clients who completed referral at receiving service" was highest, the percentage of respondents who ranked it as 1 was only 12.5%, and 41.7% ranked it a 6 and not in the top 5 at all. Interestingly, the percentage who ranked the next indicator as 1 was higher at 16.7% and the percentage who ranked it a 6 was the same as the other indicator (41.7%). For this reason, both indicators were included as most important in this outcome area.

As mentioned previously, there was only one indicator for the client goal setting outcome that was identified from our review of the literature.

5% of respondents (n=1) said this indicator was not important for the sector to track and 5% (n=1) said they didn't know about the importance of this indicator.

90%

felt "% of clients who agree that the goals set are aligned with their aspirations and that they have participated in setting them" is an important indicator for sector to use to track client goal setting
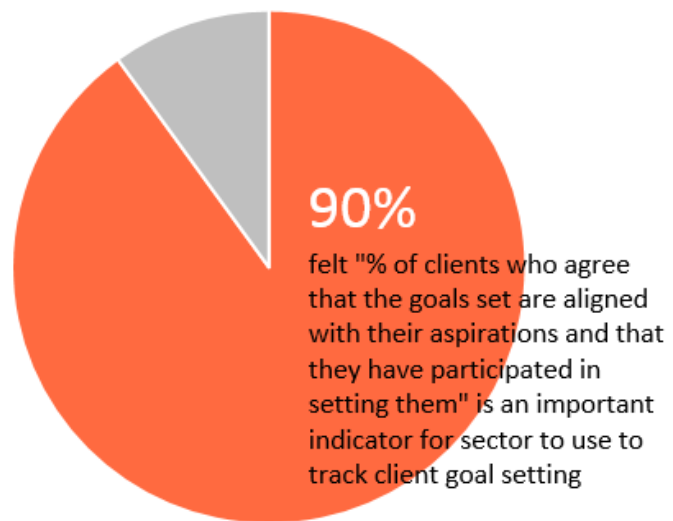
There was also only one indicator for the client trust in the services they are receiving outcome that was identified from our review of the literature.

97% felt "% of clients who trust the organisation to serve them well" is an important indicator for sector to use to track client trust in the service(s) they are receiving

3.5% of respondents (n=1) said this indicator was not important for the sector to track and none said they didn't know about the importance of this indicator.

84% felt "% of clients satisfied with the home they live in" is an important indicator for sector to use to track client satisfaction with housing
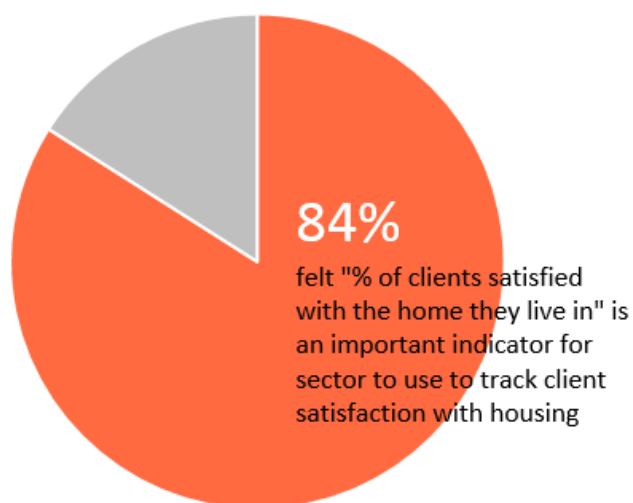
Though 84% agreed with the importance of this indicator, 8% did not and 8% did not know if it was important for the sector to track.

