



# Evaluation of the Sunshine Project

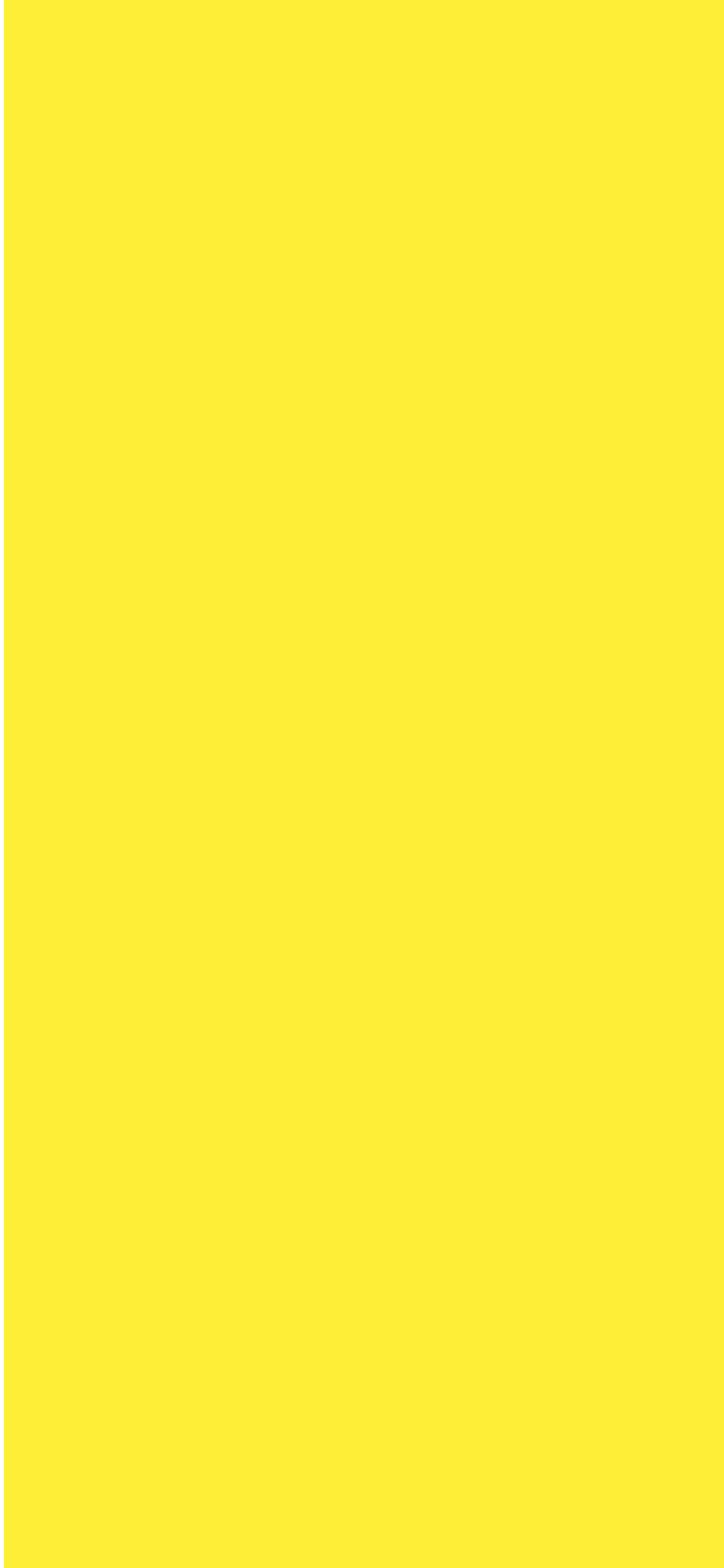
Final Report

14 December 2023

# Contents

Page:

1.	<b>Executive Summary</b>	3
2.	<b>Introduction</b>	9
3.	<b>Key findings: What happened?</b>	12
4.	<b>Key findings: What changed for families?</b>	23
5.	<b>Key findings: Cost-benefit assessment</b>	44
6.	<b>Conclusions and considerations</b>	50
7.	<b>Appendices</b>	58
	Appendix 1: Survey tools	
	Appendix 2: Cost-benefit methodology notes	
	Appendix 3: Evidence used in cost-benefit methodology	



# Executive summary

# Executive Summary

The Sunshine Project is a multi-year action research project undertaken in partnership by Anglicare WA and Ruah Community Services (Ruah). It is a multifaceted program of work modelled on the concept of 'Radical Help' (Hilary Cottam, 2018), which includes intensive and flexible support from a Families Coach, flexible funding to address immediate concerns, and some community development activities to grow the capacity of the community to support families.

The Project is working with six families in the Kwinana-Rockingham area. Families included a primary help seeker adult (5 women, 1 man), and typically additional adult family members, such as partners, ex-partners, other adult children and grandparents. Households all had children, and in total, there were 18 children in the care of the six adults. Kwinana-Rockingham was selected as the geographic area through an analysis of a number of indicators of relative poverty and disadvantage conducted by the Project partners, along with consideration of other services in the area and the feasibility for providing support in the area.

The first of the six families started with the Project in January 2022 and the most recent starting in December 2022. This means that different families received a different duration of support, depending when they were onboarded.

This evaluation aims to:

- Describe the program and how it is different to other services or approaches to addressing hardship;
- Document the impact on families, services and government; and
- Provide an assessment of the potential costs and impacts of this approach compared to alternatives.

Due to the small number of families engaged to date, and the limited amount of time they have been engaged, the findings outlined here should be considered indicative and directional.

## ***What was different about Sunshine? Some key elements.***

Like many families seeking help from social services, the families in this Project faced challenges that crossed traditional service silos. All of them are in difficult financial situations and face housing insecurity. Some are struggling with leaving violence, and with their own and their children's physical and mental health. Some have already had involvement by child protection agencies, and there is real risk of further intervention if families can't solve pressing challenges.

Unlike most programs, the Project did not specify outcomes such as housing, jobs or children's well-being. Rather, families identified a wide variety of things they chose to work towards in their vision of 'the good life', which included to study and work, to be more engaged in their community, specific immediate material things such as new furniture, and to give back. Top of mind for families were things that increased 'the good life' for the children in their care.

The ability to work towards such diverse goals with different families required high levels of flexibility, a mix of proactive and reactive work, a focus on relationships, and working in context (including direct work with the community). These practices were able to be realised fully due to strong enabling conditions such as the self-funding of the Project, no ties to government contracts, investment in innovation and learning, high level of commitment and collaboration across all levels (including leadership), and separation from existing service delivery.

"It's not just what you need now, but what you need in the future ... to thrive, not just survive."

(Family member)

"A family support that can be adjusted to your needs - to help me get closer to my idea of the good life."

(Family member)

# Executive Summary



**The Project builds up supports within and around the families.** It acts to both to support families and to address community issues - recognising that the latter are part of what is holding some families back.

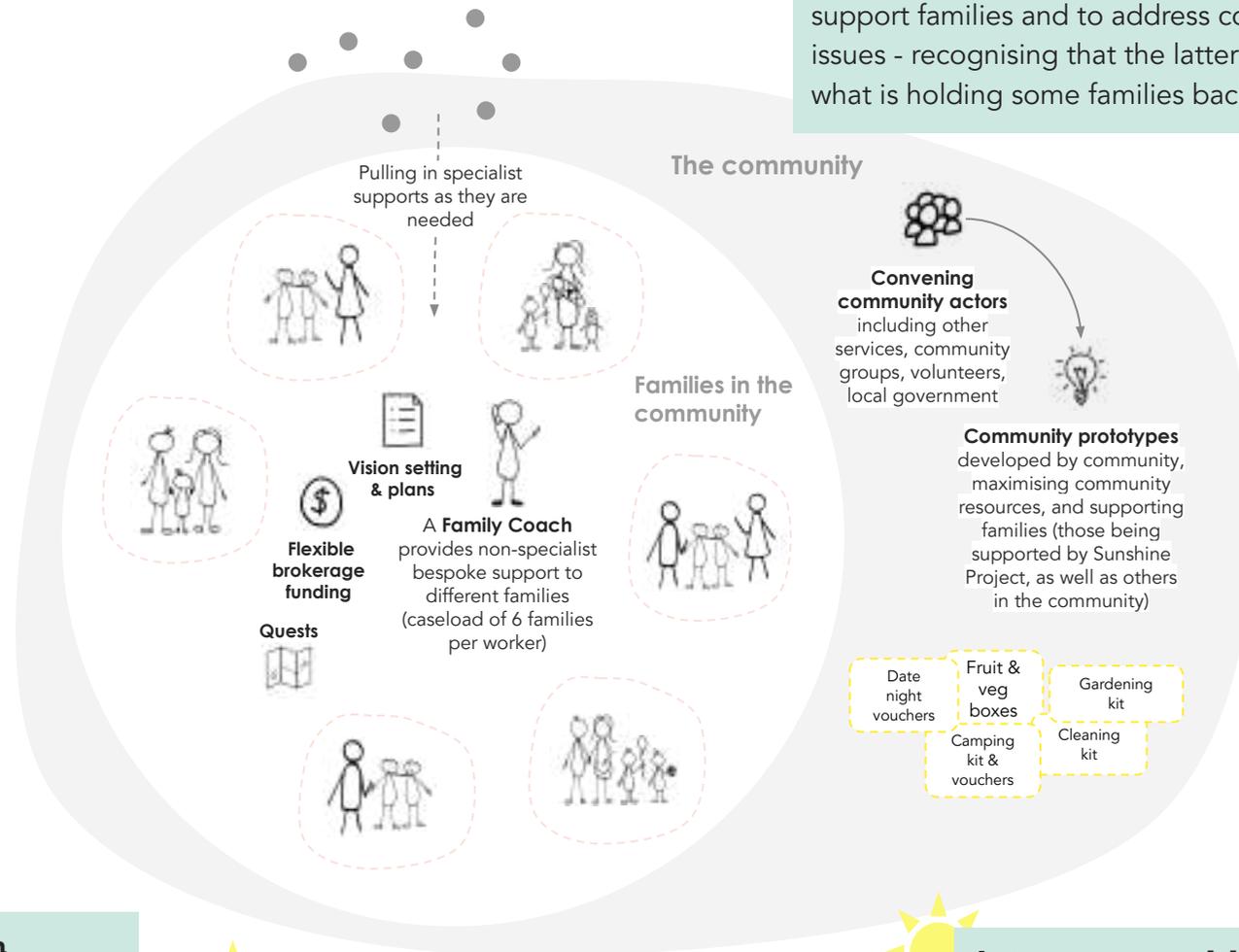
## The Sunshine Project model

The Project's model contains a number of elements that interact with each other to provide different types of support and assistance to families. This is shown in the figure (right) and include:

- Family Coach (p. 15)
- Vision setting and family plans (p. 17)
- Flexible brokerage funding (p. 18)
- Quests (p. 18)
- Community convening and community prototypes (p. 19)

Further details of each of these elements is provided in the body of this report.

A summary of the key unique practices is also provided here (see green boxes).



**Sunshine can “help with (almost) anything”.** It is flexible and agile, including prevention and intervention, proactive and reactive elements.



**Relationships are at the heart of the work.** A trusted relationship with one consistent worker who “actually gets things done”.



**Autonomy around decision making and flexible brokerage.** This enables the Project to overcome common immediate barriers and is “a lifesaver” for families.

# Executive Summary

## ***Impact on families***

The below table summarises the outcomes identified for the six families up to October 2023 (noting the Project continues until December 2023).

	Change in housing	Change in finances	Change in work participation	Change in violence	Change for children's wellbeing	Change in health	Change in social services use
<b>Key outcomes observed to date</b> (per family unless otherwise noted)	3 x avoided eviction from private rental 1 x avoided eviction from social housing 1 x negotiated reduced rental increase	3 x cleared and/or started managing debts 1 x sorted out Bond debt	1 x commenced and maintained work 1 x avoided job loss	1 x has not returned to a violent relationship (after multiple previous attempts to leave)	8 x children avoided possible eviction 2 x children avoided exposure to violence 3 x children having counselling 15 x children maintained / re-engaged in school	3 x newly accessing primary health care 1 x returned to/started with psychologist 3 x started counselling	2 x applied for additional NDIS 2 x applied for DSP 1 x approaching Reconnect (Youth Homelessness)

As shown above, there were specific and concrete outcomes for families in terms of evictions avoided, jobs started, and leaving or staying out of violent and/or controlling relationships.

Outcomes for children include maintaining or improving engagement in school (15 children) where previously there had been school avoidance or absenteeism (noting this was not always a sustained outcome), and the flow-on effects to children of avoided homelessness and violence.

There were also benefits for children derived from the ability to prioritise things like celebrations, excursions, school sports and proper furniture that are important today to 'a good life' for children, and are likely to be good for children's futures as well.

In all, families in the Project say they are doing better, and are feeling better. They are accessing primary and preventative health services such as counselling that will support them to be well and healthy in the future. The outcomes are also being seen in ways such as a greater sense of well being, control and purpose, which in turn builds the capacity solve their problems and to start to help other people around them.

## ***Impact on services***

While the Families Coach helped families with referrals and service access, they also avoided calls on other services - including homelessness, crisis response and family and domestic violence. This is because the Families Coach was able to help families deal with their issues directly, as well as through referrals. So when there were threatened evictions, the Coach liaised with landlords or Department to identify the issues and then families to help resolve them.

The coach also reduced interactions with some services through advocacy, for example they were able to help a family avoid eviction from social housing by advocating with the Department of Communities.

Community services regularly report being overwhelmed with demand. In this context, the Project helped avoided multiple calls on multiple services from 6 families with 18 children, enabling other clients to be helped.

Families also reported engaging in preventative services such as counselling and primary health. This should reduce the call on other tertiary and crisis services in the future.

# Executive Summary

## Impact on government

This Report uses calculations based on avoided evictions, avoided violence, and job gains to calculate savings to government.

Using the methodology (see p. 47) this suggests that the ratio of per year savings to per year costs of the program are of the order of the following:

\$0.75 Benefit (per year, potentially on-going) for \$1 spent (in 1 year)	\$0.89 Benefit (per year, potentially on-going) for \$1 spent (in 1 year)	\$2.63 Benefit (per year, potentially on-going) for \$1 spent (in 1 year)
Scenario 1: Without child protection assumptions.	Scenario 2: Assumes child protection (no order) avoided	Scenario 3: Assumes child protection (care orders) avoided

Further to this, we note:

- These figures show the value of the Project based on the outcomes achieved in up to two years of operation, before conclusion of the Project. As such, they should best be seen as 'directional'.
- In subsequent years these gains may have been maintained, in which case the benefits valued here could continue to be derived (and potentially increased) over multiple years, without additional (or with reduced) project expenditure. This would increase the ratio of benefits to costs.
- The scenarios differ depending on assumptions around child protection. This is not to suggest these parents pose any risk to their children. However, child protection involvement often follows economic and housing insecurity.
- We have not included any calculations for inter-generational effects (savings from avoidance of adverse childhood experiences), even though the benefits could be considerable.
- We have also not included any impact of increased well-being or life satisfaction for families, although these might also be considerable.

## What led to these outcomes?

Reports from families identified the following as the most consistently cited reasons that Sunshine Project achieved the stated outcomes.

- A single trusted relationship with a generalist worker, who offered a combination of 'services'. The Family Coach was a generalist worker whose flexibility and responsiveness truly met families' needs - whether this be helping to draft letters to legal providers, driving people to appointments, or helping do a garden clean up to avoid eviction. Having just one trusted person over a significant period of time made life far more manageable for families who experience a huge mental load of navigating complexities in their lives and the service system that is meant to help them.
- Families are in charge and taken seriously. Rather than starting from a place of listing concerns, the Sunshine Project is underpinned by an understanding that that people's passions and aspirations exist alongside a list of someone's 'issues to solve', and supporting people to focus on these aspirations is more beneficial than 'fixing the problems'. Taking time to see the whole person and support them to use their gifts and creative drives (including financially) is therapeutic and gives people a taste of their own version of the good life that acts as a North Star for families to access even after their engagement with the Sunshine Project has ended.
- Capacity building that leads to changes to people's intrinsic self-worth. Believing in people and their capabilities is empowering and builds self-esteem that is crucial to tackling the hard bits of life. Positive changes to people's intrinsic self-worth is a powerful impact multiplier, with potential for long term positive effects on their ability to manage future setbacks.

# Executive Summary

## What should be considered for the future of Sunshine Project?

In addition to things that have been successful, this evaluation makes the following comments on some considerations for the Project.

- Exits from all service support after two years is probably not a realistic outcome for all families. They are in a better place than they were, but many of the core challenges - housing unaffordability, cost of living, mental health challenges - remain and require more time to move forward with. In a scenario where people who needed social housing were able to access it, we would likely see a reduced need for services to address untenable private rental stress and the very real risk of homelessness.
- While the sustainability of impacts for families is difficult to predict, there are very promising early signs of progress towards long-term outcomes. Despite this, in the short-time frame, there were specific and tangible outcomes such as avoided homelessness and violence, and likely avoided engagement with child protection. These have benefits for families and children today, in the future - and avoid direct and indirect costs to the community, in terms of government spending and additional calls on the service system.
- Sunshine Project is helping to avoid perpetuation of disadvantage into future generations. 'Childhood lasts a lifetime', and research shows even short periods of childhood poverty can cause long-term harm. Families typically put a 'good life for children' on top of the list of things they desired, and there are specific and tangible ways this was seen, including things such as staying in schooling and starting counselling. All of the adults in the families reported adverse childhood experiences; this project could help to avoid these continuing to be played out in future generations.

6 children	9 children	9 children
in 2 households avoided job loss	in 5 families avoided eviction into likely homelessness	in 5 families avoided possible involvement with child protection

Some recommendations for the future include:

- Additional efforts to codify the Project's unique practices for the benefit of service providers and families alike, to distinguish them from others using terms - such as person-centred and trauma-informed - which lay claim to these practices.
- Tailor the timing of each family's exit from the program according to individual family needs to ensure
- Continue investment in learning from this Project as an example of how applying innovation and creativity to entrenched problems can achieve outcomes for families, children and the whole community.

