

Developing an evidence base for public policy advocacy

**The Journey to Social Inclusion (J2SI)
research and evaluation**

Angela Merriam
Public Policy and Advocacy Advisor



Who is Sacred Heart Mission?



Our mission is to build people's capacity to participate more fully in community life, by addressing the underlying causes of deep, persistent disadvantage and social exclusion.



Research and advocacy

Does research matter?

- Yes!
- Even if not for the reasons we think it does
- ‘Evidence-based’ public policy is here to stay

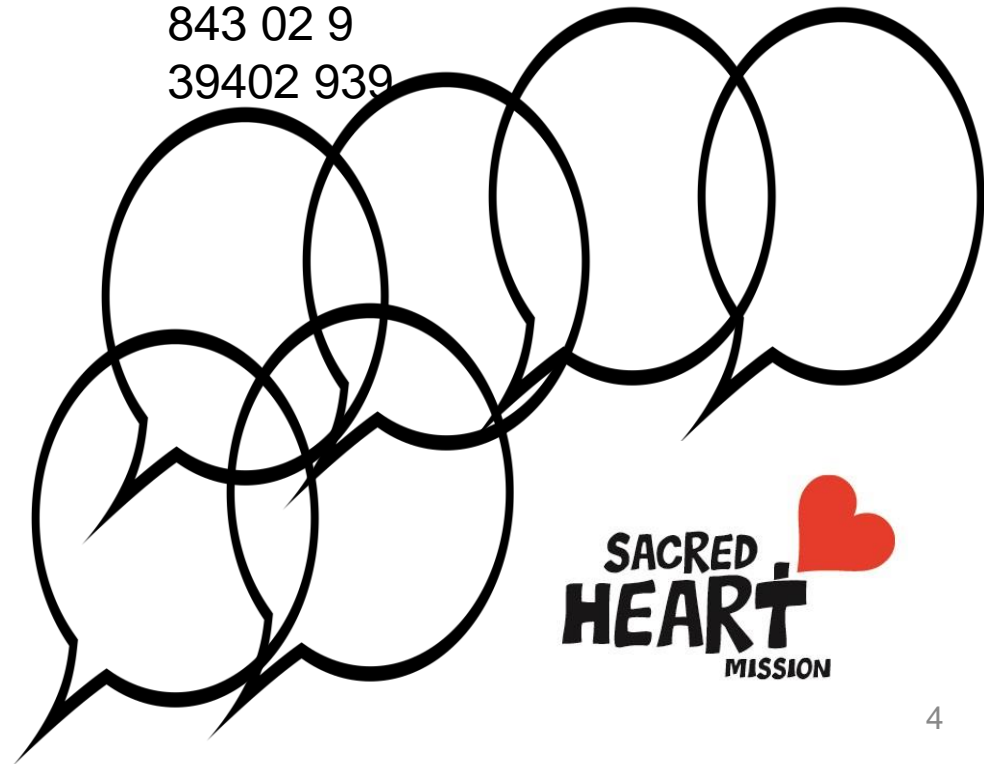


Research and advocacy at Sacred Heart Mission

Research  Advocacy

- We use research and evidence-informed practice to:
 - Evaluate innovative models and services
 - Measure our impact and social return on investment
 - Inform our public policy and advocacy strategy

184 834 92348
234 98384 02
843 02 9
39402 939



Journey to Social Inclusion (J2SI)

- Based on research regarding the 'pathways' into homelessness
- Trauma is both a cause and consequence of homelessness
- Recovery and learning to manage the effects of trauma takes significant time

"I always dream – not necessarily plan – but I sort of fantasise about this; I always think that I'm going to get my own place, I'm going to join a gym, I'm going to do some dance classes... and I'm going to get a job and it will all be fine." Aidan, 28