Access to appropriate and affordable housing

Respondents identified one indicator of clients' access to appropriate and affordable housing as most important for the sector to track, and on average they felt it was fairly important

Highest importance

| | 1 | 2 | 3 | 4 | 5 | 6 |

% of clients whose housing costs exceed 30 percent of their income — 3.0

% of Aboriginal & Torres Strait Islander clients who live in overcrowded circumstances — 4.1

% of clients who are satisfied with access to facilities or services from their residence (e.g., shops, family and friends, public transport) — 4.3

The ratio of household members to number of bedrooms in clients' dwellings — 4.3

Average client satisfaction with location of dwelling — 4.7

% of clients who feel they have enough personal space, privacy and freedom in their current living situation — 4.7

% of clients whose residence is walking distance to public transport — 5.3

Within this outcome area, it was clear that the "% of clients whose housing costs exceed 30 percent of their income" indicator was the most important – 48% of respondents ranked it as number 1 in importance, a much higher percentage than observed for most indicators. Interestingly, this indicator may be one of the more difficult for homelessness service providers to affect. Also notable was the fairly low importance score that the indicator "% of clients who feel they have enough personal space, privacy and freedom in their current living situation" received, despite this being an indicator the service providers may have more control over for their clients.

Access to stable housing

Respondents identified one indicator of clients' access to stable housing as most important for the sector to track, though on average they felt it was only moderately important

Highest importance

Indicator	Score
% of clients who are homeless	3.5
% of clients by recent housing situation (e.g., Private boarding house, homeless- staying with friends/relatives)	4.1
% of clients who are rough sleepers by housing status	4.5
% of clients who remain consecutively housed for at least 9 months or more and are currently housed	4.9
Average length of time without permanent place to live among clients	5.0
% of clients by reason for being without a permanent place to live (e.g., saving money, work related, just moved)	5.0
Average number of times clients have ever been without a permanent place to live	5.6
% of clients by main reason for last move (e.g., housing, employment, health, family, lifestyle, or other reasons)	5.6
% of clients who have experienced not having a permanent place to live	5.6
% of clients who have had more than one period of homelessness in lifetime	5.7
Average level of housing instability among clients	5.7
Average level of housing security predictive factors among clients (e.g., temporary nature of accommodation, past evictions, follow landlord's...	5.7
Average number of recent moves among clients (in the last 5 years)	5.7
% of clients who see their current housing situation as secure	5.7
% of clients living in their current home for less than one year	6.0
Average time spent in social housing among clients	6.0

Within the access to stable housing outcome there was a fair amount of diversity of opinion about the importance of the indicator that received the highest importance score. 37% of respondents ranked it as a 1 (most important), but 47% did not think it was important at all and did not include it in their top 5 most important for the sector to track.

Also of note in the distribution of the scores for these indicators was that two fared so poorly: "% of clients who remain consecutively housed for at least 9 months or more and are currently housed" and "Average length of time without permanent place to live among clients". These would seem to be indicators of the core business of homelessness service providers, so it is a

bit surprising that, so few people felt they were important for the sector to use to track client access to stable housing.

Access to employment

Respondents identified one indicator of clients' access to employment as most important for the sector to track, though on average they felt it was only moderately important

Highest
importance

| | 1 | 2 | 3 | 4 | 5 | 6 |

% of clients who are employed, unemployed, or not in labour force — 3.4

% of clients who have been unemployed long term (52+ weeks) — 3.7

% of clients who are looking for work — 3.7

% of clients who are only employed part-time or unemployed by reason for that employment status (e.g., lack of local jobs; need more training;) — 4.3

Detailed employment status of clients, including employed, employed part-time, unemployed, not in labour force, student status, retired,... — 4.6

% of clients who are receiving financial education or financial counselling — 5.2

% of clients who have more than 1 job or business — 6.0

For this indicator with the highest importance of 3.4, 18.5% ranked it in the top (number one) slot as most important and 33.3% felt it was not important, suggesting a fair spread of responses spread across the 1 to 5 ranking positions.

Participation in education

Respondents identified one indicator of clients' participation in education as most important for the sector to track, though on average they felt it was only moderately important

Child enrolment and adult enrolment scored surprisingly low and should be combined into one indicator

Highest importance

| 1 | 2 | 3 | 4 | 5 | 6 |

Level of engagement at school by clients who are students — 3.7

% of child clients or children of adult clients enroled in preschool, infant, or primary school — 3.9