"[I was told] you should apply for your children. I said my children don't need help. In like, 15 - 20 years they're going to need help because their mum couldn't get help."

(Family member)

"[Sunshine Project] sparks others in the community to step forward."

(Local government worker)

# Introduction

# Project overview

## ***What's the problem?***

Government supports an extensive social services system to support people who face challenges in living the lives they aspire to. In many cases, it provides useful help and services that support people to move forward.

There is a group of people who the current system does not serve well, who do not get what they need from it to achieve their goals. Despite the fact it is not always useful, these people can end up making repeated calls on services, either because they need things that are provided (housing, financial relief, health services), or in some instances because they are required to (employment, training or child protection).

Positive service experiences - where people feel listened to, respected and treated as an individual - can make a huge difference, increasing people's ability to overcome the problems they're facing and move forward with their lives.

However, where there is not a match between what people need and the services provided, the end results can be:

- A lower level of employment, housing security, health and wellbeing for those people than they desire and that could be achieved with the right help.
- Long-term continuation and deterioration of initial conditions that involve more costly and intensive supports.
- Transmission of disadvantage to future generations
- Staff frustration, burnout and low workforce productivity.

Government ultimately bears the financial cost of these system failures through demand for more, and more expensive, interventions, a part of which is avoidable.

## ***What is the Sunshine Project?***

Thinkers like Hilary Cottam ('Radical Help', 2018) talk about the need to rebuild a system:

- With human connection at its heart
- Where people feel supported by strong relationships
- When collaboration and connection are made to feel easy
- That helps knit vulnerable people back into communities.
- That understands that even being in employment is no longer enough to protect people from day-to-day realities like poverty, housing insecurity and violence.

Building on the work of 100 Families WA, Ruah and Anglicare WA decided in partnership to self-fund an approach built on these principles, to see what it could look like and what it could achieve for the families involved, and what lessons it might offer for the system more broadly.

## ***Evaluation purpose***

Anglicare WA and Ruah invited Innovation Unit to undertake an evaluation of the Project to date. The goals of the evaluation are to:

- Describe the program and how it is different to other services or approaches to addressing hardship;
- Document the impact on families, services and government; and
- Provide an assessment of the potential costs and impacts of this approach compared to alternatives.

The primary focus is on investigating the impacts for families and how these flow through to the 'system' (i.e., impacts for other service organisations and government agencies). The elements relating to community development and support are also described, but are not the focus of this evaluation.

# Evaluation approach

## **Key evaluation questions**

The evaluation sought to answer the following key evaluation questions:

1. What happened?
2. What changed?
3. Why did these changes occur?
4. What should be considered for the future of the Sunshine Project?

## **Data collection**

### **Desktop review**

Ruah and Anglicare have collected a significant amount of literature and data relating to the Sunshine Project, due to their participatory action research approach. We conducted a review of documentation including the below.

Program documentation including (but not limited to):

- Insights Report
- Horizon Scan and Literature Review
- Client surveys
- Family journeys recorded in Miro
- Governance documents
- Program finances
- Documentation of community development work/prototypes

Literature including (but not limited to):

- Various resources on the 'Radical Help' approach (Hilary Cottam, 2018)
- 'Liberated Method - rethinking public service' (Changing Futures Northumbria, 2023)
- Research discussing the costs and benefits of social services relevant to the program (see Appendix 3)

### **Interviews**

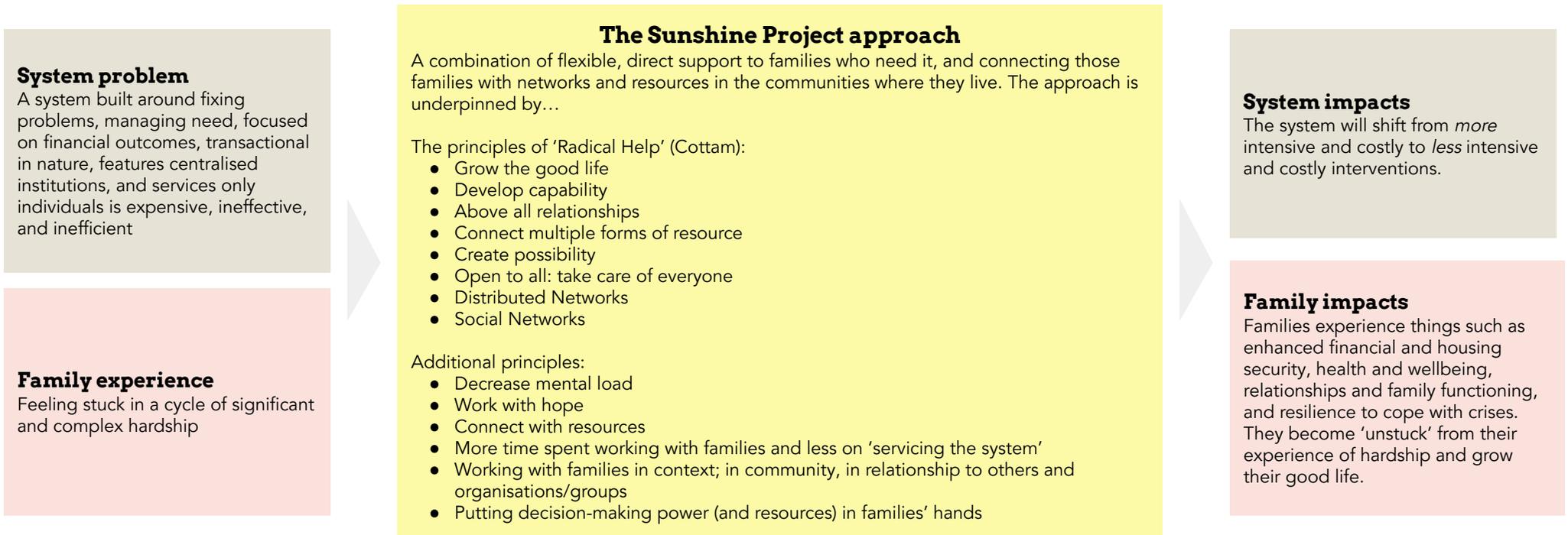
Interviews were conducted with several stakeholder groups, allowing us to answer specific questions relating to the groups as well as develop a broad understanding of the program's value and impact by hearing diverse perspectives. Details are provided below:

- **Families.** We conducted interviews with 5 of the 6 families being supported by the Sunshine Project. The Family Coach attended to provide a warm introduction and offer support to families at the end. Each family was provided with a payment to acknowledge their time.
- **Collaborators.** We conducted interviews with 6 representatives of collaborating organisations (e.g., local government, community services).
- **Government.** We conducted interviews with 2 representatives of government.
- **Team.** We conducted 2 interviews with key members of the team delivering the Sunshine Project, across Anglicare and Ruah (in addition to other time spent with team members and Steering Group through the course of the evaluation).

# **Key findings: What happened?**

# Key project characteristics

The Sunshine project approach is premised on the theory and principles outlined below.



## **Location**

Anglicare and Ruah made the decision to trial the Project in the Rockingham-Kwinana region, in southwest metropolitan Perth. The area has historically relatively higher rates of disadvantage on a number of markers, but a smaller overall service agency presence than some other regions.

## **Families**

Six families (comprising 27 individuals - including children and other household members) navigating significant hardship and complex challenges, who report feeling 'stuck' and not able to move forward. Recruitment was predominantly self-referral via information shared through mechanisms such as Facebook or referral from other local services (school chaplains, emergency relief, refuge).

## **Trial period**

Entry to the program ranges from January to December 2022, with support for all families expected to conclude in December 2023.

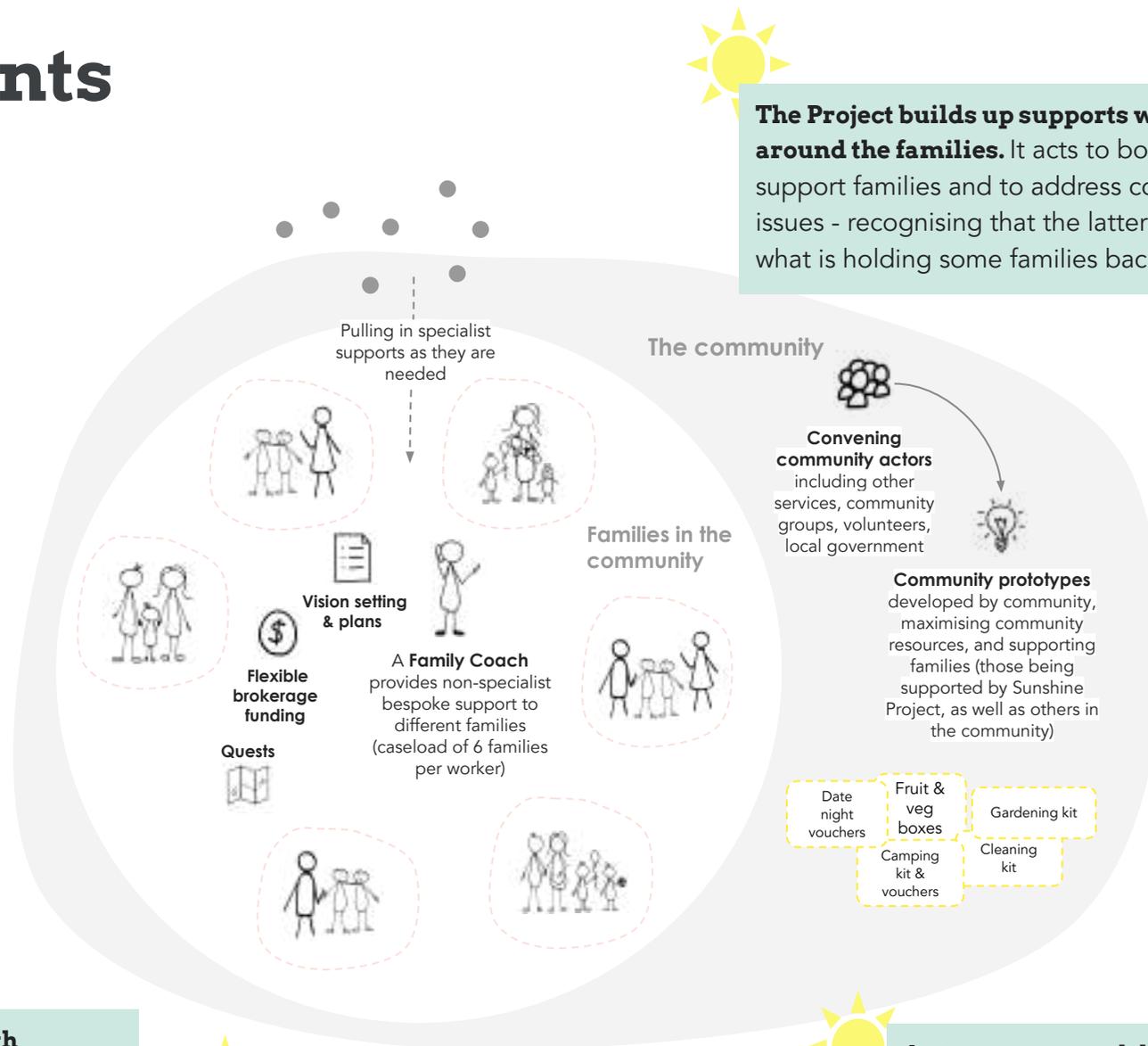
# Project elements

The model contains a number of elements that interact with each other to provide different types of support and assistance to families. This is shown in the figure (right), and include:

- Family Coach
- Vision setting and family plans
- Flexible brokerage funding
- Quests
- Community convening and community prototypes

Further details of each of these elements is provided on the following pages.

A summary of the key unique practices is also provided (see green boxes).



**The Project builds up supports within and around the families.** It acts to both to support families and to address community issues - recognising that the latter are part of what is holding some families back.

**Sunshine can “help with (almost) anything”.** It is flexible and agile, including prevention and intervention, proactive and reactive elements.

**Relationships are at the heart of the work.** A trusted relationship with one consistent worker who “actually gets things done”.

**Autonomy around decision making and flexible brokerage.** This enables the Project to overcome common immediate barriers and is “a lifesaver” for families.

# Project elements

## ***The Family Coach***

One of the central elements of the Sunshine project is the Family Coach role. The Family Coach works on a day-to-day basis with the identified families, supporting them to identify their goals, resources and gaps, helping to access existing resources (where these exist and are appropriate) as well as offering additional supports available through the Project, such as brokerage funding (see p.18). There are many elements that make it a relatively unique role that offers something rarely found in the service system. Specifically:

- Low caseload. The Sunshine Family Coach has a caseload of six families, drawing on best practice guidance that complex clients require a caseload of approximately 1:5. We heard that analogous roles have caseloads of around 10-20 families. However, we also note that the Family Coach supported 27 individuals across the six families.
- No specified eligibility criteria. Families could self-refer or be referred from other services to be supported by the Family Coach.
- Activities happen where and when families need it. This can be in families' homes, over coffee, while driving to appointments, running errands together, attending events, or over phone and text.
- The nature of the relationship. The Family Coach has flexibility and autonomy to work collaboratively with the families. (see p.22). Importantly, while the relationship was professional, it wasn't about 'fixing problems', but becoming part of families' support systems. Activities include vision setting and planning (see p.17), connecting families to supports (see below), advocating for the family, helping them deal with legal or income support matters, supporting pathways into study and employment, and finding and acting on advice relating to their financial situation. They also help out with everyday tasks such as preparing meals or helping around the house, if that is what is needed at that moment.
- Pulling in specialist supports as needed. The Family Coach connects families to specialist supports as needed, however this often means more than just a simple referral. It often includes finding out what families *really* need by building the relationship over time, working with them to research the most appropriate supports and how to access them, helping to reduce or remove barriers to access (such as helping to complete large amounts of paperwork, paying off debts, or transferring medical records), accompanying families to appointments as needed, collaborating with other services where appropriate, and supporting any follow up or debriefing required after accessing the support.
- Reducing the re-telling of families' stories. Among other things, the way in which families can work over a long time with one consistent, trusted worker means that they can tell that worker their story in little bits and build it up over time. There is no re-telling of their story, and no need to give their whole history in one sitting. Further, the Family Coach can support families in liaising with other services to ensure, as much as possible, that family members can avoid re-telling their story to many different providers.
- Co-produced human resources processes. The families were involved in designing role requirements, selection criteria and shortlisting in recruitment of worker, and performance reviews for the Family Coach.

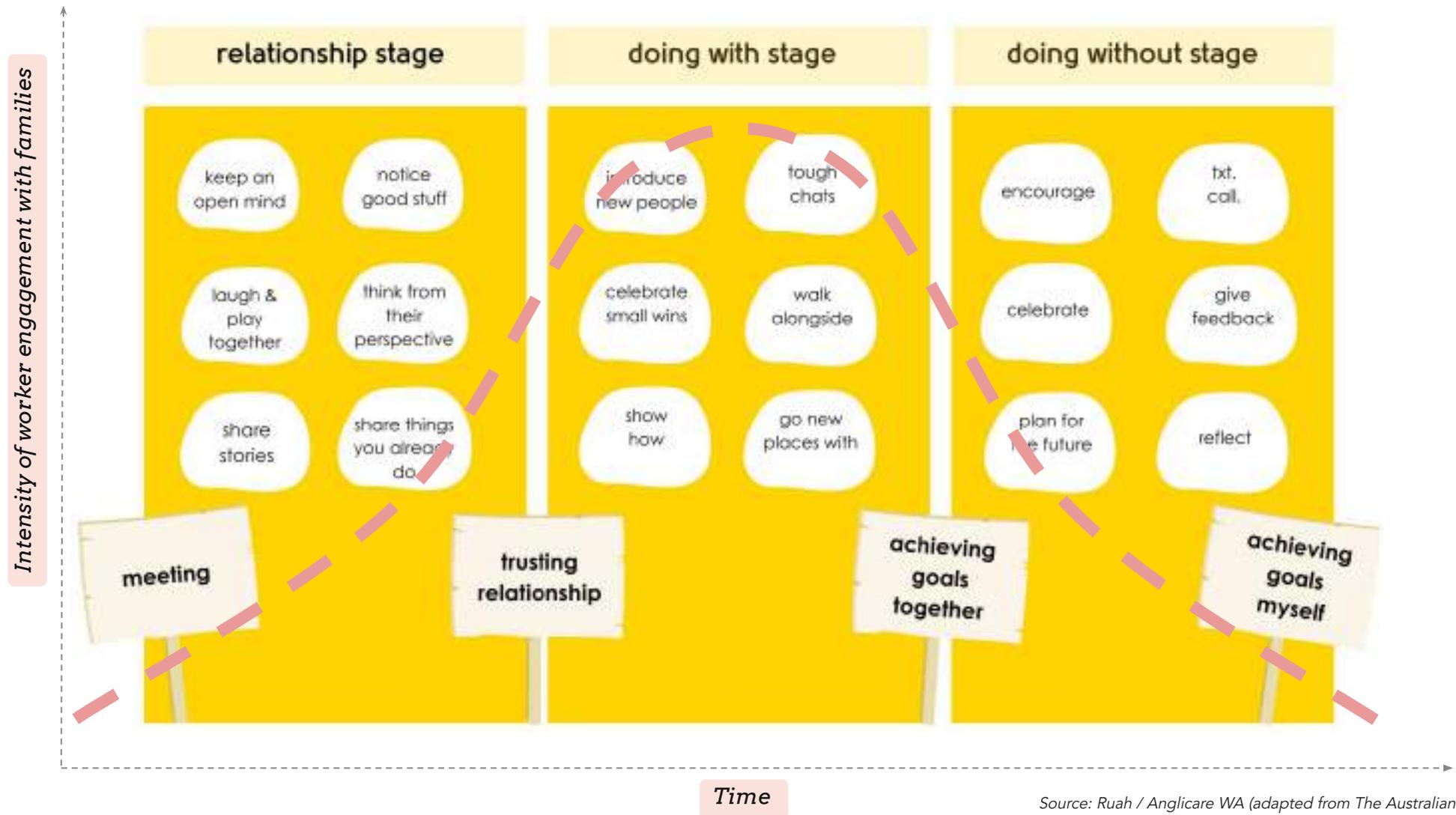
"My Family Coach helps me with meeting basic needs, healing, connection, purpose - my idea of a good life."  
(Family member)

"[Family Coach] liaised with the housing officers as they changed and people needed to know the story and the story had to be retold."  
(Family member)

# Project elements

## *The Family Coach (cont.)*

The diagram below demonstrates the three stages of change in the way the Family Coach works with families over time.