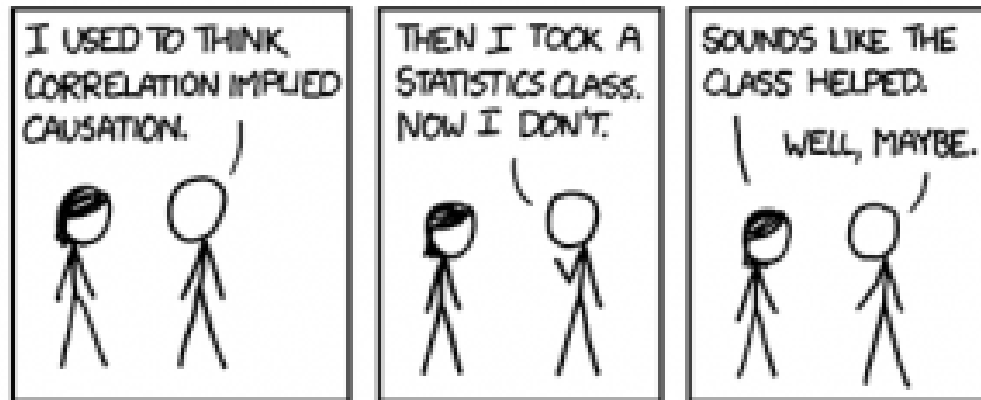
Research on service innovation

Independent evaluation of the J2SI pilot

- Goals of research are to:
 - Test the efficacy of a long-term, well-resourced and intensive service model
 - Demonstrate the social and economic benefits of ending a person's long-term homelessness by analyzing service usage and economic participation
- Randomised control trial provided rigorous, longitudinal data

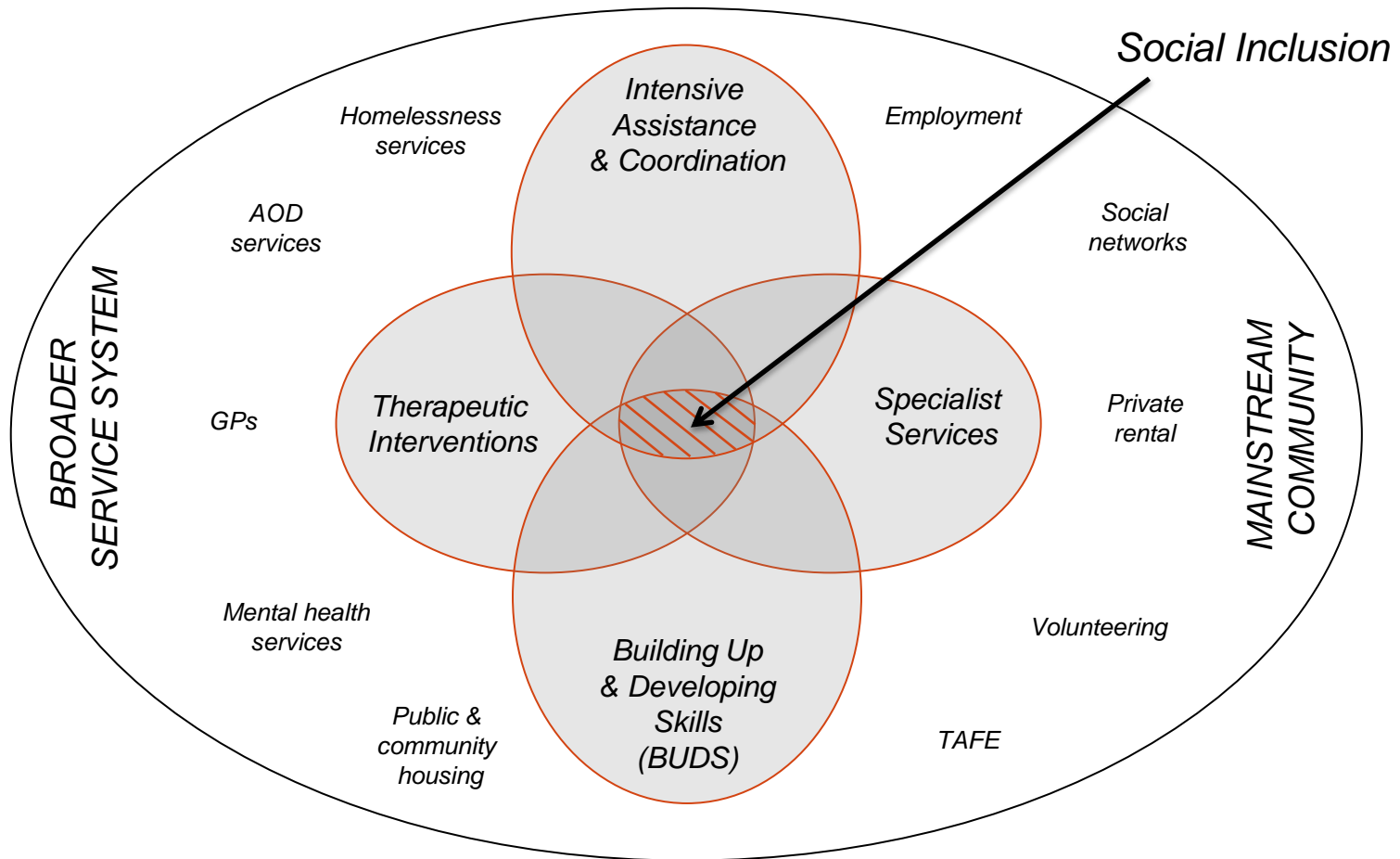


Why a Randomised Control Trial (RCT)?