% of youth clients neither in employment, education nor training (NEET) — 3.9

% of clients who are enroled in an educational institution (secondary, non-school further education, or tertiary) — 4.0
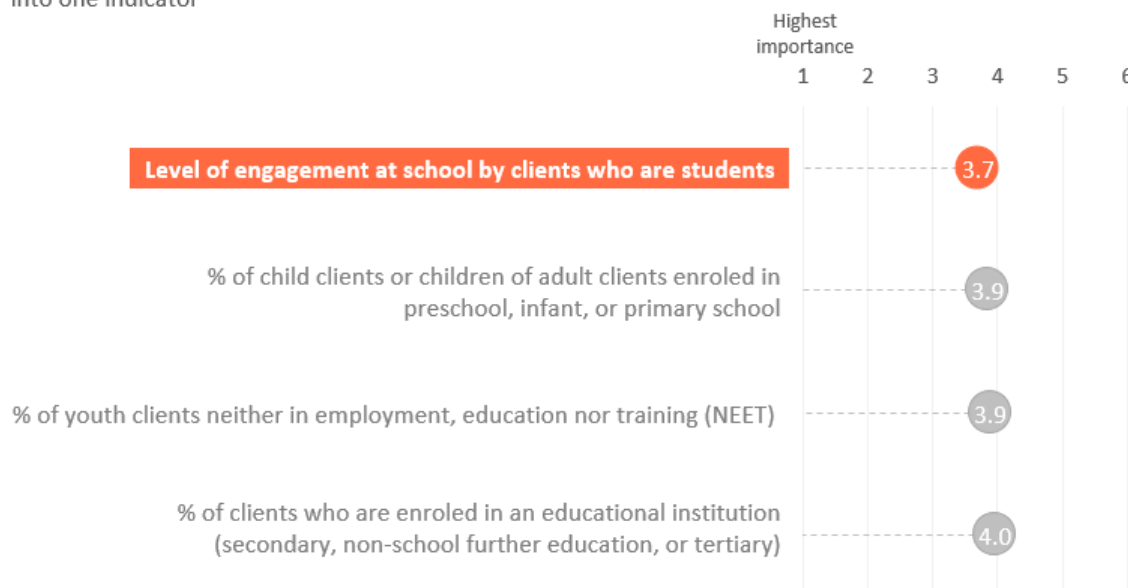
Child exposure to domestic violence

Respondents identified one indicator of child clients' exposure to domestic violence as most important for the sector to track, though on average they felt it was only moderately important

Highest importance

| 1 | 2 | 3 | 4 | 5 | 6 |

% of child clients who have experienced or witnessed their mother's partner abusing their mother — 3.0

% of child clients exposed to other abuse or violence — 3.5

% of child clients who react in various ways to witnessing violence against their mothers (e.g., yelling, calling for help, hiding) — 4.0

% of child clients exposed to domestic violence who have gone on to physically or emotionally hurt someone else on purpose — 4.2

33.3% of respondents ranked the indicator with the highest average importance score in the number 1 position and 33% did not think it was important enough to be included in the top five.

Connection and belonging to community

Respondents identified one broad indicator of clients' connection and belonging to community as **most important** for the sector to track and two indigenous population specific indicators as **most important**, though on average they felt they were moderately important

Highest importance

Indicator	1 2 3 4 5 6	Score
% of clients who feel part of their community		3.8
Level of attachment of Aboriginal or Torres Strait Islander clients with their tribal or language group and traditional country		4.0
% of clients who feel they have a strong social network in their local neighbourhood		4.1
% of Aboriginal or Torres Strait Islander clients who identify with a clan, tribal or language group, mission or regional group		4.6
% of clients who feel a very strong or strong sense of belonging to an ethnic or cultural group		4.8
% of clients who often feel very lonely		5.0
% of clients who often engage in community-building like chatting with neighbours, attending events, volunteering, donating		5.1
% of clients with a large friendship and acquaintance network in their local area.		5.4
% of clients whose main language spoken at home is something other than English		5.6
% of clients who have attended at least one community event in the past year		5.6
% of clients involved with sporting groups, hobby or community organisations		5.8
Average hours per week of paid employment among clients		5.8
Average hours per week of volunteer/charity work		5.8
% of clients who volunteer		5.8
% of clients who look after other people's children (aged under 12 years) on a regular, unpaid basis		5.9
% of clients who have been actively involved in organisations, clubs, or associations...		5.9
% of clients attending arts or cultural activities e.g. fetes, shows, festivals or other community events		6.0
Average hours per week spent caring for disabled or elderly family members by clients		6.0
% of clients who attended a live performance in the last year		6.0
% of clients who participated in organised sport in the last year		6.0
% of clients who attended any sporting event in the last year		6.0