Source: Ruah / Anglicare WA (adapted from The Australian Centre for Social Innovation's Family by Family Project)

# Project elements

## ***Vision setting and family plans***

The family outcomes for the Project were defined by the families themselves. They were simply guided by the question 'what does the good life look like to you?' and the early stage of the process involved mapping their journey and creating a vision board. In some cases, children in the families created their own vision boards. Many families valued these boards highly and displayed them in their houses. This focus on vision setting at the beginning allowed for considering the 'why' before rushing into the 'what' and 'how' of goal setting.

Families then identified their superpowers (the things they are great at), motivations, pain points, any 'silver linings' (things that are working out, despite challenges involved) as well as what they would like to achieve in their lives. This goal setting process helped form a family plan (below, left), which was owned and held by the families and could be shared with other agencies.

The digital platform Trello was introduced mid-2023 to translate the paper version of the plan online (below, right), so families could easily and transparently see and update their progress and any outstanding tasks or goals online. One participant spoke very highly of the Trello platform and intends to continue to use it.



Source: Ruah / Anglicare WA

"I loved the vision board and want to do one each year now."  
(Family member)

"It's not just what you need now, but what you need in the future ... to thrive, not just survive."  
(Family member)

## **What the 'Good Life' looks like to families**

The things families identified as part of their good lives, or the things they wanted to work towards, could be compressed into the following four themes.

### Meeting basic needs, e.g.:

- Having a home that is affordable and comfortable, not pest infested, not falling apart, and not feeling ashamed to invite people over
- Getting a drivers licence - more freedom, a way to get around to shopping and get kids to school and sport

### Healing, e.g.:

- Connecting with the outdoors and having a sense of adventure
- Learning to believe I am worthy of love and respect

### Purpose/contribution, e.g.:

- Studying AUSLAN
- Working with dogs
- To not be trapped anymore - "Not this"
- Develop an identity beyond just being a parent

### Connection, e.g.:

- Big family dinners
- Not feeling scared
- Being able to invite other kids around for birthdays

Many of the elements included or related to gaining paid work or achieving more stable housing. However, the Project does not require or frame itself around those goals; rather, they can be outcomes.

Adapted from: *Sunshine Project Insights Report*, October 2022. Ruah, 100 Families WA, Anglicare WA.

# Project elements

## ***Flexible brokerage and emergency relief funds***

The Family Coach had access to flexible brokerage funding of around \$1,750 per family per year, as well as emergency relief funding of around \$1,166 per family per year. Overall, this amounts to more than other analogous services within the Project's lead organisations. Emergency relief funding was directed towards immediate needs (such as food) to stabilise the families. Brokerage funding was used in many different ways to support families' growth towards their vision. It was aligned to the family plan (see previous page), and families had control and say over what it was used for and how much. Some examples of things purchased using brokerage funds include:

- A new pair of prescription glasses. As a result, one family member was able to sit for their drivers license.
- A laptop and Microsoft subscription. As a result, one family member was able to study and commence a permanent part-time job.
- A birthday cake for a child's birthday party and school excursions for children they would not have been able to afford otherwise.
- Dining suite so the whole family can fit at the table and eat together.

## ***Quests***

Quests were designed as a creative response to the families' goals and aspirations identified through the early months of the Project. They were an optional part of a bespoke Sunshine toolkit available to the Family Coach, where families were rewarded with small cash incentives for achieving specific efforts aligned to their goals. The idea was to promote 'gamification' of some elements of the program and create stretch-goals that families could realistically work towards in short timeframes. In total, around \$700 a year (across all families) was spent on quests.

- As an example, one participant (a single mum of two) challenged herself to learn how to use a whipper snipper to clean up her garden for rent inspection (her ex-partner had always done it), overcame her fear of mess to create a food garden with her kids, and several other activities around family connection and accessing therapeutic services.
- Some members of the families embraced the quests, while others found them less useful. The reasons for this included interest in specific tasks and existing strengths (e.g., one participant spoke of already being very capable of creating and adhering to 'to-do lists').

"Sunshine Project is 'no strings attached' offer of something of value to people - gives more options. Whereas [only] emergency relief has strings attached - you need to be cast as 'struggling'."  
(Service worker)

"The flexible funding from Sunshine Project has been a lifesaver."  
(Family member)

"There's a focus on dignity and respect ... not be laughed at when [families] say what they really want."  
(Service worker)

# Project elements

## Community convening & prototypes

Outside the core elements of the Sunshine Project focused on the Family Coach and support of the six families was a dedicated effort to build connections and resources in the broader community. This work was primarily undertaken by the Project Leads, while the role of the Family Coach was in connecting the six families in with these community activities.

- Community Vision workshops: The Sunshine Project team identified and invited key community actors (including local community service workers, local government representatives, community interest groups, and community leaders) to participate in the Sunshine Project, primarily through workshops. The workshops provided the opportunity for these community members to consider the kinds of things needed in a community that enable the 'good life' and support local families who are facing hardship. Families directly supported by the Family Coach were also invited to the workshops in their capacity as community members rather than as "clients, which was an important shift in identity for the participants..
- Community prototypes: A number of ideas for initiatives that enable the 'good life' and support families in the community surfaced through the workshops (above). As a group, some of the ideas were chosen to progress during the duration of the Sunshine Project with the team's support, and these are referred to as the 'community prototypes'. The prototypes were designed to benefit the community at large, not just the six families working with the Family Coach, so community service workers were able to connect other families in the area to these opportunities. These included:
  - Fresh food boxes (large, high quality, affordable boxes straight from a local farm).
  - Batch cooking classes (in community kitchens).
  - Fresh food guides.
  - Food garden project and wicking bed workshop.
  - Loan kits (mowing/gardening kits, cleaning kit, birthday cake kit).
  - 'Social prescribing' including camping trip kit and voucher, and date night vouchers.

This work in the community was viewed favourably by the collaborators involved, and by the families who decided to participate. Some things worked better than others - the fresh food boxes were highly regarded by many, whereas the date night vouchers had low uptake - which is the nature of them being experimental prototypes. Where there are people or organisations in the community with the capacity to take them on, these initiatives will continue, leaving a legacy after the Sunshine Project period ends.

"[Sunshine Project] sparked others in the community to step forward - for example Savvy Seniors were inspired to raise money for boxes for families in need, which in turn brings joy and fulfilment to the seniors."  
(Service worker)

"We could access camping vouchers with ease - without Sunshine Project, it would have taken so long for approvals (or not been possible at all)."  
(Service worker)

"The fresh food boxes are an easy sell as you don't have to apologise when promoting. They're actually fresh."  
(Service worker)

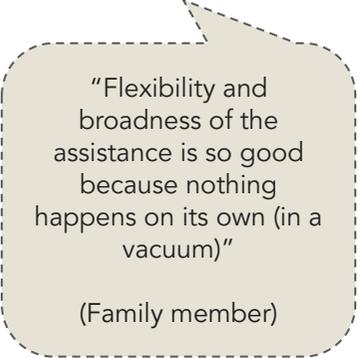
"The camping kit and voucher was so beneficial ... it helped our family members connect more."  
(Family member)

# Project elements

## ***Cross-cutting practices***

Many of the aspects of the Sunshine Project detailed in the previous pages may not stand out as deeply innovative items if considered separately. However, together as a package with the cross-cutting approaches listed below, the Sunshine Project has been able to work differently to many analogous services and truly deliver truly trauma-informed, family-led and holistic support.

- Relationships are at the heart of the work. A trusted relationship with one consistent worker who “actually gets things done” came through as the aspect of the Sunshine Project most valued by families. What sets this apart from many other services is the duration and intensity of time one worker spends with each family and the intentional time spent building the relationship in the first stage (see p. 16). The strength of the relationship enables the Family Coach to understand the family and their needs at a deep level, and builds trust between Family Coach and family members to the point that they can tough conversations. The main factors that enable this to happen are the low caseload of the Family Coach and the tailored approach to outreach (see p. 15), the scope of the Family Coach to “help with almost anything” (see below), and the autonomy around decision-making and use of brokerage funding (see below).
- Autonomy around decision making. The decision-making framework around what is in scope in Sunshine Project (including spending of brokerage funding) is based on the P.L.A.N. (Proportionate, Legal, Auditable and Necessary) Framework (Liberated Method, Northumbria). This enables the Project to overcome common immediate barriers and respond to the most important needs and aspirations of families in a timely manner.
- Sunshine can “help with (almost) anything”. The approach is flexible and agile, including prevention and intervention, proactive and reactive elements. The Family Coach, while supported by other team members, has a high level of autonomy around decision-making that means they can respond in the moment to the changing needs of families.
- The lack of specificity of expected outcomes: Vision and goal setting is focused on moving towards the ‘the good life’ as defined by each family, rather than a specific outcome such as training or work (see p.17).
- Principles of community embeddedness, whole-family approach, and capacity building. While many programs offer part of these practices, the nature of the Family Coach such as the low caseload, breadth of supports, autonomy in decision-making and flexibility provide the conditions for these principles to be fully realised. The Project builds up supports within and around the families, as well as develop the community around them - recognising that the latter is part of what is holding some families back. The creativity to tailor responses such as providing developmental experiences and purchasing items to scaffold the person's growth contribute to building capacity at a level that many other programs cannot achieve.



“Flexibility and broadness of the assistance is so good because nothing happens on its own (in a vacuum)”

(Family member)



# Project implementation & governance

## ***Key support structures and enabling conditions***

Below are the key support structures and enabling conditions that meant the unique practices outlined on the previous pages were able to be realised.

- Collaboration and commitment at multiple levels, including organisational leadership. The Project was initiated out of a collaboration between Ruah and Anglicare WA and this collaboration has extended throughout the whole project duration and through multiple levels of the Project. The boards and senior leadership of both lead organisations have had a high level of involvement and demonstrated commitment through the investment in the project. The team comprises staff from both lead organisations with benefits derived from bring together different complementary skills. Among other shared responsibilities, the Ruah team added evaluation and risk management expertise and practice supervision, while Anglicare WA added capabilities in innovation and community development. Collaboration was also a key feature of the community work (see p.19) where many diverse community stakeholders worked together to develop and test new initiatives. These collaborators were supported by the Sunshine Project team by way of facilitation and in-kind resources or donations, while also bringing their own expertise and resources to the work. At the level of supporting families, the Family Coach worked in collaboration as much as possible with other services also supporting the same families, ensuring the best outcomes possible for those families.
- Framed as a 'project', not a 'service'. The Sunshine Project is an emergent, developmental, collaborative innovation project that was designed from the beginning with the key objective of learning. Families are considered participants in the Project, rather than beneficiaries or clients of a service. In many cases the families have been involved in the community activities and prototypes simply as community members (not service users). They have also been active participants in co-design and learning (action research) throughout the Project. This framing has also meant that the Project team, their organisations, community partners and families alike have all benefited from having the space and resourcing for learning, and from the ongoing developments and improvements that have resulted from this learning.
- Self-funded with no ties to government contracts. The investments made by Ruah and Anglicare WA to ensure this project has been entirely self-funded has enabled significant flexibility in the Project's design, intended outcomes, and practice approaches. This is further supported by the freedom of not being tied to any government service contract, which would significantly limit flexibility around the amount and nature of funding, scope of support provided, eligibility criteria for people accessing the support, and state outcomes and reporting measures.
- Incubated from other services within Ruah and Anglicare WA. As a project focused on innovation and learning, it is managed by the business development and innovation teams in the respective project lead organisations (drawing expertise from others as needed), not embedded in existing service delivery teams. This allows the team the space to prioritise Sunshine Project and to break away from 'business as usual' mindsets and practices to try out something truly different. It also helps provide a clear message to families and partner organisations that Sunshine Project is different to existing service offerings.



"It's been refreshing to work with [the Family Coach] - so collaborative."

(Service worker)

# **Key findings: What changed for families?**

# Impacts for families: Overview

In total, Sunshine Project worked with six families (a total of 27 individuals), which included 18 children. Interviews with the families and the project workers in October 2023 identified the following outcomes for families (noting the Project continues until December 2023).

	Change in housing	Change in finances	Change in economic and social participation	Change in violence	Change for children's wellbeing	Change in health	Change in social services use
<b>Key outcomes observed to date</b> (per family unless otherwise noted)	3 x avoided eviction from private rental 1 x avoided eviction from social housing 1 x negotiated reduced rental increase	3 x cleared and/or started managing debts 1 x sorted out Bond debt	1 x commenced and maintained work 1 x avoided job loss	1 x has not returned to a violent relationship (after multiple previous attempts to leave)	8 x children avoided possible eviction 2 x children avoided exposure to violence 3 x children in families having counselling 15 x children maintained/re-engaged school	3 x newly accessing primary health care 1 x returned to/started with psychologist 3 x started counselling	2 x applied for additional NDIS 2 x applied for Disability Support Pension 1 x approaching Reconnect (Youth Homelessness)
<b>Examples of specific scenarios for individual families</b> (illustrative, not exhaustive)	Moved from refuge into social housing  Able to remain in public housing property when difficult circumstances arose thanks to advocacy of Family Coach	Started dealing with debts accrued by ex-partner in her name (still a long way to go)  Started seeing a financial counsellor as part of Quests	Set up online small business, completed business courses  Finished studying, commenced casual work which was made permanent part time  Progress towards Drivers License	Made plan for ex-partner's release from prison  Supported to testify in court to secure conviction	Children enrolled in multiple sports  First ever birthday party, first trip to movies  Able to attend school camp & get school uniforms	Several families were assisted in accessing their own health records in order to apply for better health services and support  Several people got prescription glasses and had long-standing dental issues addressed	Supported by Families Coach in applying for copies of medical records and birth certificates necessary for NDIS/DSP applications

Source: Anglicare WA/Ruah and family self-reports.

As highlighted above, there were specific identified instances across the six families of avoiding eviction, violence, dealing with debts and gaining employment. In addition, there was uptake of engagement with early intervention/prevention services such as counselling, GPs and primary health care. While some of these outcomes might have been achieved regardless of Sunshine or with the intervention of other services, each of the families was able to point to specific things the Project did that they said had been critical to achieving this outcome. These are explored over the following pages.

# Impacts for families: Housing

## *What's going on for families?*

Of the six families, four families are in private rental, one family in a public housing property (after transitioning out of a refuge), and one lives with an older family member in overcrowded housing.

All the families who participated in the Sunshine Project reported housing instability and challenges. Affording housing is a challenge; as the quote below suggests, the Rockingham-Kwinana area has gone from an affordable place for families to live to somewhere where affordable rentals are as scarce as in the rest of Perth. As the rent-income ratios (p. 28) show, only two families had affordable housing at the beginning of the Project. Over the period of the Project, the four families in private rental properties experienced rental increases of between 11% and 40%, leaving only one family with affordable housing.

“

The number of houses advertised for \$450 or less are in the single digits in many Perth Suburbs. This includes Rockingham, which has only eight houses advertised for rent in this price range. Rockingham, which is the [then] Premier's electorate, was once deemed one of the most affordable places for families to live in Perth ... The odds for these distressed families of renting a house are now lower than winning the Melbourne Cup.

['Rental crisis biting deep.'](#) Opposition media, 24 January, 2022

”

Families also spoke to the difficulties of maintaining a tenancy, such as managing rent inspections, requirements around maintaining gardens, as well as upkeep of furniture like a fridge and washer and beds for children. In the current environment where there are few rentals available and landlords are well-known to move people out in order to increase rents or get 'easier' tenants, failure to manage these difficulties can easily result in eviction.

Additionally families spoke of how housing instability intersects with life crises. For example, a death in the family (which decreases household income and doubles housing costs) or family violence can lead to an immediate risk of homelessness for families who don't have secure tenure or reserves.

*When referring to how receiving a notice of a rent inspection used to affect her mental health, one participant said:*

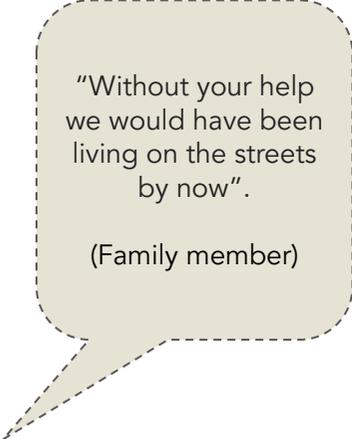
“I would just shut down, or I'd fixate on cleaning out the contents of of like, one container in a back cupboard rather than cleaning the floors, which is why [the Family Coach] helped make me a list that I can use in the future too”.

(Family member)

# Impacts for families: Housing

## ***What did this project do?***

- Built families' incomes through helping them gain and prepare for employment (see p. 31)
- Built the capacity of families to maintain a tenancy. The Family Coach taught families that they have a right to negotiate a rental increase, and assisted them in that process, for example explaining how to email a property manager and what things to raise. Through this, some families were successfully able to negotiate a smaller increase than had been proposed.
- Provided practical support in terms of developing things like 'property inspection cleaning check-lists' to assist families to prioritise the most important cleaning for rent inspections to help avoid feelings of being overwhelmed. Sunshine Project also purchased cleaning and gardening kits which the families could borrow for rent inspections.
- Directly advocated to government departments (notably, the Department of Communities and Centrelink) in regards to rental arrears, rent withheld from Centrelink and automatic deduction issues, including some debts that had been raised in error. These were not only re-traumatising family members but threatening their tenancies.
- Assisted families to put together significant supporting documentation to enable the strongest applications for priority listing for State housing.
- The Family Coach could also pitch in to help clean homes and weed gardens, if that was what was needed to maintain a tenancy, so that families weren't left with the burden alone.



"Without your help we would have been living on the streets by now".

(Family member)

## ***What changed in terms of the family's housing situation?***

Three of the families said that the support provided by the Sunshine Project had directly helped them avoid eviction. Importantly, in all instances this was not because of increased income, but better knowledge confidence with managing housing issues, together with tools (such as templates) - skills that they will take with them in the future.