What is the J2SI model?

Key elements of the service model



J2SI Evaluation Framework

Elements in the evaluation

PROCESS ELEMENT

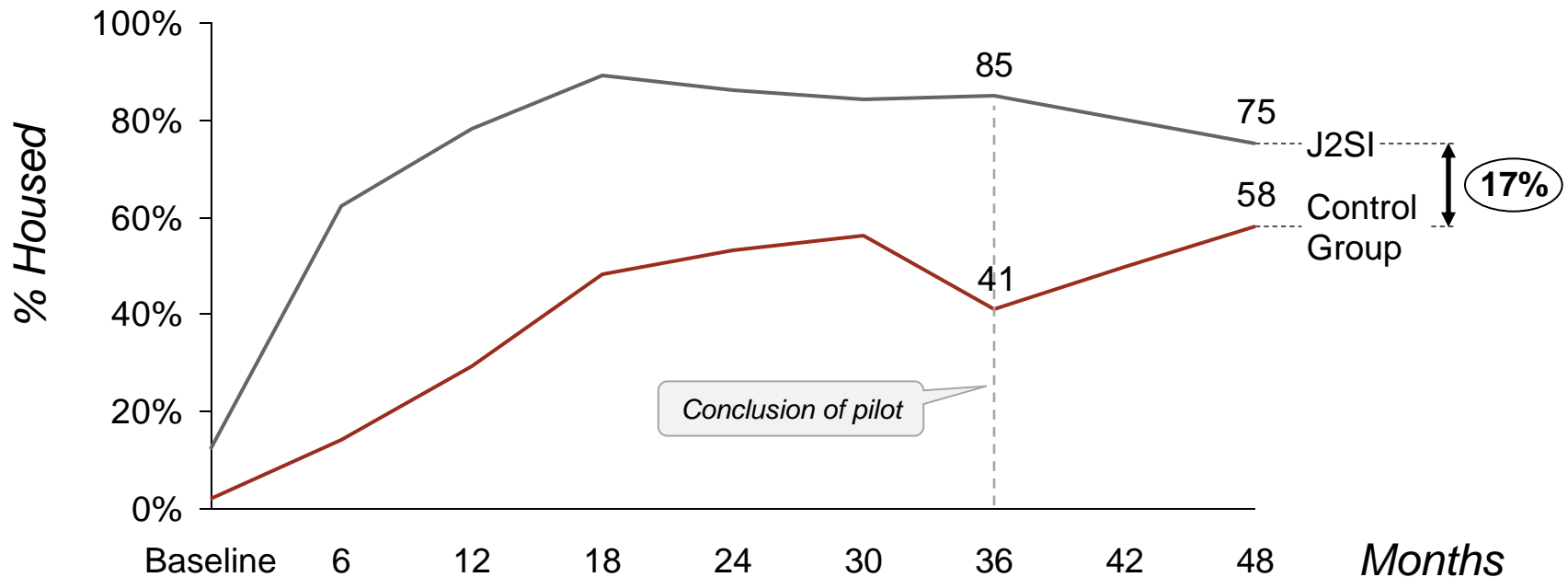
- Connects processes to outcomes through evaluation logic model
- Documents processes, program implementation and how we refine the service model

OUTCOMES ELEMENT

- Experimental design with a randomised control group
- Longitudinal study following two equivalent groups of people with experiences of chronic homelessness over six years

J2SI outcomes

Proportion of participants housed after 36 months



Housing outcomes achieved by the J2SI pilot are comparable with the best outcomes achieved by homelessness programs

Study	Proportion housed following service response (%)				
	<i>0 months</i>	<i>12 months</i>	<i>24 months</i>	<i>36 months</i>	<i>48 months</i>
J2SI Treatment Group, 48 Month Evaluation, 2015	12	78	86	85	75
J2SI Control Group, 48 Month Evaluation, 2015	2	29	53	41	58
Street to Home, Melbourne, 24 month Evaluation, 2015	0	78	70	Not measured	
Michael Project, 2007-2010	0	58	Not measured		

Benefits for society & gov't

Beneficiary	Quantified benefits after 48 months (per person)	Key drivers
<i>Society</i>	\$105,995	<ul style="list-style-type: none"> • Mortality • Health services • Accommodation and support services • Justice system contact (negative impact)
<i>Government (including justice system contact)</i>	\$14,978	<ul style="list-style-type: none"> • Health services • Accommodation & support services • Taxation revenue • Alcohol & other drug services
<i>Government (excluding justice system contact)</i>	\$32,080	<ul style="list-style-type: none"> • As above, but with justice system contact (negative impact) removed • The treatment group incurred higher justice costs than the control group, but these were predominantly attributable to crimes committed prior to the pilot

Benefits are calculated with reference to the control group, demonstrating that J2SI is more

J2SI Phase 2 (2016)

Objectives of the research

- Deliver an enhanced model based on the J2SI Pilot learnings
- Demonstrate that the model can be delivered across multiple sites in Melbourne, working with strategic partners
- Test a more cost efficient model with a higher client to staff ratio and demonstrate improved return on investment
- Identify key interventions that have the greatest impact on individual outcomes.