Self-determination

Respondents identified two indicators of clients' ability to self-determine as most important for the sector to track, though on average they felt they were only moderately important

Highest importance

| | 1 | 2 | 3 | 4 | 5 | 6 |

% of clients who feel empowered to make or keep themselves safe — 3.9

% of clients who see themselves as being in control of the forces that importantly affect their lives — 3.9

% of clients who believe their psychological needs (autonomy, competence, and relatedness) are met — 4.2

% of clients who believe in their ability to succeed in specific situations or accomplish a task — 4.3

Average level of confidence that clients have in their ability to cope across a range of demanding situations — 4.8

The percentage of respondents who ranked these two indicators in the number one position were 28% (for "% of clients who feel empowered to make or keep themselves safe") and 22% (for "% of clients who see themselves as being in control of the forces that importantly affect their lives"). 50% and 44%, respectively, did not think that these indicators were important enough to be in the top five. The ranking score and the distribution of ranking were very similar for these two indicators.

Overall wellbeing

Respondents identified two indicators of clients' overall wellbeing as most important for the sector to track, though on average they felt they were moderately important
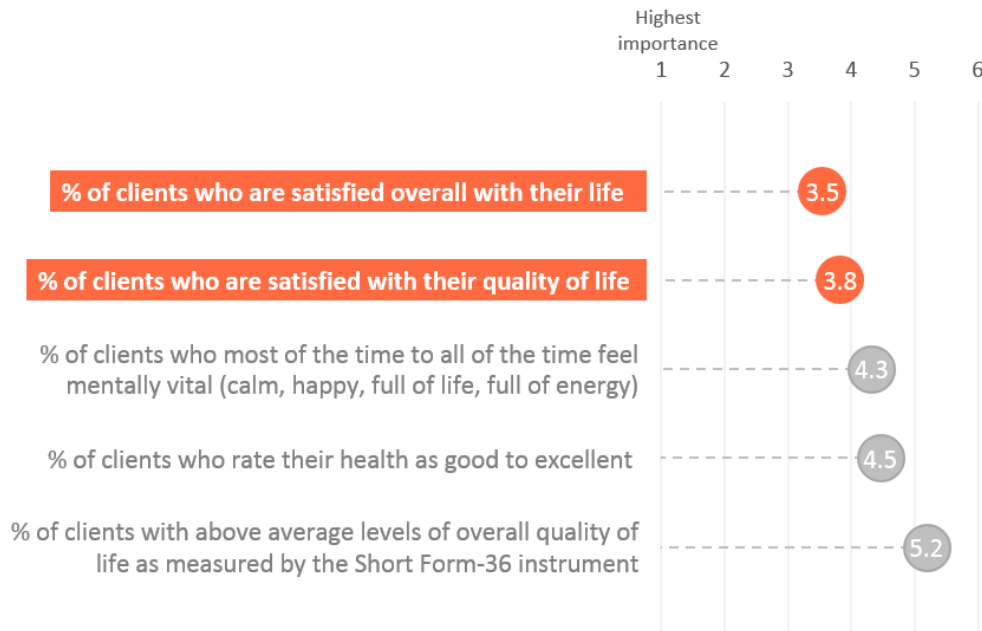
Interestingly, though the average importance score for "% of clients who are satisfied overall with their life" was better than the score for "% of clients who are satisfied with their quality of life", the percentage of respondents who ranked the second indicator in the number one (most important) position was greater. 22.7% of respondents ranked it number one, compared to 13.6% of respondents who ranked "% of clients who are satisfied overall with their life" number one, but only 36% did not feel this indicator was important at all, compared to 45% who did not feel the "% of clients who are satisfied with their quality of life" was important at all. Due to this interesting distribution of responses, both indicators were identified as most important for the sector to use to track client wellbeing outcomes.