Families also reported the value of the human contact element, in terms of having someone 'by their side' as they navigated bureaucratic processes. Through this, families avoided serious retraumatisation that could have plunged them back into crisis.

While there were significant wins that prevented families from slipping into a critical position (such as homelessness), the nature of the housing market means that parties are in an ongoing tenuous position. While better prepared, it is not possible to say at this point that families' housing crises have been avoided. In all likelihood, they will continue to face challenges into the foreseeable future. However, by their own estimation, they are better equipped to manage this.

# Housing affordability snapshot

Housing affordability is a function of the relationship between income and rent. The changes in both over the period between the first recorded data (between July to December 2022, depending on when families engaged with the Project) and October 2023 is shown in the graph (following page) for each family involved in the Project.

The graph shows how housing costs (relative to post-tax income) changed for families over the Project. Nominal rents (per week) at the Project start and end are also shown.

We have adopted the definition of 'housing stress' according to the Australian Bureau of Statistics that states "housing stress is typically described as lower-income households that spend more than 30% of gross income on housing costs" (ABS 2022). As can be seen in the graph, almost all families are in housing stress, with two families in extreme housing stress. Only one family is in affordable housing at this point in time. They are in an overcrowded lodging situation with extended family.

The table below provides another overview of the changes in income and rent experienced by families over the course of the Project.

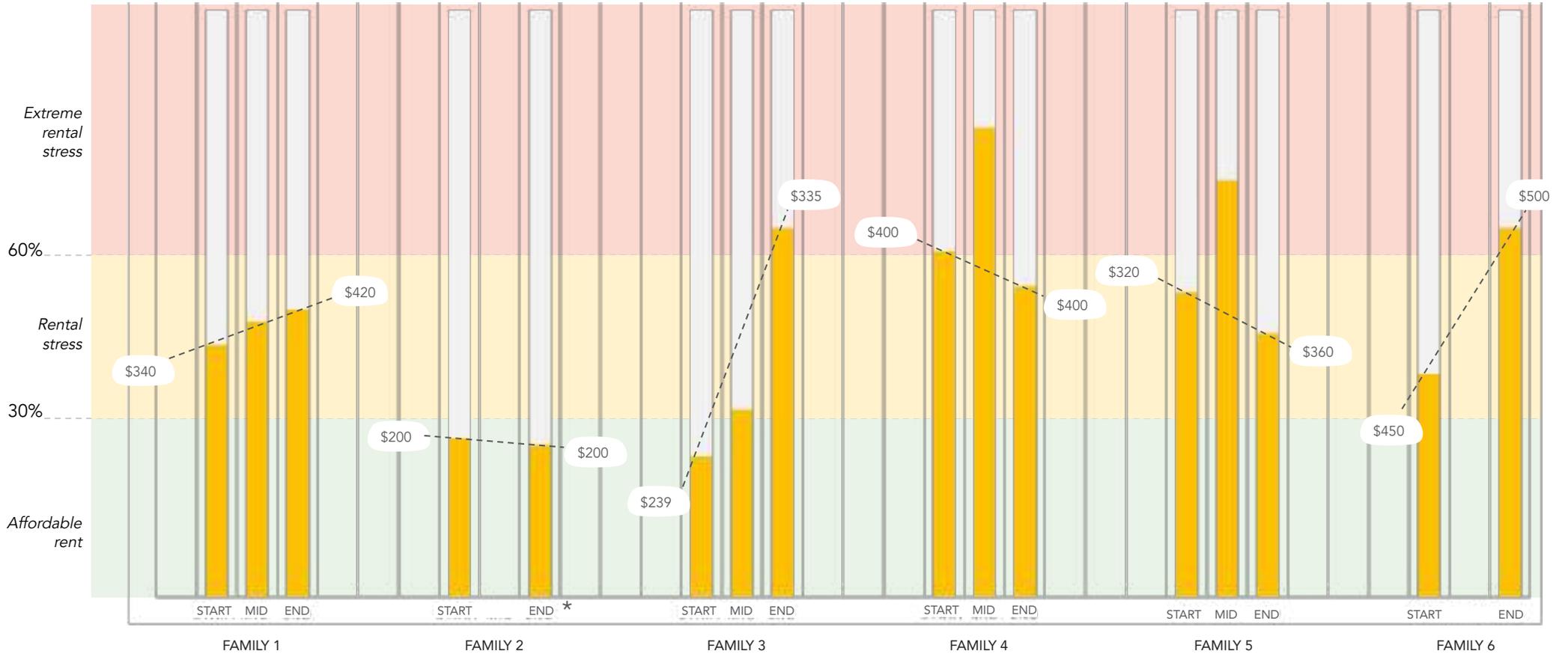
Interestingly, the two families who experienced the greatest decrease in income were the two families with a member in employment. While they maintained their employment throughout the Project, the decreases in income related to changes in child support payments and the need to take purchased leave from work to care for dependent children.

Family	Change in income	Change in rent
1	8%	24%
2	4%	0%
3	-47%	40%
4	25%	13%
5	31%	13%
6	-33%	11%

*Note: Above income figures above include total income from all sources including child support, income support and family payments, post-tax. Based on information provided to Innovation Unit by Anglicare WA / Ruah.*

# Housing affordability snapshot

Rent-income ratio per family across the support period



- % of total income spent on rent
- % of income remaining after rent
- \$ Cost of rent per week

\*Low rent due to boarding with family member.  
Note: two families did not record a mid-point.

Source: data provided to Innovation Unit by Anglicare WA / Ruah.

# Impacts for families: Finances

## ***What's going on for families?***

In the face of very low post-rent income and high and rising costs of living, most of the families are barely surviving. Their post-rent incomes (and number of children in the house) as reported are in the table (right).

The families spoke about frequently having to decide between one critical need and another, for example choosing to stay in a violent relationship because otherwise they would not have enough for rent and food, or choosing between food or addressing chronic health needs.

They reported using support from various services to manage (e.g., emergency relief funds). When faced with food insecurity, they reported navigating food boxes and hampers, vouchers and utilising Out-of-Home School Care to ensure children are fed during the holidays. However, families reported that many food box services provide small quantities, food that isn't fresh, and food that isn't desired (especially by children and teenagers). They also talked about the stigma and shame in using these services. They reported recognising some costs are in their long-term interests, such as car maintenance and insurance, but they don't have money other than for what is utterly essential today.

Some of the families discussed the devastating impact of debt - both in practical and emotional terms. Arrears and repayments were said to be "suffocating", and preventing families from getting ahead, no matter how hard they worked. Yet attempting to face their financial issues and trying to navigate services, such as attempting to deal with debts from Centrelink, to report income, and fix rent deduction efforts, involved bureaucratic processes that were often time consuming, frustrating and demoralising. The end result was they put off or avoided trying to deal with debts, and sometimes didn't take positive steps such as trying to have debts waived or seeking financial counselling.

Overall, families and service providers alike reported many of the responses available for immediate financial needs were crisis-driven 'bandaids', which set up a cycle of receiving, using and going back for more - because nothing fundamentally changes, and there is no capacity building or systemic help available.

Family	Current post-rent income (pw)	# children usually in family
1	\$430	2
2	\$577	2
3	\$197	3
4	\$395	2
5	\$440	2
6	\$300	3

"My kids' mental health has absolutely consumed me that sorting out the debts has not been a priority. Living, and putting money into their sport - enough endorphins to help them - has been my priority."

(Family member)

# Impacts for families: Finances

## ***What did this project do?***

- The flexible brokerage fund paid for things that families identified that they most needed, which in many cases might otherwise not have been funded as it did not fit program criteria. This included replacing furniture that triggers a post-traumatic response, heating and cooling for the house, birthday presents, emergency medical costs, and paying for laptops and courses to support participation in work and study. The brokerage was called a “lifesaver” and a “godsend” by families, and was said to pay for things that actually “extend your life”, and allowed them to “thrive, not just survive”.
- Helped pay for unexpected expenses that saved money down the road and/or provided security. In one instance, it provided a year’s worth of car insurance and registration following a small car accident.
- Community prototypes around fresh food boxes provided food security in new ways. Families experienced the fresh food boxes (see p.19) very differently to food banks. They said that the fresh food boxes were large, actually fresh and contained nice food, while the supermarket vouchers allowed for choice. Being put in charge of their choices felt empowering, as well as meaning that families got things that met their needs - not just what was available.
- ‘Quests’ offered family members an opportunity to receive financial incentives for achieving ‘stretch goals’. Quests generated small windfalls that enabled them to cover the cost of modest extras, that were often a point of pride.
- Helped people access their income support and other entitlements, for example through helping families get access to medical records to apply for NDIS and Disability Support Pension, and to get onto the correct payment (such as Parenting Payment rather than Newstart Allowance.)

“[Sunshine Project paying for] the freezer is going to be a godsend because then when stuff’s on special I can get it”

(Family member)

“At [other food relief service] you’re not seen as a person, like you’re ‘scum’, and the small amount is less than bare minimum.”

(Family member)

“Vouchers are good because kids can be picky so we can choose what they want ... the boys will only eat chicken.”

(Family member)

## ***What changed for families?***

The brokerage funding, in addition to emergency relief funding, allowed families to meet immediate needs. However, in being flexible and in families’ control, it did it in a way that restored and promoted dignity rather than ‘adding another bandaid on top of one that was already falling off.’ It also provided a flexible source of funding that could be used to enable families to achieve their goals around social, economic and community participation. Sometimes, a small amount of funding was all that stood between someone and getting a license, a car or a job.

Where possible, the Family Coach did everything in their power to help families overcome barriers to accessing payments they were already entitled. This helped reduce the mental load in the moment while increasing opportunities for accessing ongoing income in the long-term.

Overall, families are often still struggling day-to-day. But Sunshine offered them moments of respite that enabled them to breathe. They used these breaths to move towards their self-determined versions of ‘the good life’ in small and meaningful ways.

# Impacts for families: Economic & social participation

## ***What's going on for families?***

Prior to engaging with Sunshine Project, a vast majority of the families were not in regular employment. Some families identified contributing factors such as chronic health problems (both physical and mental). There were also instances of people having previously been financially reliant upon an abusive partner who was perpetrating financial abuse and control over them. Some, while unemployed, did have particular interests and hobbies, but had not considered if or how to generate income from those interests. One family was in employment, but the demands of her caring responsibilities (which included grandchildren who came into and out of her care) had resulted in stretched relationships with her employer, and her job was under threat. None of the Project families reported being engaged with job services, or anyone exploring their interest in or capacity for work with them.

## ***What did this project do?***

- Provided staged vision and goal setting opportunities. In many instances families wanted to study and work, but had not thought about how to transform this into concrete actions.
- Where a financial barrier to work was identified, the flexible brokerage was available to overcome it. For example, the Project paid for laptops for some participants, as well as various courses of study. In one case, Sunshine funded a year of car insurance and registration to ensure reliable transport.
- There was support to complete study-related administrative tasks (e.g. printing forms, applying for scholarships, helping to create a study plan).
- Families identified interests or hobbies that had the potential to generate income. Sunshine supported these, through for example helping families to set up websites and providing raw materials to get started.
- Connected family members to paid opportunities in supporting co-design projects - both Sunshine, as well as other projects that aligned with individual participant's interests and goals.

"I've been really involved with as much as I can, throughout the programme. I've taken as much help as I can. And so I feel like I've actually helped other people in a way."  
(Family member)

## ***What changed?***

The families undertaking the Sunshine Project want to move towards greater autonomy and a better life - including through study and work, other things such as attaining their driver's licence, and greater participation in their community. As at the time of writing, out of the six families, one person started working (and maintained this) and another avoided losing their job. These were not quick wins. In one case, the family gained financial independence after previous long-term reliance on an violent partner who had used finances as a means of coercive control. In another, the Project provided a laptop so the parent could complete a course of study; they went on to gain a casual role that was later made permanent part time (0.8FTE), after negotiating employment conditions that enabled them to continue to support their children's specific needs.

Sunshine did not set out to specifically help people work. Yet by providing a flexible bundle of supports (including a trusted relationship), it cleared away hurdles and let families realise their own goals of doing so.

# Impacts for families: Violence

## ***What's going on for families?***

Many families reported an experience of violence or abuse, either recent or past, including previous experiences of physical, sexual, emotional and financial abuse. Some parents reported fragile mental health as a result, particularly those who were trying to cope with trauma resulting from experiences of family and domestic violence.

Bureaucracy and systems were experienced by these families as re-traumatising - especially the justice system, where navigating courts as a victim-witness, or as an applicant seeking Criminal Injuries Compensation was fraught with triggers from these past experiences. While there are formal supports that are meant to help, they sometimes don't or there are barriers to accessing them, and there are few to no natural supports who can provide the stable, therapeutic, trauma-informed support that's required.

## ***What did this project do?***

- Provided support throughout traumatic proceedings - a safe person who can assist in navigating the emotional and complex nature of the court system. What might seem like small things (e.g., receiving an email from your lawyer) could be highly triggering and re-traumatising. One parent explained that before Sunshine Project, when bad things happened she would end up "going down a hole".
- Helped obtain and pay for necessary documents for court.
- Liaised with lawyers and police and advocated where appropriate/permitted, and debriefed after court and helped with taking notes. Many parents experienced anxiety and post-traumatic stress disorder (PTSD) that made this impossible to manage on their own.
- Held the 'full story' for people, preventing trauma through re-telling stories to multiple new service providers. As a neutral party, the Family Coach is well suited to this in a way that a family member who is too close to the situation may not be.

## ***What changed?***

In one instance, a parent was living in a household without family and domestic violence (FDV) for first time in over a decade; she specifically credited the support of the Sunshine Project for this outcome. Multiple families also reported being freer of violence and its effects.

Families navigating the justice system reported feeling more confident dealing with lawyers and courts, and having a greater understanding of their rights.

FDV is a leading cause of homelessness and engagement with child protection and is often continued in future generations. Avoiding violence is likely to have significant spillover benefits for families, children and the community, now and into the future.

"I honestly tried to run a few times and every time it got longer and longer. This time I have been able to get away for the longest amount of time."

(Family member)

"Without Sunshine Project I'd be left to deal with a custody battle on my own"

(Family member)

# Impacts for families: Children's wellbeing

## *What's going on for families ?*

Carers and parents engaged with The Sunshine Project spoke of a strong sense of wanting to do well by the children in their care. Many were trying to maintain a 'normal' childhood for their children and provide leisure and social opportunities - including sports, activities, schooling and school clothes, attendance at school camp and birthday parties as well as wanting them to be able to receive birthday and christmas presents. But they felt 'stuck' in survival mode, and their children experienced shame and anger when their family can't afford basic things that other kids have (e.g., school uniforms/supplies), or even 'special' things other families have like "proper shoes" or "real shoes".

In multiple families, there were reports of school avoidance. Mornings were chaotic, but also featured children not wanting to attend school at all, which families put down to poor mental health and trauma-related acting out. Some children were off school regularly, affecting both school performance and families' ability to work and do other things.

In some families, there had been some child protection involvement, usually where there had been a housing or mental health crisis.

“ According to research, low household income during childhood is a key predictor of disadvantage in later life. Children from poor households are more likely to suffer early adult poverty (3.3 times more likely), to live in social housing (up to 2.5 times) and to experience financial stress (2.5 times more likely) than children from non-poor household.

Experiencing just a single year of income poverty during childhood is associated with lower earnings in early adulthood, compared with never having experienced poverty as a child.

Vera-Toscano and Wilkins, Does poverty in childhood beget poverty in adulthood in Australia? 2020

”

“The more [Family Coach] was around me, and my kids the more she understood and made it easier to understand our family dynamic and what we deal with while everything else happened.”

A parent's comment relating to being judged by friends and family for letting her child playing computer games at night despite the therapist saying this was a healthy coping strategy while the child was in mental health counselling. The parent could bounce this off of the Family Coach, which was validating of their parenting and choices.

“(I was told) You should apply for your children. I said my children don't need help. In like, 15 - 20 years they're going to need help because their mum couldn't get help.”

(Family member)

# Impacts for families: Children's wellbeing

## What did this project do?

- Paid for basic needs and activities so that children could feel included, such as school uniforms and camps, some school holiday activities, and camping experiences. The Family Coach also helped parents think about and plan activities, such as through providing activity brochures.
- Acted as a support for single parents with few other trusted adults in their lives. The Family Coach was someone the parent could bounce scenarios off or who could help in the moment, such as deciding whether to keep a child home from school. The way in which the Family Coach took on some mental load for the families also freed up parents or carers to focus on their children's needs.
- Helped out with ideas and one-off material things such as Christmas and birthday presents and, for one family, the child's "first real birthday party".
- Helped to research and pay for suitable experiences for child's sensory or wellbeing needs.
- Helped to reduce instances where children feel unsafe, for example by replacing household items that were triggering of past traumatic experiences.

"The school holiday booklet was so helpful. Normally I'm stuck - holidays are so overwhelming."

(Family member)

"The camping kit was so beneficial. Went camping with kids and family, my son had been asking for years for it. It helping our family connect more."

(Family member)

## What changed?

Families reported a sense of being better able to provide their children with "a normal childhood" and expressed relief that they "got to just be kids". For some families, children had a broader range of experiences or were able to be included in things such as regular sports for the first time. These outcomes for children are a result both of the increased access to money that was available through the brokerage, as well as the increased ability for families to manage the day-to-day stresses they are facing and make decisions relating to their children's well-being - in other words, Sunshine helped removes the barriers parents face to being the parents they want to be.

For 15 children, one of the outcomes reported was maintaining or improving engagement with school. Families also reported that children were accessing things like counselling for the first time. Clearly this represents an uptick in engagement with positive supports likely to benefit children and families in the short and long-term.

The Project also benefited children in that adults avoided instances of homelessness, job loss and violence. In many case (as had been the case for some families previously), such events end up involving child protection, even where there is no other risk factor, and can even be the catalyst for child removal.

"Being a single mum, I guess, The Sunshine Project and your caseworker [Family Coach] is kind of like the other adult that you can liaise with in your household."

(Family member)

# Impacts for families: Health

## ***What's going on for families?***

The families engaged with Sunshine Project report an extensive range of physical and mental health concerns, both acute and chronic. They also reported multiple challenges in getting these addressed.