The enhanced J2SI model

The 5 service elements



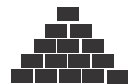
Assertive case management & service coordination (3 years)



Housing access and sustaining tenancies



Trauma informed practice



Building skills for inclusion



Fostering independence

Refined program logic

Issue

Participants

Activities

Outcomes

Impact

People who experience long term homelessness, trauma and disadvantage are unable to access the level of support required to address the complex underlying issues that prevent them from obtaining and sustaining suitable housing and participating in community life.

People who are experiencing chronic long term homelessness and have a range of complex underlying issues including:

- Disadvantage
- Social isolation
- Trauma
- Mental health issues
- Substance use
- Chronic health conditions

Inputs

- Philanthropic funding
- Paid staff

Intensive case management support

Referral to specialist and mainstream services

Social Inclusion development activities

Linkages to employment services

Tenancy support and capacity building to maintain housing

Trusting relationship established

Access to formal trauma informed therapeutic interventions

Improved access to specialist and general health services inc. AOD & Mental Health

Improved interpersonal and life skills

Improved self esteem

Improved access to social and community activities

Increased opportunities to participate in employment pathway activities e.g. Education, volunteering, training

Rapid access to housing

Increase in positive coping strategies

Increased capacity to self-manage mental health

Safer levels of AOD use

Health issues identified and managed

Decreased use of crisis and emergency services

Increased capacity to navigate support services and mainstream services

Increased social connection

Increased participation in mainstream social settings

Improved employment readiness skills

Stabilized in secure housing arrangement

Increased capacity to manage and negotiate housing arrangements

Improved health and wellbeing

Increased social participation

Increased capacity for independence

Economic participation

Sustained housing

People who have experienced long term homelessness and trauma are more able to sustain their housing due to enhanced access to services that help to improve their health and wellbeing and connection to the wider community.

Key:

Golden thread outcome

Positive outcome

Improving cost efficiency

Measures	Indicative data points to be validated through Mark II
J2SI Mark II unit cost	\$54,000 (\$18,000 per year)
Annual savings to Government per participant (\$), based on alternative analysis of Mark II data	\$19,641
Years of future savings*	11.09
Savings to Government per participant	\$217,818
Return on Government's investment	\$4 savings for every \$1 spent on program costs

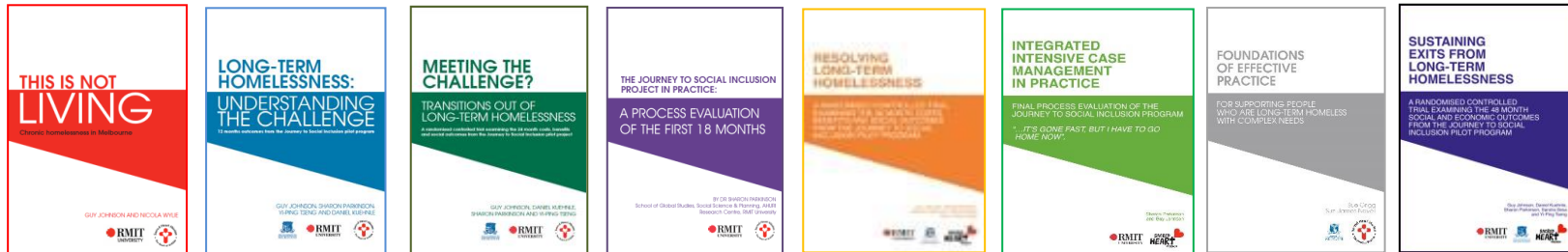
* Based on the average age of J2SI participants and the life expectancy of long-term homeless people (Bethlehem House, 2013)

Conclusion and discussion

- Why does 'scientific' or quantitative evidence matter?
- What other types of evidence matter? Why?
- What are other ways to achieve public policy advocacy aims?



- Evaluation reports can be found at www.sacredheartmission.org



87 Grey Street, St Kilda 3182
PO BOX 1284 St Kilda South 3182
T (03) 9537 1166 | F (03) 9525 3268
www.sacredheartmission.org
www.facebook.com/sacredheartmission
@ScdHrtMission