Positive growth from trauma

Respondents identified one indicator of clients' positive growth from trauma as most important for the sector to track, and on average they felt it was a fairly important indicator

As mentioned previously, "Average client score for the degree to which they feel they've increased their personal strength as a result of trauma" received one of the highest importance scores of all indicators. 62.5% of respondents ranked this indicator number one, most important, and only 25% did not feel it was important enough to be in the top five.

Healthy relationships

Respondents identified one indicator of the health of clients' relationships as most important for the sector to track, though on average they felt it was only moderately important

Highest importance

	1	2	3	4	5	6
% of clients who feel socially supported and connected			3.4			
% of clients with an expected source of (financial, emotional, physical, or other) support in a crisis				4.1		
Client perceptions of their social connection and social isolation				4.5		
% of clients who have family members that they can confide in					5.1	
Client levels of satisfaction with their friends and friendships					5.4	
Client levels of satisfaction with their partner relationships					5.4	
% of clients who feel able to have a say with their family or friends on important issues					5.5	
% of clients who report their family's ability to get along with one another as 'good', 'very good' or 'excellent'					5.5	
% of clients who have been helped in the past month, by type of provider (e.g., friends) and type of support (e.g., child care)					5.5	
% of clients aged 18 years and over who have contact with family or friends living outside the household					5.6	
% of clients who are satisfied with their level of closeness with friends					5.7	
Client levels of satisfaction with their parent relationships					5.7	
Frequency of face-to-face social contact with family and friends					5.8	
The number of close friends that clients have					5.9	
The number of close relatives that clients have					5.9	
% of clients who are satisfied with the number of friends they have						6.0
The number of not very close friends that clients have						6.0
Client levels of satisfaction with their step parent relationships						6.0

28% of respondents ranked the best scoring indicator of this set in the number one slot, and only 40% ranked it as a six – not in the top five most important indicators at all. Also notable for this set of indicators is the fact that many of them had averaged importance scores close to or at six, meaning that all or most respondents did not find them important at all.