In many cases, health needs are simply not met as families cannot afford them, with any medical needs that are preventative and/or are in relation to the parent/caregiver given the lowest attention after prioritising kids' and urgent needs first. Compounding this, waitlists in the public system can be long; to access an appointment for diagnosis for child (let alone treatment) can take years and caregivers are left with either somehow finding money to go private, or not addressing the need in a timely manner so that the health issue goes untreated for long periods. People reported that the paperwork for programs such as NDIS was 'too overwhelming' or involve 'too many hurdles to jump through'.

Difficulty in finding a suitable GP was reported by almost all families. Attempts to seek diagnoses and treatment for chronic conditions has additional issues as GPs and medical professionals sometimes are not suitable or properly equipped, often change (e.g., staffing, schedules, fee structure, etc.), or do not have time to complete any supporting documentation required by government services.

Families said some medical professionals are unwilling to engage with personality disorders which leaves vulnerable people without support. Due to the prevalence of intergenerational trauma and the effects of violence, several of the families are raising children who are experiencing mental health concerns, PTSD and various "behavioural" matters (such as school avoidance).

"[A case worker said to me] how come you're not on disability? I was like, because I think there's a lot of hoops that I'm gonna have to jump through. I've been telling doctors for the last four or five years. I'm exhausted. I can't keep going."

(Family member)

"I was already so consumed dealing with the kids mental health stuff, to dealing with those sorts of things that trigger me - I still haven't had a psych evaluation because this process takes so long and I have to wait till December."

(Family member)

"I've got kids and they have PTSD, they are trauma kids, and then we have some really difficult things like seizures - the youngest one. And mental health issues for the oldest one."

(Family member)

# Impacts for families: Health

## ***What did this project do?***

- Paid for some preventative and emergency health costs. This ranged from paying for emergency dental work to buying prescription glasses.
- Helped initiate or return to critical mental health services. For one parent, the brokerage was used to pay off an existing debt to a psychologist which allowed for a participant to re-engage with that mental health service. The Family Coach also helped to research services and book appointments.
- Helped people apply for NDIS funding to support disability needs, including through helping families get access to medical records and fill in forms.
- Helped initiate new relationships with new primary health providers, including supporting families to find suitable GPs, access and transfer their medical records to the new practice.

## ***What changed?***

People became aware of rights relating to their health care, and learned to exercise these. One parent said that before Sunshine, "I didn't even know I was allowed to have my own medical records." Two families have NDIS applications submitted and two have Disability Support Payment applications submitted, all are awaiting an outcome.

Primary carers also indicated that having 'another adult in the house' helped them to remember to care for their own health as well as their children's, and they took steps towards self-care as a result - with likely positive outcomes for themselves and their children.

Despite these positive outcomes, the structural barriers remain - long wait lists, closed GP books, lack of bulk-billing doctors - that are preventing families from getting what they need. However, where families hit a barrier, they report that the Sunshine Project is part of what is helping them to be in a better emotional and practical position to manage, and continue to problem solve - rather than be overwhelmed and give up.

One parent reported she would never considered raising her back pain with a doctor even though at times she could barely complete the walk from school pick up, because it wasn't the worst thing the family was dealing with at any given time.

A participant was also able to reflect upon how dialectical behaviour therapy (DBT) had been beneficial to them in the past, and made the decision to re-engage with that type of mental health support. In one case a parent and their children were now in mental health counselling as part of their healing from experiences of FDV.

# Impacts for families: Social services use

## What's going on for families?

As demonstrated in the image (right), a person or family with multiple needs is typically required to navigate many different specialist services, each requiring a referral and/or the need to meet strict eligibility criteria. Families said that they find navigating the system of services across health, mental health, welfare, emergency relief and disabilities complex, challenging, time consuming and exhausting.

Prior to Sunshine, families did not know all the options out there and could not always find the right help at the right time. Where the families are finding the right supports, they said it took a long time and they needed to access many different services to meet different specific different needs. The time and effort required to just manage ongoing needs (e.g., health, financial, legal, educational or otherwise) is "a part-time job in itself" with a heavy mental load - with constant follow ups and administrative requirements having to be undertaken where families are already overburdened.

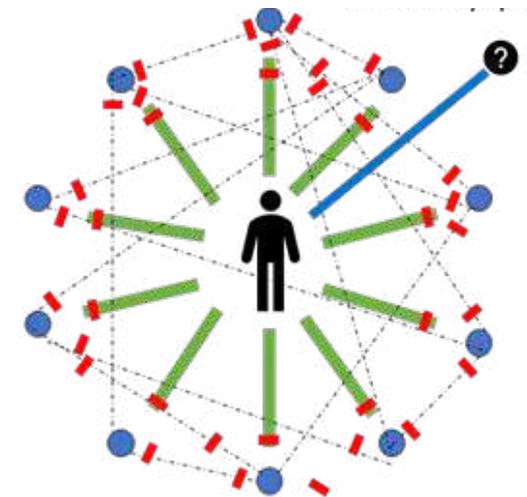
They also spoke of the current service system experience as not therapeutic or helpful. Rather, people said it "kicks them when they're down", and sometimes disrupted or got in the way of progress, instead of making things better. Research from 100 Families WA highlighted that 'shake up' of the service system is needed.

“ Family members wanted help to transform their situations, but largely felt that the services available could only help them maintain their situations... They want to feel seen, heard, and appreciated, but often do not. Family members expressed the view that something radical was needed to shake up the way services were designed and the mismatch between what families in entrenched disadvantage wanted and needed and what was currently on offer.

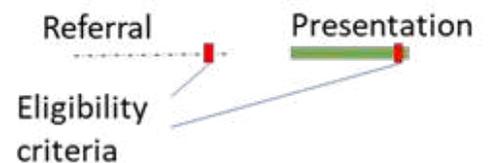
[Insights into hardship and disadvantage in Perth, Western Australia: The 100 Families WA Report](#) (2021)

The 100 Families WA project, Western Australia.

”



● Specialism



Source: *Liberated Method* (M.A. Smith 2023), Northumbria.

"[Families] are receiving things from various services, so there's a cycle of receiving, using, going back for more - no capacity building."  
(Service worker)

"The 'system' is the most triggering part of the job."  
(Team member)

"At [other ER service] you're not seen as a person."  
(Family member)

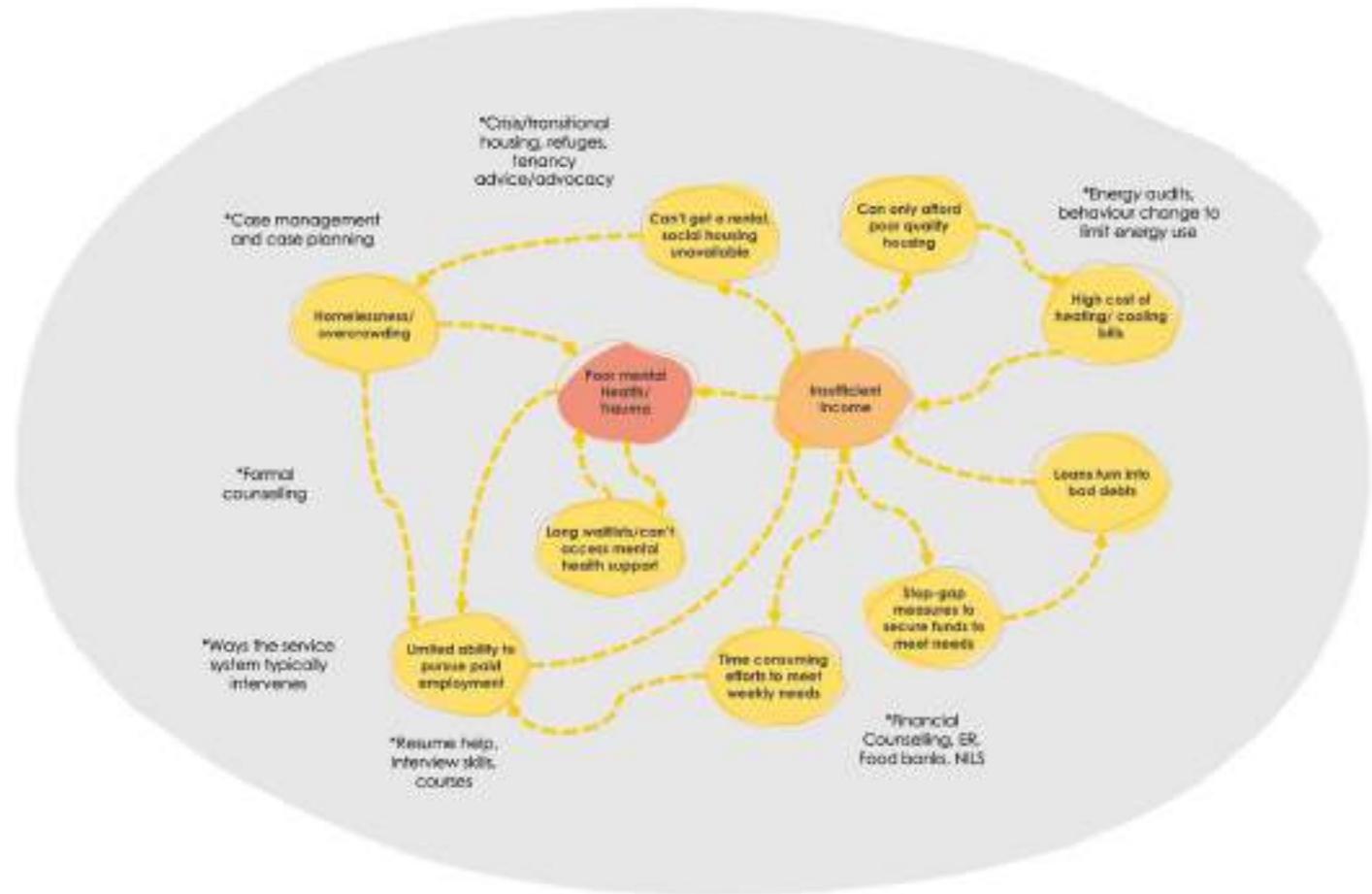
# Impacts for families: Social services use

## What's going on for families? (cont.)

The figure (right) shows some of the complexity in how families experience the service system. It also shows how external factors combine and intersect with family characteristics to create, perpetuate and deepen disadvantage.

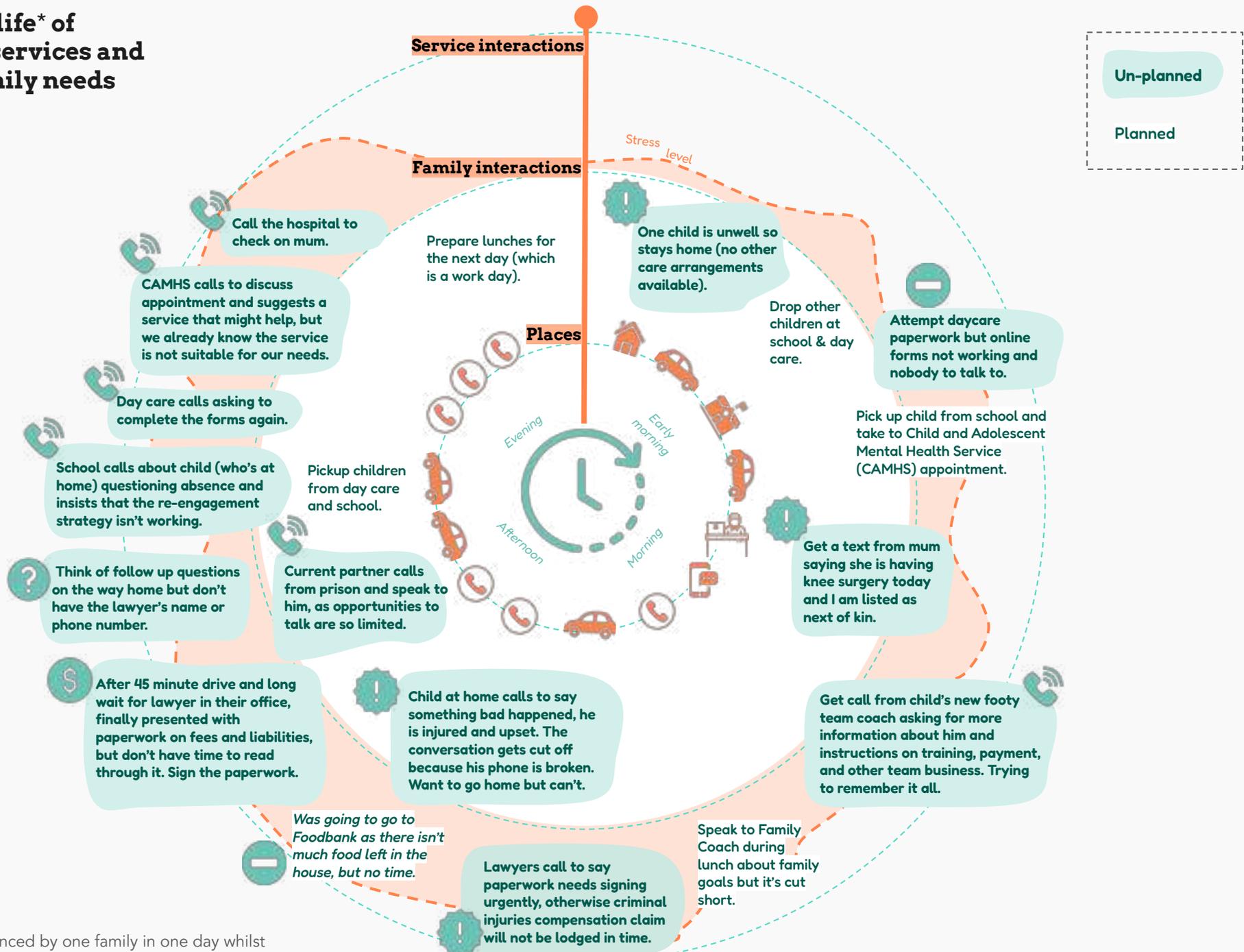
At the centre are insufficient income and poor mental health for people, which cause and then reinforce each other. While external factors such as long wait lists, lack of affordable housing and the high (and rising) cost of living also deepen these issues, and are worsened, in turn, as poverty and mental unwellness become more prevalent and entrenched.

On the following page, the 'Day in the Life' diagram demonstrates the increasing mental load and stress experienced by one family in one day due to the unpredictable, urgent and complicated demands of navigating different services while trying to meet the immediate needs of family members and also think about their family's future. This is based on real events for one Sunshine Project family on one day, noting some events (that were highly stressful in nature) were not reported in order to maintain privacy and confidentiality.



Source: Ruah / Anglicare WA / 100 Families, Sunshine Project Insights Report. October 2022

# A day in the life\* of navigating services and meeting family needs



\*Real events experienced by one family in one day whilst with the Sunshine Project Family Coach. Note: this is the only non-work day in the week for the parent represented.

# Impacts for families: Social services use

## ***What did this project do?***

- Helped to connect families with services most suited to their needs, for example by helping to research services and make contact or book appointments. In some cases, the Family Coach accompanied families to appointments, particularly where transport was a barrier or the family wanted emotional or practical support.
- Helped access medical records and identity documents and other administrative tasks such as applying for NDIS, Disability Support Pension and social housing.
- Advocated for families, including to avoid families having to constantly retell their stories to new workers.
- Helped families reduce the need for emergency relief, or improve access. Connecting families to the flexible brokerage fund and fresh food boxes reduced the need for families to access emergency relief elsewhere (which in turn saved a lot of time and stress). In some cases, where emergency relief was still required, Sunshine Project helped improve access (e.g., by buying an electric bike for a family who was travelling to food relief services by bike).



*The map above (Source: Google Maps) shows food relief available in the Rockingham-Kwinana area, as reported by a family member. The longest commute between two locations is approximately 21 minutes by car or 1 hour by public transport or bike.*

## ***What changed?***

Families are now better placed to be getting things they are entitled to, but had given up on or been prevented by bureaucratic hurdles from trying to access - such as income support payments, disability services and social housing. This includes services for their children, including educational support.

In preventing outcomes such as homelessness, and directly dealing with other issues such as letters from Housing and Centrelink, there were avoided calls on other services in the system - such as homelessness, crisis response, FDV and emergency relief services. Social and community services regularly report being overwhelmed with demand, and by avoiding the deterioration in a situation, the Project not only helped avoid multiple calls on multiple services (from six families with 18 children), but meant other clients were helped. Families also reported engaging in preventative services such as counselling and primary health. This should reduce the call on other tertiary and crisis services in the future.

We note that there were external barriers to getting some services that could not be overcome, for example wait times and closed books for some GPs and specialists. Therefore, some families have still not been able to access some services. However overall, families are now better placed than they were to get the right help at the right time, and avoid downstream costs.

# Impacts for families: Wellbeing & empowerment

## ***What's going on for families?***

Multiple disadvantages and poverty, as well as their own adverse experiences in childhood that have gone unhealed, impact on people's feelings about their level of control, agency, power and ultimately the hope they have for the future. When people feel they don't have control or power, they can feel it's not worth it - or simply impossible - to get out of the situation they find themselves in. Their financial and emotional state continues to decline, as does their ability to solve problems, interact with other people, support other family members, and be good parents.

"You know how they say you can't pour from an empty jug? Yeah. Well, there's a little trickle coming in, right? Yeah. And I'm like this - dumping it out everywhere."

(Family member)

## ***What did this project do?***

In terms of what was effective at growing families wellbeing, interviews with families identified a number of elements:

- Having the emotional and psychological support of 'another adult' to run things past, to sit beside them during complex or difficult situations such as court appearances and debt management, as well as support through complex administrative processes such as getting birth certificates, copies of medical records, interstate (driving) records.
- New information coupled with practical supports, such as finding out what services exist and getting a referral, or understanding rights, e.g. to negotiate rent increases, with a template to follow.
- Gaining new skills, such as driving or cooking. This enabled them to do other specific things (such as get places, eat better) but also came with a sense of achievement and confidence.
- Finding joy in meaningful hobbies and activities. In addition to creating opportunities to do engage with activities (such as music, crafts), listened to and 'being taken seriously' regarding their 'gifts' and goals was empowering.
- Learning to negotiate boundaries with family or friends, including "Learning to ask for help", and "learning to say no" when asked something beyond capacity by family/friends.
- For mothers, making time to look after their own well being and mental health, whereas before Sunshine, they reported spending all of their limited energy on their children's wellbeing.