Basic needs are met

Respondents identified two indicators of clients' basic needs being met as most important for the sector to track, though on average they felt were only moderately important
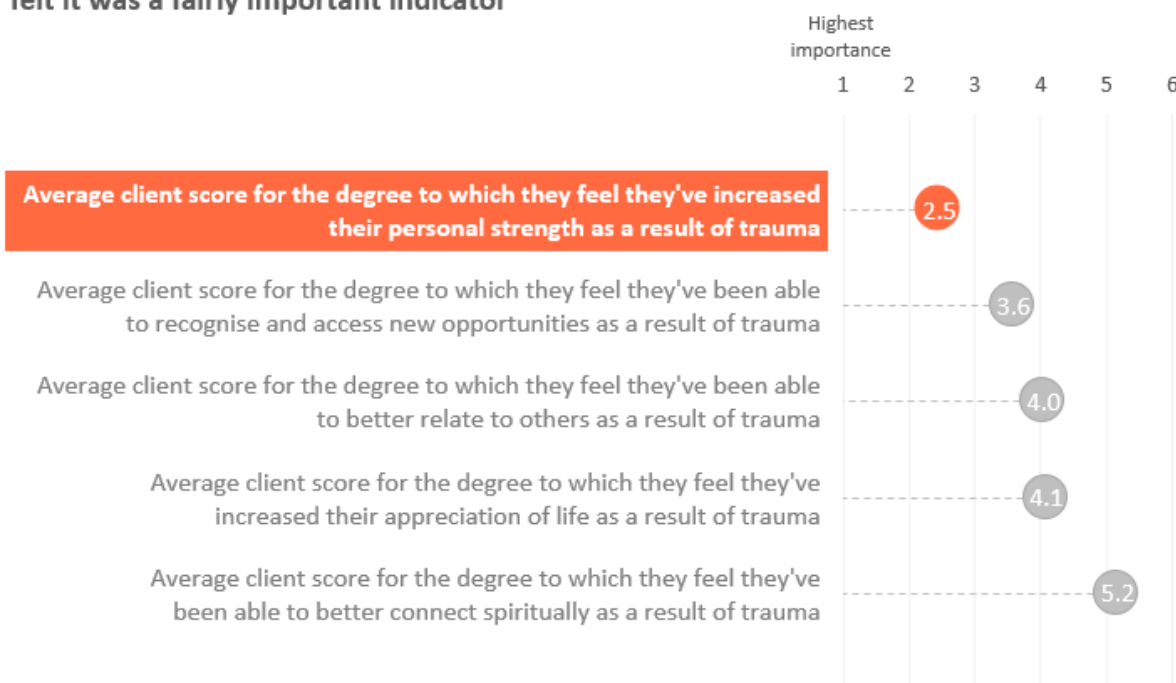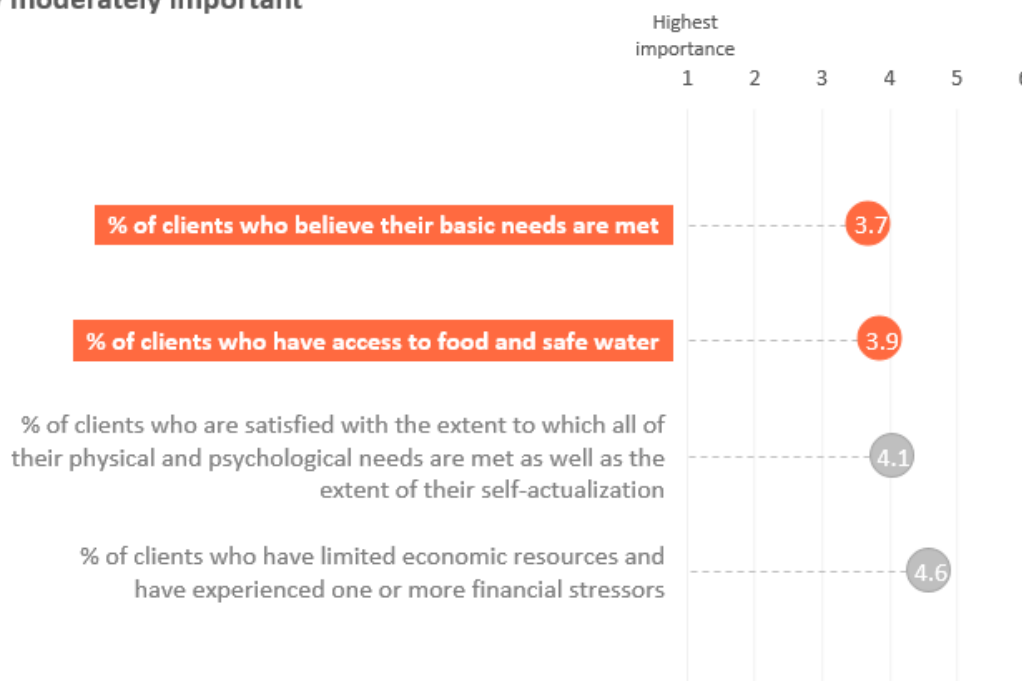
Highest importance

	1	2	3	4	5	6

% of clients who believe their basic needs are met — 3.7

% of clients who have access to food and safe water — 3.9

% of clients who are satisfied with the extent to which all of their physical and psychological needs are met as well as the extent of their self-actualization — 4.1

% of clients who have limited economic resources and have experienced one or more financial stressors — 4.6

These top two indicators had the same percentage of respondents who did not feel they were important at all for the sector to track, and that percentage was moderate (44.4%). 22.2% of respondents ranked "% of clients who believe their basic needs are met" as most important and 16.7% of respondents ranked access to food and safe water as the most important indicator in this group.
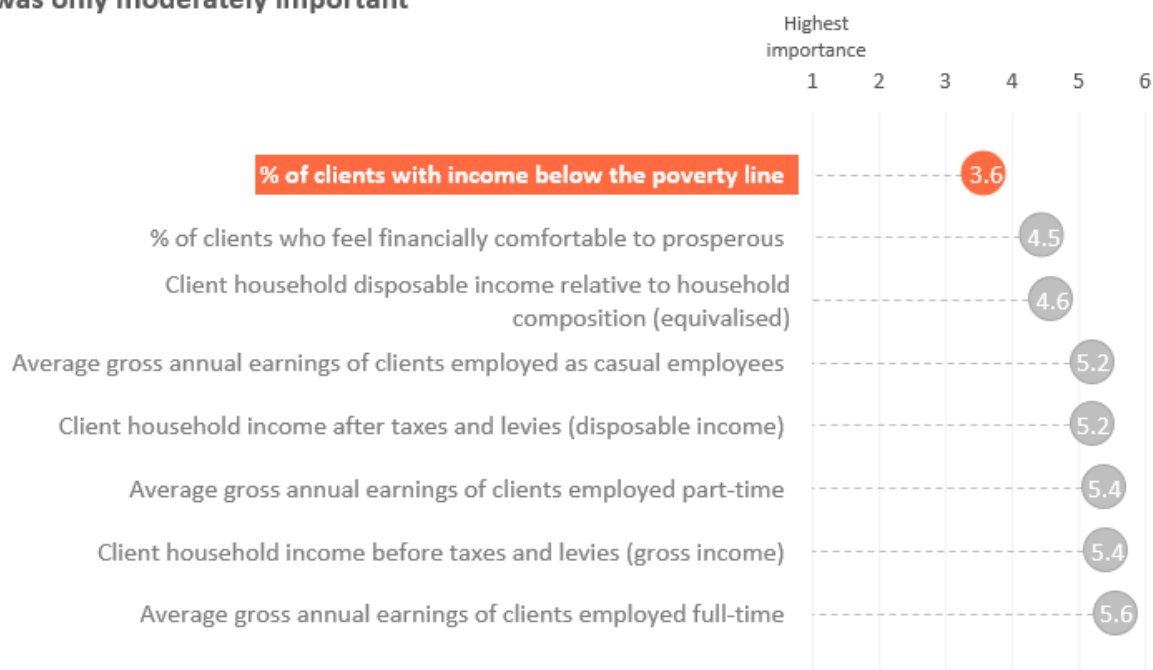
Financial position

Respondents identified one indicator of clients' financial position as most important for the sector to track, though on average they felt it was only moderately important

Highest importance

	1	2	3	4	5	6

% of clients with income below the poverty line ---- 3.6

% of clients who feel financially comfortable to prosperous ---- 4.5

Client household disposable income relative to household composition (equivalised) ---- 4.6

Average gross annual earnings of clients employed as casual employees ---- 5.2

Client household income after taxes and levies (disposable income) ---- 5.2

Average gross annual earnings of clients employed part-time ---- 5.4

Client household income before taxes and levies (gross income) ---- 5.4

Average gross annual earnings of clients employed full-time ---- 5.6

Material resources

Respondents identified one indicator of clients' material resources as most important for the sector to track, and on average they felt it was fairly important

Highest importance

| | 1 | 2 | 3 | 4 | 5 | 6 |

% of clients who have experienced a shortage of money and subsequently could not pay mortgage or rent — 2.7

% of clients who have experienced a shortage of money and subsequently asked for help from welfare/community organisations — 3.3

% of clients who have experienced a shortage of money and subsequently went without meals — 3.5

% of clients who have experienced a shortage of money and subsequently could not pay utility bills — 3.7

% of clients who have experienced a shortage of money and subsequently asked for help from friends or family — 5.0

% of clients who have experienced a shortage of money and subsequently pawned or sold something — 5.1

% of clients who have experienced a shortage of money and subsequently were unable to heat home — 5.5

The top indicator in this outcome area was also one of the best scoring indicators across all the outcome areas included in the survey of homelessness service providers. Just over 47% of respondents ranked this indicator in the number one, most important, position, while only 21% did not include it in the top five at all. Clearly the consequences of money shortages affecting housing resonated most with the providers surveyed.