"A mother can just run on empty and do things for her kids but when it comes to your self care..."

(Family member)

"Going from feeling like having 'never had control over my life' to being in control"

(Family member)

"[Sunshine Project] has changed my life"

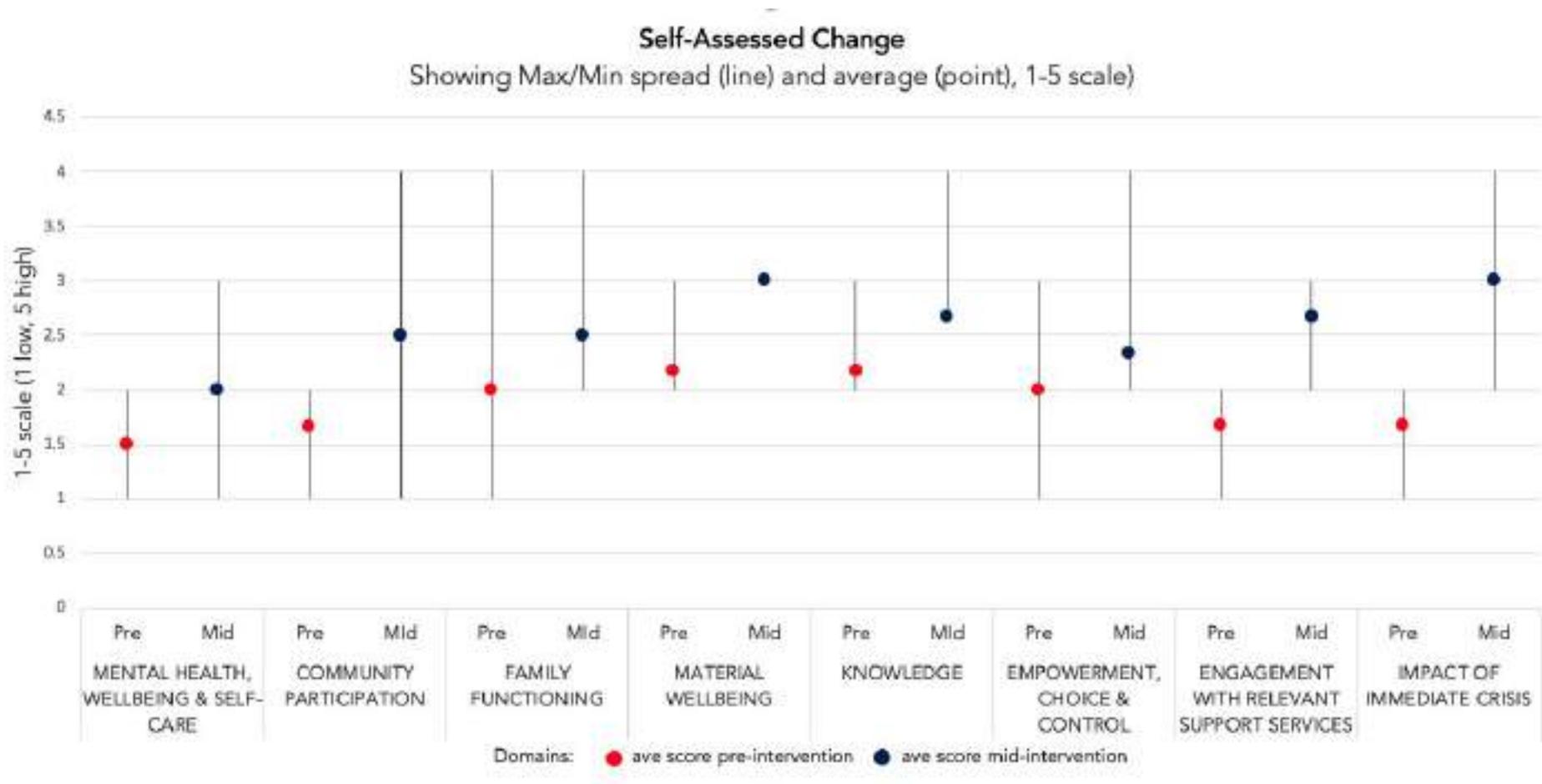
(Family member)

# Impacts for families: Wellbeing & empowerment

## What changed?

There is evidence that being involved in the Sunshine Project has had a positive impact on families' wellbeing, and specifically their sense of power and control over things that are affecting them. In a July 2023 survey, 100% of respondents agreed with the statements 'things have gotten better in the last year' and 'I feel more hopeful about my family's future than I did a year ago'.

Anglicare WA and Ruah also administered pre- and mid-program surveys (see Appendix 1) of the size and nature of self-reported changes in families' lives on entry to the program and then again at June 2023, across domains highlighted in the graph below. Below are the findings which show, on average, improvements were self-reported across all domains measured.



# Impacts for families: Wellbeing & empowerment

## **What changed? (cont.)**

The strongest changes indicated in the graph (previous page) were in:

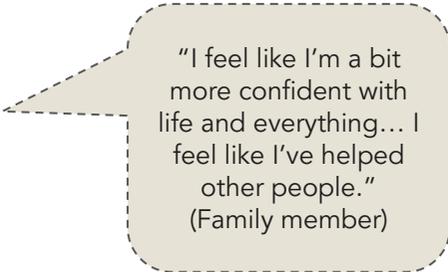
- Impact of immediate crisis (how much immediate issues are impacting on people's lives), which went from an average of 1.6 to 3 (1-5 scale).
- Engagement with relevant services (1.7 to 2.7).
- Community participation and material wellbeing (from 1.7 to 2.5 and 2.2 to 3 respectively).

Despite these overall results, a number of individuals reported no change or a negative change in some elements of their lives. However, all families indicated that they had felt listened to, satisfied with the services provided, and that they were better able to deal with the issues they had started with (these results not shown).

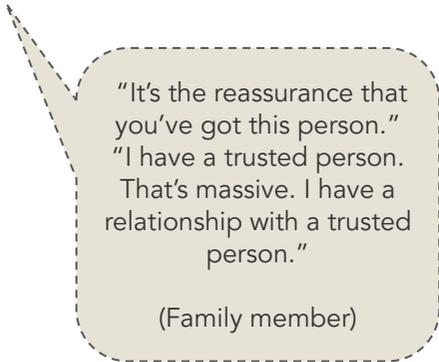
As a lack of control or power are associated with worsened ability to solve problems, increasing power and control are associated with a better ability to move forward with issues and find solutions.

Importantly, feeling more in control is also positively associated with the ability to help other people. As noted above, Sunshine Project participants reported a lack of 'functional' people in their communities, and therefore a lack of people to turn to for help. In the future, improved functioning among families will not only support them to do better, but to help others do better; indeed, such outcomes are already starting to be reported, with longer-term participants reporting they had started to support and guide others in their community.

Finally, parental well being is correlated with outcomes for children, with children whose parents experienced moderate or high levels of psychological distress more likely to experience social-emotional difficulties over time. As such, any improvement in the wellbeing of parents will flow through to children, with both short- and long-term benefits.



"I feel like I'm a bit more confident with life and everything... I feel like I've helped other people."  
(Family member)



"It's the reassurance that you've got this person."  
"I have a trusted person. That's massive. I have a relationship with a trusted person."  
(Family member)

# **Key findings: Cost-benefit assessment**

# Costs and avoided costs

## ***Research on costs and avoided costs in the system***

A review of literature on the costs and costs avoided of social services interventions (see Appendix 3) highlighted a number of issues that are relevant to an assessment of the costs and costs avoided through the Sunshine Project. In summary:

- More intensive interventions are consistently associated with better outcomes, across a range of areas. Literature identified more intensive case work as leading to better outcomes in terms of avoiding youth offending, mental health treatment, entering employment. In the cases where a cause was posited, greater trust and connection between case workers and clients was said to be part of what makes more intensive case work models effective.
- Entry into one point of the system commonly ends up with service use, and flow-on costs, across multiple parts of that system. People experiencing challenges in areas such as housing, income and violence end up accessing services in these areas as well as mental health, health, child protection, justice and police, domestic violence, income support and emergency relief. The majority of these (with the main exception of income support) are state government responsibilities.
- The costs of avoiding service use (and therefore the benefits of reducing service use) can be considerable. In terms of the human costs, they disproportionately fall on groups in our society who are not well placed to respond, such as women, children, racialised minorities, people with disabilities, people who identify as LGBTQI.
- Where people start to engage with services appropriately, there can be an uptick in appropriate use of prevention and early intervention services. Research shows that people can start to access services such as GPs, counselling, and screening services. This is associated with a short-term increases in some costs, particularly health and mental health. However, it should be associated with reduced costs for expensive tertiary services in the longer-term.
- The greatest benefits are seen for children; these will not be fully realised for a generation. There are a multitude of benefits of effective interventions in terms of well-being and life satisfaction. Some studies attempt to quantify these. However, the most significant are likely to be seen in the next generation, if children have fewer adverse childhood experiences.

“

“There are very high costs, you definitely want to be intervening early and preventing these costs, and you can put significant money into programs that would do so.”

Laura Dixie, The high cost of homelessness revealed in new data. [AFR](#), 3 December 2023.

”

# Project costs

The following summarises the total costs of the Project over two years (in Australian dollars, for the six families).

Category	Design costs (over 2 years, including setup)	Running costs (2 years)
Anglicare and Ruah Project Leads (0.4 FTE each)	\$200,000	\$70,000
Steering Group Lived Experience representative	\$1,400	
Families Coach Wages (including costs)		\$200,000
Emergency relief		\$14,000
Brokerage investment (e.g., mentors, furniture, laptops, driving lessons, courses)		\$21,000
Cash incentives		\$1,400
Lived experience payments	\$3,400	
Community prototypes	\$12,000	
Organisational (admin, IT, etc.)	\$20,000	\$10,000
Evaluation	\$50,000	
Total	\$266,800	\$316,400 (\$158,200 pa)

Source: Provided by Ruah / Anglicare WA

# Cost estimation methodology

A cost estimation methodology has been developed for the Sunshine Project that considers and values the following outcomes. More detail on the calculations and application as well as assumptions used is contained in the methodology section in Appendix 2.

Category	Nature of change counted	Basis of quantification
Avoided income support costs (See notes at 1)	2 people entered/stayed in the workforce	Savings per person: \$25,708 pa (maximum base rate of Parenting Payment Single)
Avoided child protection (CP) involvement (See notes at 2)	9 children from 5 families avoided possible CP involvement (all of those who avoided eviction or violence)	Savings per child: Option 1, average cost of protective intervention (no order) per child: \$4,224 (note: applied per family) Savings per child: Option 2, average cost of out of home care (with orders) per child: \$59,292. (note: applied per family)
Avoided homelessness (See notes at 3)	5 people avoided homelessness (4 due to avoiding eviction, 1 due to avoiding violence, which is strongly correlated with homelessness)	Savings per person: average cost of \$4003 pa (ex. cost of capital) of presentation at SHS service in need of emergency accommodation.  Decrease in emergency/tertiary health costs: \$12,312, offset by increase in use of prevention health costs: \$4,567  Decrease in use of some legal services of \$2,039, offset by increase in use of some legal services of \$193

## Notes:

We have not differentiated between cashable and non-cashable costs due to the complexities of doing so. Income support costs avoided are 'cashable' savings, as is part of the cost of child protection, as additional child protection orders involve new costs to carers. In the short-term, the marginal value of avoiding homelessness is small, as the system is already operating beyond capacity and those services will be used by someone else - therefore these are not 'cashable' savings. However, there is a real 'additional system burden avoided' benefit if these families don't present elsewhere. In line with standard practice, we have valued this as equivalent to the average cost of providing a service.

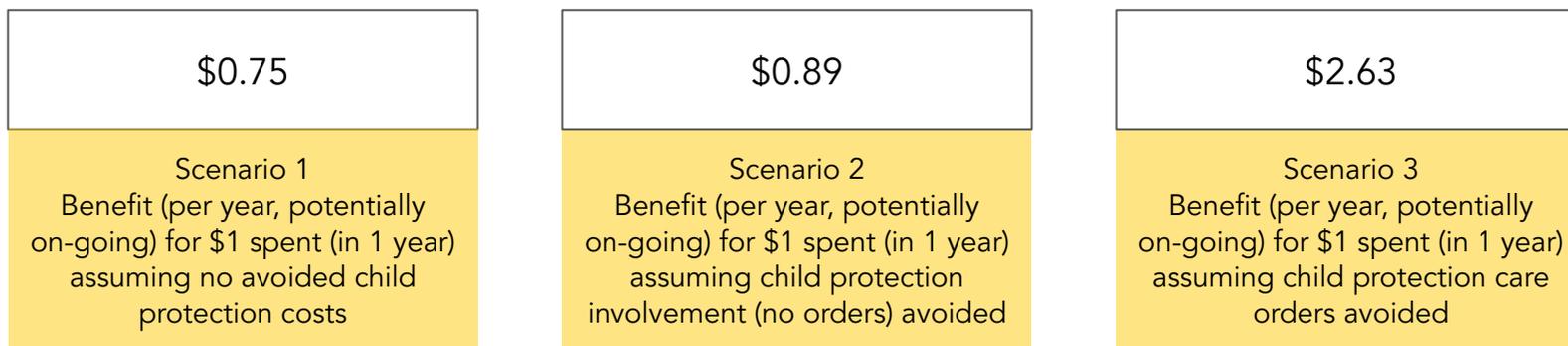
# Cost-benefit assessment: Summary

The following demonstrates the described methodology applied to three scenarios, which differ according to the level of child protection involvement. Scenario 1 assumes none, Scenario 2 assumes some involvement but no orders made, and Scenario 3 assumes out of home care orders are involved. This shows the following outcomes, including percentage values illustrating the distribution of costs avoided by cost area. Discussion of the figures follows over the page.

	Scenario 1		Scenario 2		Scenario 3	
Description	2 x avoid income support 5 x avoid homelessness No child protection		2 x avoid income support 5 x avoid homelessness 5 x avoid child protection (no order)		2 x avoid income support 5 x avoid homelessness 5 x avoid child protection (orders)	
Income support cost avoided	\$51,416	43.1%	\$51,416	36.6%	\$51,416	12.4%
Housing / SHS cost avoided	\$20,015	16.8%	\$20,015	14.2%	\$20,015	4.8%
Health - cost avoided (tertiary)	\$61,560	51.6%	\$61,560	43.8%	\$61,560	14.8%
Health - cost incurred (preventative)	\$-22,835	-19.1%	\$-22,835	-16.3%	\$-22,835	-5.5%
Justice - cost avoided (crisis-related)	\$10,195	8.5%	\$10,195	7.3%	\$10,195	2.5%
Justice - cost incurred (redress, etc.)	\$-965	-0.8%	\$-965	-0.7%	\$-965	-0.2%
Child protection cost avoided	\$0	0.0%	\$21,120	15.0%	\$296,460	71.3%
Total cost avoided (annual, on-going)	\$119,386	100.0%	\$140,506	100.0%	\$415,846	100.0%
Cost of program (on-going, p.a)	\$158,200		\$158,200		\$158,200	
Ratio cost:avoided cost (value >1 indicates benefits exceed costs in that year)	0.75		0.89		2.63	

# Cost-benefit assessment: Summary

The figures on the previous page set out the assessed costs and benefits of the Project, using the methodology provided. In summary this found:



Commentary:

- These figures show the value of the Project based on the outcomes it has achieved after around two years of operation, using annualised figures for costs and benefits. They are calculated in terms of the annual benefits (this year) attributable to outcomes that are emerging for the dollars spent (this year). As such, they represent an early point in time assessment and should best be seen as 'directional' costs and benefits, based on what has been seen to date. Further, this assessment has been made before the conclusion of the Project and therefore does not factor in any further outcomes which may have been achieved in the months between the data collection and end of project.
- In subsequent years these gains may have been maintained, in which case the benefits valued here could continue to be derived (and potentially increased) over multiple years, without additional (or with reduced) project expenditure. This would increase the ratio of benefits to costs by the multiple of years for which it is maintained.
- The scenarios differ considerably depending on assumptions around child protection. This suggests that avoiding child protection involvement not only avoids massive costs to families and children, but also has financial benefits - both cashable and non-cashable. We note that there is no suggestion these parents pose any risk to their children. However, child protection involvement often follows economic and housing insecurity; therefore supporting families who are in insecure housing and precarious economic situations can end up reducing the need for child protection. This is good for families, and for government.
- We have not included any calculations for inter-generational effects (savings from avoidance of adverse childhood experiences), even though the gains witnessed in the families, if maintained, could be considerable.
- We have also not included any quantified impact of increased well-being or life satisfaction for families in order to focus on the most direct costs and benefits of this project for the social welfare system.

# Conclusions and considerations

# Conclusions

## ***How the Sunshine Project is different to other services or approaches***

Traditionally, social services have been described as a 'safety net' (see image below). The problem is that, in the current climate of lack of affordable housing and cost of living pressures, it can be very easy for families to 'slip through' the net.

While there are many services and agencies available, the lack of a process to bring supports together around people can result in it feeling overwhelming and chaotic, rather than helpful and supportive.

Once they have slipped through the cracks, the issues families are trying to overcome - lack of housing, poor mental health, difficulties with transport, already stretched school and other supports - compound, and it can be impossible to find their way out again. At worst, they cannot find what they need to move forward. At best, they remain dependent on services, with little capacity to forward plan and move towards a 'good life'.



The Sunshine Project tested what it could look like to have a system that steps in at this point, offering more intensive, tailored and flexible supports that catch people who have slipped through the cracks and help them work towards their 'good life'.

There are many aspects of the Project that contributes to this and that have influenced the many positive outcomes for families. Specific actions and responses to individual family needs are detailed under family impacts (pages 24-43). However, what commonly worked for all families across all outcomes can be found in the following:

- A single trusted relationship with a generalist worker, providing a combination of services.
- Families are in charge and taken seriously.
- Capacity building that leads to changes to people's intrinsic self-worth.