Safety

Respondents identified two indicators of clients' safety as most important for the sector to track, though on average they felt they were only moderately important
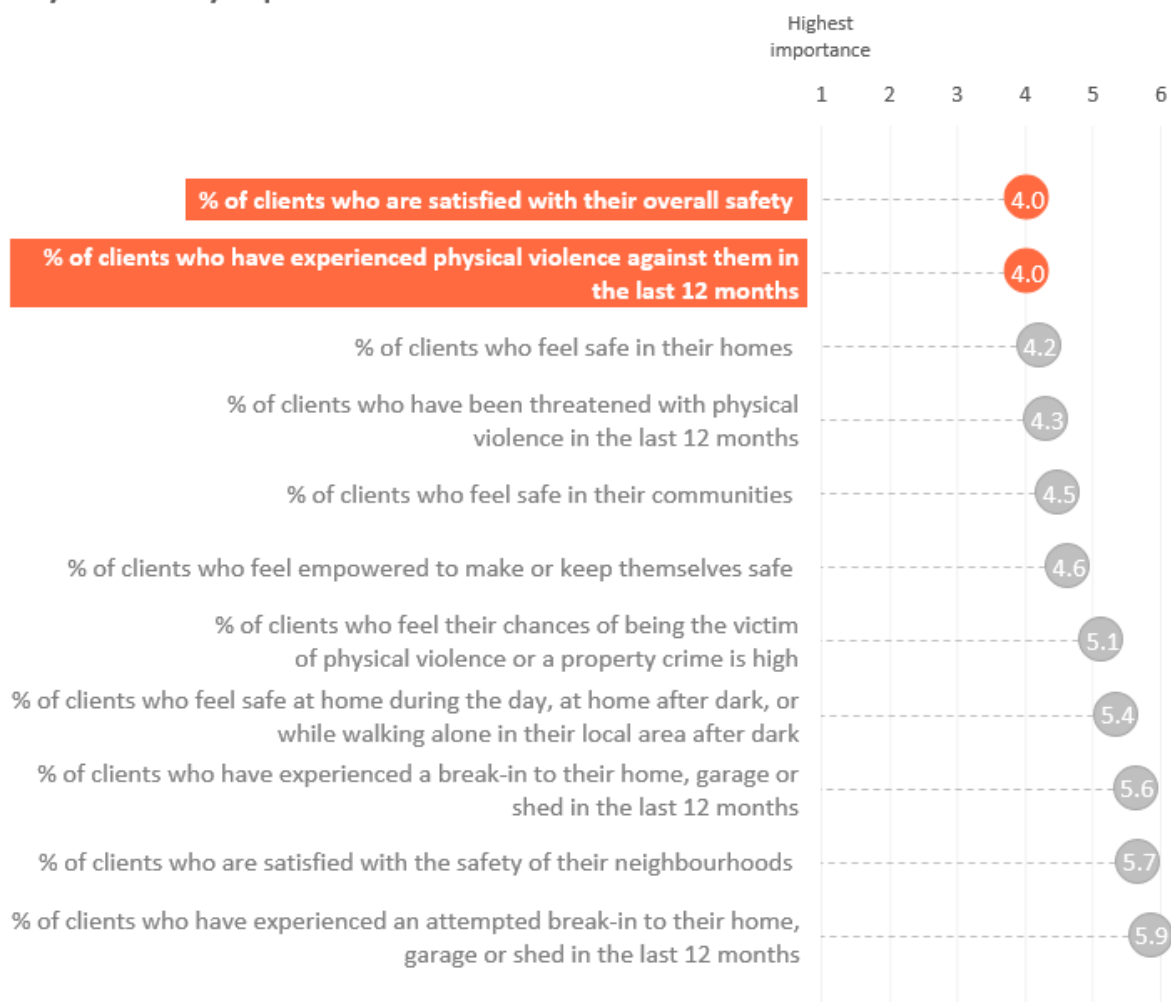
These two indicators both received average importance scores of 4.0 from the survey results, and the percentages of respondents who ranked them in various positions were also very similar. 17.9% of respondents ranked the "% of clients who are satisfied with their overall safety" as 1 and 25% ranked the "% of clients who have experienced physical violence against them in the last 12 months" as 1. Then around 40% did not include either of these indicators in their top five most important for this outcome area.