These are explored in more detail over the following pages.

# Conclusions

## ***Aspects of the Project that are influencing positive changes***

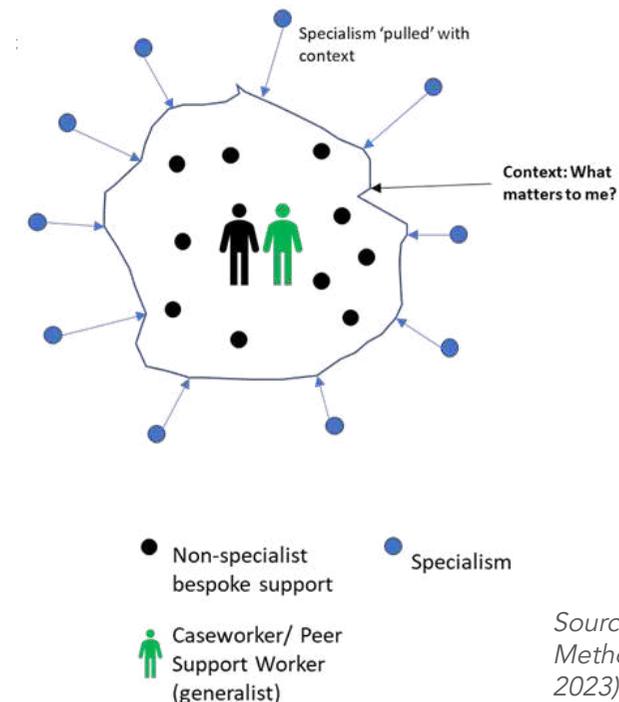
A single trusted relationship with a generalist worker, providing a combination of 'services'.

The aspect of the Sunshine Project that came through as the strongest influence of positive change in families' lives is the Family Coach, a generalist worker whose flexibility and responsiveness truly meets families' needs. Having just one trusted person over a significant period of time makes life far more manageable for families who experience a huge mental load of navigating complexities in their lives and the service system that is meant to help them.

The Sunshine Project approach is a melding of service offerings usually kept apart; and in combination they are greater than the sum of their parts. We have heard from the families and other services that the strongest elements of the Sunshine Project - the friend-like support of the Family Coach, the advocacy to government services and organisations as well as the financial support structures (emergency relief and a brokerage fund) are super-charged when brought together in just one trusted relationship. Adding even more value is the everyday practical hands-on help like supporting families with tidying up the house or picking up food.

The design of the generalist worker (pictured right) is an antidote to the overwhelming experience of navigating many different specialist services (as described on pages 37-40). The result is more trauma-informed (less bouncing around services having to re-tell their story over and over), a reduction in intake work for various services, more accurate paperwork, less appointments (less appointment cancellations), and ultimately better outcomes for families.

Another critical part of the relationship between family and worker is simply having another trusted 'adult in the room' where this is typically lacking. Many of the families are living in low-asset communities where the kind of help that might come from neighbours or other adults does not come, and people's own extended families and friends are struggling as well.



*Source: Liberated Method (M.A. Smith 2023), Northumbria.*

"I tell [Family Coach] everything so she knows everything that happens, as it happens - otherwise it is too overwhelming to tell someone all of it".  
(Family member)

"To have someone to support me through difficult times and situations has been very beneficial not only for being able to feel supported and receive the help I need but it's been so beneficial for my own mental health and well-being."  
(Family member)

# Conclusions

## Families are in charge and taken seriously.

The Sunshine Project is self-guided, family-directed, and holistic in that the Family Coach supports the family to self-determine what the good life looks like for them. This is done primarily through vision boards and a family plan, which is owned and controlled by the family (in the digital version of the family plan in Trello families are the board owner, not the worker). The quests are another way families make their own choices, by deciding on tasks or goals to achieve and the corresponding incentives or rewards for completing these.

Taking time to see the whole person and support their gifts and creative drives (including financially) is therapeutic and gives people a taste of their own version of the good life that acts as a North Star for families to access even after their engagement with the Sunshine Project has ended. Rather than starting from a place of listing 'concerns, the Sunshine Project is underpinned by an understanding that that people's passions and aspirations exist alongside a list of someone's 'issues to solve', and supporting people to focus on these aspirations, is more beneficial than 'fixing the problems'. The things - items, experiences, services - that people requested financial support for may seem unimportant to others, but were extraordinarily healing for the specific family (such as supporting creative pursuits that are emotionally healing, or replacing furniture or decor causing traumatic triggers).

"A family support that can be adjusted to your needs - to help me get closer to my idea of the good life."  
(Family member)

"I didn't know what I needed. [Sunshine Project] provided money to spend on whatever we need, as well as help to decide what's needed. We could buy things that extend your life... to thrive not just survive."  
(Family member)

## Capacity building that leads to changes to people's intrinsic self-worth.

The duration of support (1-2 years) and the 'do with, not for' approach of Sunshine Project has the effect of building capacity and resilience in the families it walks alongside. Other aspects, like the trusted friend-like relationship with the Family Coach, and the self-driven nature of the Project increase self-esteem.

Every step of the way, Sunshine Project support combines finding ways to face problems effectively in the moment, as well as building the skills and knowledge of family members at the same time to ensure they can face similar situations in the future. For example, while the Family Coach may play the role of advocating on behalf of a family, they also ensure the family is involved every step of the way, learning what works best in these situations so they are more confident if it happens again in the future. The high level of trust built with the Family Coach also makes it possible to have some 'tough chats' (see p.16) that can lead to growth.

Believing in people and their capabilities is empowering and builds self-esteem that is crucial to tackling the hard bits of life. Positive changes to people's intrinsic self-worth is a powerful impact multiplier, with potential for long term positive effects on their ability to manage future setbacks.

*On other services:*  
"[Families] are receiving things from various services, so there's a cycle of receiving, using, going back for more - no capacity building."  
(Service worker)

"There's a different mindset [in Sunshine Project]. It's about doing *with*, not *for*."  
(Service worker)

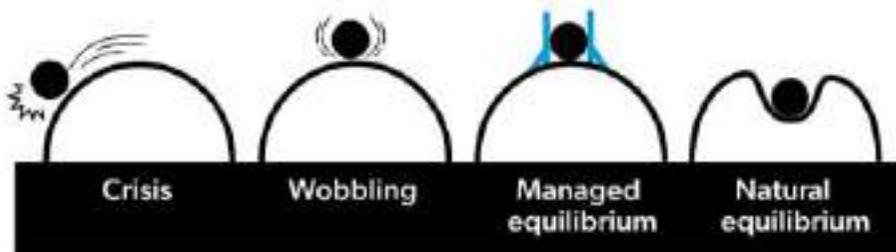
# Considerations for understanding impacts

When arriving at conclusions about the Sunshine Project's impacts and influences of these, it is important to consider the nature and longevity of impacts in the context of the Project and this evaluation. Firstly, there are only six families who were directly supported by the Project - a small sample with variation in their goals and needs. Secondly, the evaluation was conducted before the Project concluded and when families had been involved for anywhere between nine and 21 months. The sustained impact of Sunshine Project on long-term outcomes for families can only be observed after significantly more time has passed. Finally, the environment in which families live has significant influence on their lives and futures, in particular economic forces.

Exits from all service support is not a realistic outcome for all.

Part of the end phase of a family's time with the Sunshine Project is to gradually shift people from relying on professional supports and organisational management, into natural supports like family, friends and community. Practically, however, many of the people supported by the Family Coach do not have reliable natural supports and may come from intergenerational disadvantage. Families are also exposed to bigger forces that the Project cannot influence, such as housing costs.

For some, avoiding crisis and maintaining a stasis of "wobbling" or "managed equilibrium" may be the goal (see spectrum of scenarios in the diagram below).



Source: *Liberated Method* (M.A. Smith 2023), Northumbria.

The sustainability of impacts for families is difficult to predict, however we can observe the direction of progress towards long-term outcomes.

Families have avoided significant crises and achieved important milestones. Key wins occurred during the families' time with the Sunshine Project. Multiple families avoided homelessness. A family stayed away from a violent relationship after multiple prior attempts to leave. Multiple people undertook education courses. One gained permanent part-time employment. Multiple family members made progress towards attaining their driver's licence. There was also avoidance of mental health crisis and intervention from Department of Child Protection.

While some of these advances could be tenuous over the long term, the way in which these 'wins' occurred - with the Family Coach walking alongside the families - built their capacity and knowledge systems around how to manage future events.

There are signs that intergenerational impact may be possible.

The driving factors of the family members interviewed often placed a good life for their children (or children in their care) above all else. By reducing some of the mental load of service navigation and day-to-day survival, Sunshine Project enables the parents to prioritise caring for their children as their primary focus.

The primary prevention aspect of Sunshine Project can be witnessed in several protective factors, including decreasing risk of homelessness and Department of Child Protection involvement, assisting with education as well as supporting parent and carers' mental health and physical well-being.

In supporting the adults as well as children of this generation, Sunshine Project is helping those parents and carers enable their children to avoid crisis in the next generation.

# Considerations for the future

## ***What makes Sunshine Project unique and effective also poses some challenges***

The Sunshine Project is unique. We heard that it fills gaps, is needed, and is achieving positive outcomes for families. However, some of what makes it so special also brings about challenges, particularly in consideration of scaling the approach in the future.

The emergent and flexible nature of the Project has made it difficult to understand.

The Sunshine Project to date has been designed for learning about what works, with a focus on design, creativity, and action research. In being so emergent, we also heard that this makes it difficult to explain, and hard for services and families to understand.

Further, the flexible and inclusive nature of the support - demonstrated best by the lack of eligibility criteria - adds to this challenge. Things such as the deliberate lack of specificity around predetermined outcomes, and the breadth of possible supports make it hard for external parties to understand what is being done. The program is often described using words such as person-centred or trauma-informed - terms that in practice apply to a wide range of contexts.

It was true both of other service providers, as well as families involved, some of whom at first did not understand the purpose or nature of the relationship with the Family Coach, and sometimes found it took time to work out how to make the most of it.

In the future, some of these challenges will be addressed by the fact that key aspects of the Project have been documented well. However, additional effort will need to be made in refining frameworks to guide practice and clarify communications with stakeholders.

Human-ness is a huge strength - and poses a risk.

All families clearly valued that they were being seen as a whole person, and were assisted through a human connection with another person who became a trusted friend who could walk alongside them. This was especially valuable in the families that did not have strong family or social supports.

The 'human-ness' of Sunshine Project also extended to the ways in which the team worked with many other community members, and worked in relational and creative ways.

The key person risk factor is high, given the Family Coach is a single person over a lengthy period, and team members hold the community relationships.

"I'm not sure exactly who Sunshine Project is for - who are 'their families', who could be referred?"  
(Service worker)

"[Family Coach] is my 'body double'...I tell her everything, good and bad".  
(Family member)

"The word 'project' seems temporary and has caused me to be hesitant promoting Sunshine Project - don't want to setup expectations and disappoint."  
(Service worker)

# Considerations for the future

Extended time spent with families in the Project enables foundational trust and relationships building. Endings need careful planning.

We heard that the duration of time of the support from the Family Coach was extremely beneficial for families. For people who have been passed along organisations and who have had to retell their stories to ever-changing case workers, the stability and deeper work that could occur with the building of profound trust was a core driver for change.

This departure from past history of being 'let down' by services and workers is positive, but it is important that a similar experience is not replicated by the way families currently exit support. The duration of support is clearly a benefit but the other side of this coin is that it can be harder to wind up the support of the Family Coach, as they are so embedded as a trusted friend-like figure of the family. The Sunshine Project has built in planning for a good ending of the Family Coach relationship from the beginning, however families still expressed some worries about the support ending (noting that this transition was in progress at the time of data collection). If this is not managed well in future iterations of Sunshine, families may feel let down, which comes with a risk of them losing some or all of the progress they have made.

In addition to planning good endings, an important aspect of the transition out of intensive support is the point in time in which this happens. We heard that families want to have more control over the exit timing, to tailor it based on what is going on for them at the time.

The work with community in place is important. Partnerships are critical for sustainability.

The Sunshine Project is place-based on multiple levels: at the family level (they are all situated in the same area), as well as at the community level (through convening community actors, exploring community needs and assets, and developing prototypes). This has added to the strength of the Sunshine approach, ensuring families are considered in their context and supported to strengthen their community connections and participation. It is hoped that the community-level work will leave lasting benefits for the families and other community members.

The community prototypes were designed as probes to understand what might enable families to grow their good life in community settings and what needs to be true for those to work. Some of the prototypes have been particularly successful and could continue to provide benefits to the community if they are sustained. Partnerships in the community that enable others to lead this work may support the sustainability.

The way in which the community level work operates effectively in different places will also need to be tested. What works in Rockingham-Kwinana may not work in other communities. The types of partnerships may also differ between different communities, depending on who the proactive community leaders and connectors are in each place.

"What I don't understand is whether, at the end it's just like 'bye bye'? Like, [Family Coach] is my friend. Are they going to check in on me in the future?"  
(Family member)

"If I could change one thing... I wish it was a programme based on the individual's timeframe. It's like they haven't finished it off with me."  
(Family member)

"[Sunshine Project] sparks others in the community to step forward."  
(Local government worker)

"I have questions about sustainability of initiatives in the community like veggie boxes and camping equipment - not sure who is responsible."  
(Service worker)

# Considerations for the future

## ***Building enabling conditions and reducing system barriers are critical to success***

Investment in innovation, learning and collaboration is creating broader benefits than those specific to Sunshine Project.

The value of innovation and the ability to incorporate learning into an evolutionary model of the Sunshine Project would likely produce further benefits in future iterations of the model, as well as throughout the systems in which it sits. Despite the Sunshine Project being incubated away from other services within Ruah and Anglicare WA (reporting lines go through business development and innovation respectively, rather than existing service delivery teams), the way in which the team and leadership are connected across their organisations and the generosity in which they share insights enables learning far beyond this project. Using these insights to provide feedback upstream and downstream could help to improve systems and services that families are navigating.

The investment in innovation and learning is further enhanced by the collaboration between two agencies, both demonstrating a strong commitment to this through investment of resources as well as interest and involvement from leadership.

If the Sunshine Project scales beyond a small learning-focused project, it is important that learning, innovation and collaboration are still given sufficient space and resourcing to occur. What has worked for six families in one location still needs to be tested in other contexts to understand how Sunshine-like principles and practices can benefit other communities. Further, the practices that are found to be working well need to be codified for the benefit of service providers and families alike.

"[Sunshine Project] has helped council to see what's valued and valuable in the community."  
(Local government worker)

System barriers need to be addressed in order for the Sunshine Project's 'radical' practices to be genuinely realised at scale.

We heard that the practices of Sunshine Project are different from many other services. Where other services use language like 'person-centred', 'holistic', 'empowering', 'place-based', the extent to which this is happening is inconsistent and made weaker by the limitations of the systemic structures in which these services operate (e.g., contractual obligations, commissioning for single issues, accreditation requirements, siloed and restricted resourcing). Where this happens in small ways, it is often a result of individual workers sidestepping or bending rules and working around restrictions and barriers.

What makes the Sunshine Project approach 'radical' is it *actually* realises all the above mentioned principles consistently and with strength. This is supported by highly discretionary decision-making and autonomy of the worker, and the creativity in which solutions are developed. This is made possible by the conditions in which the Project sits (e.g., high levels of commitment and involvement from organisational leadership, delivery and reporting separated from other services, use of organisation's own funds, no ties to government contracts, and investment in innovation and learning). Without these conditions, there is a risk of falling back into 'business as usual' ways of working.

"Our practice framework includes a 'concern list'. [Sunshine Project] has got me thinking about this - is sitting down and listing all the things that are s\*\*t for you, without any power to change these things, really help? I'm going to unpack this and see if we can change it."  
(Service worker)

"One of the closest to person-centred models that I've seen."  
(Service worker)

# Appendices

# Appendix 1: Survey tools

The Sunshine Project team adopted Standard Client/Community Outcomes Reporting (SCORE) outcomes provided by the Australian Government Family and Relationship Services for their pre- and mid/post-program client questionnaires. The questionnaire template is provided below.

## Sunshine Families (FaRS): Client Survey

Circumstances	1.	2.	3.	4.	5.
<b>Mental health, wellbeing, &amp; self-care</b>	My mental health is very poor and this has a profound negative impact on my daily life. <input type="checkbox"/>	My mental health is quite poor and this has a negative impact on my daily life. <input type="checkbox"/>	My mental health is okay and only sometimes negatively impacts my daily life. <input type="checkbox"/>	My mental health is quite good and only occasionally impacts my daily life. <input type="checkbox"/>	My mental health is very good and rarely if ever negatively impacts my daily life. <input type="checkbox"/>
<b>Community participation &amp; networks</b>	I feel very isolated. I have very little contact with friends, family, or people in the community. I have no support. <input type="checkbox"/>	I feel fairly isolated. I have little contact with friends, family, or people in the community. I have little support. <input type="checkbox"/>	I feel somewhat connected. I have some contact with friends, family, or people in the community. I have some support. <input type="checkbox"/>	I feel fairly connected. I have a reasonable amount of contact with friends, family, or people in the community. I have pretty good support. <input type="checkbox"/>	I feel very connected. I have a lot of contact with friends or family, or people in the community. I have great support. <input type="checkbox"/>
<b>Family Functioning</b>	I don't get along with my family and have a lot of conflict. This has a profound negative impact on my daily life. <input type="checkbox"/>	I have some difficulty getting along with my family. This has a negative impact on my daily life. <input type="checkbox"/>	Sometimes I don't get along with or communicate well with my family, but this is improving. <input type="checkbox"/>	I get along with and communicate well with my family. I have difficulties only occasionally. <input type="checkbox"/>	I get along and communicate very well with my family, and this has positive impacts on my daily life. <input type="checkbox"/>
<b>Material wellbeing</b>	I have no access to the basic material resources I need like food, clothes, transport, or keeping warm. <input type="checkbox"/>	I have access to some of the basic material resources I need, but sometimes I need to decide which resources to go without. <input type="checkbox"/>	I think I am 'getting along' and generally I have access to most of the basic material resources I need. <input type="checkbox"/>	I think I am 'reasonably comfortable' and have access to the material resources I need. I don't go without resources such as food, clothes, transport, or keeping warm. <input type="checkbox"/>	I think I am 'very comfortable' and that I have access to all the material resources I need. <input type="checkbox"/>

# Appendix 1: Survey tools

## Sunshine Families (FaRS): Client Survey (cont.)

Goals	1.	2.	3.	4.	5.
<b>Relates to the reason you are here.</b>					
<b>Knowledge</b>	I know nothing about the issues I sought help with or how to improve my current circumstances. <input type="checkbox"/>	I know a little about the areas relevant to meeting my needs and improving my current circumstances. <input type="checkbox"/>	I have reasonable knowledge in the areas relevant to meeting my needs and improving my circumstances. <input type="checkbox"/>	I have good knowledge in the areas relevant to meeting my needs and improving my current circumstances. <input type="checkbox"/>	I have very good knowledge in the areas relevant to meeting my needs and improving my current circumstances. <input type="checkbox"/>
<b>Empowerment, choice &amp; control to make own decisions</b>	I have no confidence to make decisions that improve my circumstances. This lack of confidence has profound negative impacts. <input type="checkbox"/>	I have limited confidence and limited power to make decisions that improve my circumstances. This lack of confidence and choice has negative impacts. <input type="checkbox"/>	I have some confidence and some control in making decisions that improve my circumstances. At times a lack of confidence and choice has a negative impact. <input type="checkbox"/>	Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. A lack of confidence rarely has negative impacts. <input type="checkbox"/>	I have very good confidence and feel empowered to make decisions that improve my circumstances. <input type="checkbox"/>
<b>Engagement with relevant support services</b>	I have a lot of difficulty engaging and working with services to help me improve my circumstances. <input type="checkbox"/>	I have some difficulty engaging and working with services to help me improve my circumstances. <input type="checkbox"/>	I occasionally have difficulty engaging and working with services to help me improve my circumstances. <input type="checkbox"/>	I seldom have difficulty engaging and working with services to help me improve my circumstances. <input type="checkbox"/>	It is easy to work with services to help me improve my circumstances. I rarely have difficulties. <input type="checkbox"/>
<b>Impact of immediate crisis</b>	Right now, I am facing a crisis that I struggle to cope with and this has a negative impact on my life. <input type="checkbox"/>	The immediate crisis I am facing is difficult and has a negative impact on my life. I am interested in improving this. <input type="checkbox"/>	The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. <input type="checkbox"/>	The crisis I am facing is lessening and the service I am working with has helped me improve this. <input type="checkbox"/>	I am no longer facing an immediate crisis and the service helped me manage this. <input type="checkbox"/>

# Appendix 1: Survey tools

## Sunshine Families (FaRS): Client Survey (cont.)

Satisfaction (only complete if mid/post survey)

Satisfaction	1. Disagree	2. Tend to Disagree	3. Neither Agree nor Disagree	4. Tend to Agree	5. Agree
<b>The service listened to me and understood my issues.</b>	The service does not listen or understand my issues at all. <input type="checkbox"/>	The service listens a little bit or understands some of my issues. <input type="checkbox"/>	The service sometimes listens or understands my issues. <input type="checkbox"/>	The service listens to me and understands my issues a lot of the time. <input type="checkbox"/>	The service always listens to me and understands my issues. <input type="checkbox"/>
<b>I am satisfied with the services I have received.</b>	I am not satisfied. <input type="checkbox"/>	I am a little satisfied. <input type="checkbox"/>	The service was okay. <input type="checkbox"/>	I am mostly satisfied. <input type="checkbox"/>	I am very satisfied. <input type="checkbox"/>
<b>I am better able to deal with my issues that I sought help with.</b>	My ability to deal with the issues I sought help with is the same. <input type="checkbox"/>	I can occasionally deal with the issues I sought help with. <input type="checkbox"/>	Sometimes I can deal with the issues I sought help with. <input type="checkbox"/>	Most often I am able to deal with the issues I sought help with. <input type="checkbox"/>	I am always able to deal with the issues I sought help with. <input type="checkbox"/>

# Appendix 1: Survey tools

In addition to the Sunshine Families (FaRS) pre- and mid/post- surveys, the Sunshine Project team asked all families to complete a bespoke client questionnaire addressing key points about the Sunshine approach. This was administered in mid 2023.

## Sunshine 'How are we doing?' Survey

Q1. Do you feel more hopeful about your family's future than you did a year ago? Did we help? Tell us more about this.

Q2. Overall, do you feel things have got better over the past year? What has made it better (or not)?

Q3. What things have you done in the past few months, that you are most proud of?

Q4.a) Do you feel like you and your family are growing new aspects of your good life? Select any which apply:

- More able to meet our basic needs- we're out of crisis mode and have a plan. We're connecting and improving our family relationships, or making new connections outside home
- We're healing and have access formal and informal supports
- We are using our gifts and talents- the things we're good at and bring us joy

Q4.b) Did we help with any of this? Tell us more.

Q5. What aspects of the Sunshine Project have been most helpful to you? Choose your top 5:

- Flexible worker who can meet at a time and place that works for you
- Practical hands on help
- Your Good Life Vision and Family's Plan
- Emergency Relief to pay some urgent bills in a crisis
- Brokerage money to invest in growing your family's good life
- Quests-getting paid incentives to tackle your stretch goals
- Connecting up other services to help you
- Participating in the co-design process itself
- Other extra things

# Appendix 1: Survey tools

## Sunshine 'How are we doing?' Survey (cont.)

Q6. How well are we doing in the way we work with you? (1-terrible to 5-amazing)

- Inclusive and understanding- no judgement
- Listen well, curious and learning
- Flexible, work with family in their context
- Build trusted relationships
- Family led- put power in the family's hands
- Create possibility, focus on potential, develop capabilities, grow the good
- Families are better off because of Sunshine Project

# Appendix 2: Cost-benefit methodology notes

Category	Notes and detailed assumptions
(1) Employment earnings	<p>Savings per person: \$25,708 pa, consists of base rate of Parenting Payment Single: \$25,708 pa. The taxation gains as well as other benefits such as reduced Family Tax Benefits are not counted; these would represent additional savings.</p> <p>Reference: A Guide to Australian Government Payments (Total rate of Parenting Payment Single, including basic Pension Supplement and Pharmaceutical Allowance. September-December 2023.</p>
(2) Avoided child protection involvement	<p>The inclusion of costs avoided from child protection costs avoided does not and should not be taken to mean that there is any doubt all parents in these families are good parents. What is known is that child protection can become involved in situations where families find themselves, due to reasons including poverty and violence, exposed to housing loss. For this reason, where we identified that Sunshine had avoided homelessness (in 4 cases), we have also considered what the avoided costs in terms of child protection could be.</p> <p>We have used two sets of figures:</p> <p>Option 1: average cost of protective intervention (no order) per child: \$4,224.</p> <p>Option 2: average cost of out of home care (with orders) per child: \$59,292.</p> <p>Reference: <u>The economic case for early intervention in the child protection and out-of-home care system in Victoria (SVA, 2019)</u></p> <p>The first is used to construct a 'light' child protection scenario, involving an investigation but no order. The second is used to construct a 'heavy' child protection scenario, involving children taken into care. Note: The figures are presented as per child, however here they have been applied per family as presumably there would be some reduction in costs for multiple children in the family, the value of which is not known.</p>

# Appendix 2: Cost-benefit methodology notes

Category	Notes and detailed assumptions
(3) Savings due to avoided homelessness	<p>To quantify the value of this, we have used data on the cost and impact of providing Specialist Homelessness Support (SHS) services by cohort, sourced from <a href="#">The cost of homelessness and the net benefit of homelessness programs: A national study</a>. (Zaretsky &amp; Flatau, 2013) AHURI final report 218.</p> <p>The study contains 2 cohorts: a group that presented in need of tenancy support only (i.e., support to maintain their tenancy) and another cohort, being women in need of housing support (they had lost their tenancy). (Note: a third cohort consists of men in need of housing. This was not used).</p> <p>This analysis shows that cohorts presenting in need of housing involve additional costs not only in terms of providing housing services, but also have higher health costs and higher legal costs than those presenting in need of tenancy services - in other words, if homelessness is allowed to continue, there are flow-on costs to health and legal services.</p> <p>The methodology for assessing the Project is based on the assumption that the Project did not necessarily avoid homelessness, but that it avoided the decline from being in need of tenancy support to being homeless - the situation that families report.</p> <p>The costs saved are therefore assessed as the difference between the two cohorts - i.e. the cost of providing SHS services that were not required (\$4,003 per person), plus the flow-on difference between the two groups in health and legal spending. Of note is that the SHS study found that, once the housing crisis has passed, <i>additional</i> health spending was incurred in the form of prevention services (\$4,567), but costs were avoided in tertiary/emergency areas (\$12,312). This methodology thus accounts for the increase in use of preventative services reported by Sunshine families.</p> <p>The costs also include decreased (not housed) and increased (housed) use of justice costs. While there is fewer detail in the study relating to this, again we assume this relates to reduced use of crisis services, but increased use of non-crisis services - such as seeking Family Violence Restraining Orders (FVROs), seeking legal redress, and so on.</p> <p>All figures were updated for Consumer Price Index (CPI) from 2010 to 2022.</p>

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of intensive case management (in youth offending)***

Final Report: Evaluation of Intensive Case Management, Nous (for the Department of Children, Youth Justice and Multicultural Affairs) 2023.

This study suggested that a more tailored and specialised case work model was effective in reducing criminal activity among young offenders. It also quantified the benefits associated with avoiding youth offending, including for the justice system as well as for those not affected by crime.

- The program evaluated was the Intensive Case Management (ICM) Program, which aims to reduce youth re-offending through addressing the multiple factors that impact on chronic youth offending, including substance abuse.
- The model is based on provides young people with higher levels of offending with intensive, family-led, and therapeutic support. It is a more intensive case-work model, which include high intensity cognitive behaviour therapies, youth support and family work sessions. Support is also provided to parents and siblings to address familial risk factors. Other It also included elements such as offence profiling to better understand offending patterns.
- The cost was calculated (from 2019-22) at \$7.4m. Costs related to the ICM program employee expenses and supplies. The report notes that this understates the cost of delivering the program, as the program drew on multiple other services - e.g. external stakeholders providing wrap around supports, training, counselling and so on, which were not accounted for.
- The benefits considered were reduced costs for the criminal justice system (\$8.1m to \$15.7m), and the benefits of reduced property damage and injury for crimes that are not committed (added to the initial benefits, taking total benefits to \$9.8m to \$19.1m).
- Compared to other young people who have been involved in the justice system, the ICM cohort had a 22% median reduction in frequency of offending, and 59% median reduction in crimes against the person. The benefits exceeded the costs by around 1.3 to 2.6.
- The report notes there are other replacement costs - for example, the young people might have accessed education or government programs on their own. This was not accounted for.
- There were also found to be improvements in terms of family circumstances, education and employment and family functioning as well as pro-social behaviour and possibly reduced offending among siblings. The value of these was not quantified in this study.

# Appendix 3: Evidence used in cost-benefit methodology

## **Costs and benefits of avoiding homelessness**

The cost of homelessness and the net benefit of homelessness programs: A national study. (Zaretsky & Flatau, 2013) AHURI Final Report No.218.

This study examines changing patterns of service use for clients before and after accessing specialist homelessness services (SHS). Following intervention, they go on to experience a somewhat improved financial situation (despite ongoing vulnerability); reduced use of tertiary health; and increased use of preventative health services. There are also improvements in areas such as social relationships and life satisfaction. The characteristics of the client group would be similar to some of those for Sunshine Project participants.

- This study (covering NSW, SA, Victoria and WA) assessed the benefits and costs of specialist homelessness support (SHS) interventions, by considering the change in service use (housing, justice, employment, income support and health) before and 12 months post service use.
- It shows high use of services by people who are homeless, including justice services, child protection, and hospital stays at entry.
- The costs considered are the costs of providing supported accommodation (support and capital cost) services, which was \$4,890, and for tenancy support (not including housing) \$2,027 per client.
- The benefits measured and quantified are:
  - Reduced justice costs: on average a benefit from reduced offending, although the study noted that a large proportion of the costs came from the small number of participants who had engaged in criminal activities
  - Changes in health costs: As people with high health costs reduced these, and others increased their use of preventative services.
- The study showed actual benefits (cost offsets over costs of service provision) was on average \$3,685 per year, however there were considerable differences by cohort: single men accessing supported accommodation (benefit of \$1,389, primarily due to reduced justice involvement) compared to single women in supported accommodation (benefit of \$8,920, mainly due to decreased health use). Those using only tenancy support were a net cost (not benefit) of \$1,934, as stable housing led to these clients accessing primary services they had not been before. The study noted that this should reduce future costs (from avoided health costs), but that this was not captured here.
- The study also showed avoided homelessness was associated with improved social relationships and general improvement in overall satisfaction with life, which was also not quantified.
- The study also highlighted a slightly improved financial situation for participants, due to a small improvement in employment outcomes, noting the majority of participants remained in receipt of income support and in a precarious financial situation. Only 40 per cent reported feeling better about their financial situation compared to prior to support and the majority continued to report housing vulnerability.

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of intensive case management (in reducing income support payments)***

Cost-effectiveness of intensive case management services, Te Manatu Whakahiato Ora / Ministry of Social Development, Aotearoa, June 2019 and associated [website](#).

This study indicated that a more intensive and relationship-based approach for income support recipients in New Zealand generally led to reduced time on benefits and income support cost savings over a typical case work model. It was particularly effective for sole parents and those with complex issues, although less effective for clients with disabilities and mental health issues.

- The program evaluated was Intensive case management services provided to people receiving income support. The differences to what was provided otherwise revolved around the inclusion of: specialised case management by case managers, smaller caseloads (40-60), and a more holistic approach.
- The reviews of the program identified that participants felt they were treated 'more like a person' than they previously had been, with case managers being more empathetic and non-judgemental. There was also the expectation that case managers would have strong networks to refer participants to additional supports.
- In terms of cost/benefit quantification, the study considered a relatively limited set of costs and benefits. Specifically, it considered the costs of providing case management in a different way, compared to the avoided future costs of case management and reduced income support outlays where participants obtained work. It did not consider the wider benefits to participants and society of working (income and taxes paid, for example).
- The investment considered consisted of expenditure on staff time and contract and subsidy payments for employment assistance.
- The returns consisted of reduced case management expenditure due to earlier exit from the program, and reduced income support payments through people leaving benefits sooner.
- The study provided costs/benefits by cohort groups. It found that the quantified benefits of more intensive case work were greatest for sole parents (2.49) - both because they were more likely to reduce their days receiving benefits, and they were paid a higher amount on benefits - meaning the avoided costs were greater. They were also higher than the average for those with complex issues and barriers to employment (2.71) Benefits were smaller for people with disabilities (1.2) and those with health and mental health (0.70) issues - perhaps because the structural barriers that these people face to working were not overcome within the model.
- The evaluation showed that success for participants was strongly associated with a strong relationship with the case manager.

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of avoiding addictions***

Understanding the costs of addiction in Australia. (KPMG, 2022)

This study provides an assessment of the costs borne by state and territory systems of addictions, including the problematic use of alcohol and tobacco.

- This study estimates the total cost of addictions in Australia at \$80 billion in 2021 - which they note is adjusted for the overlap in costs between multiple addictions. This refers to tangible costs - being costs for which a market price exists, excluding the cost of 'life lost', such as quality of life lost, premature illness, pain and suffering.
- Within this, the identify the following costs by substance (noting there is adjustment for double counting):
  - Tobacco: \$35.8 billion
  - Alcohol: \$22.6 billion
  - Other drugs: \$12.9 billion
  - Gambling: \$10.7 billion
- The costs accrue in the following areas:
  - Workplace and household activity: \$35.8 billion
  - Harmful consumption: \$16.9 billion
  - Justice and law enforcement: \$12.9 billion
  - Health care: \$8.1 billion
  - Social services: \$2.4 billion
  - Family & others: \$1.6 billion

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of intensive case management (in improving mental functioning)***

Intensive case management, a cost-effectiveness analysis. (Johnston et al, 1998, Australian and New Zealand Journal of Psychiatry)

While dated, this study suggests that more intensive case work is effective in improving functioning of people with mental illness. While the clients continued to access mental health services, there was a shift from more expensive and unplanned tertiary / crisis services to less expensive planned services.

- The program evaluated was a more intensive form of case management for people with severe mental illnesses. In the trial, case workers had caseloads of 8-10 patients, rather than the routine 20-40.
- The study showed that the intensively case managed group had higher rates of functionality after 12 months. They were also more likely to access other services, including general outpatient care, supported accommodation services, and other social services, and were less likely to be involved in harm to themselves or others, less likely to be involved with police or legal services.

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of reducing domestic and family violence***

The cost of violence against women and their children in Australia (KPMG, 2016)

This study highlights the significant and multifaceted costs of domestic violence across our community, and specifies where these costs appear (particularly areas such as economic loss (from debts/bad debts), public and private health sectors, justice and transfer (income support) payments. It also notes the high impact of DV for the SHS sector. It also highlights intergenerational impacts for children who who experienced violence.

- This study provides the following costs of violence against women and their children in Australia:
  - \$1.4 billion from costs in the private and public health sectors (the use of hospital and health services)
  - \$1.9 billion on costs to the business sector (e.g. from absenteeism, inability to perform paid and voluntary tasks)
  - \$4.4 billion on economic opportunities lost (including from accumulation of debts / bad debts)
  - \$10.4 billion, a value put on pain and suffering.
  - \$1.7 billion for justice and related services
  - \$1.6 billion in transfer payment costs (additional income support costs and victim compensation payments).
- This study notes that these costs are disproportionately born by specific groups of women, including Aboriginal and Torres Strait Islander women, women with disabilities, culturally and linguistically diverse women, women identifying as LGBTIQ, and pregnant women.
- It also notes that access to homelessness services by women who have experienced violence costs around \$407 million, with around two-thirds of people accessing SHS services in 2003-04 being women leaving violence.
- Further, it notes the cost of \$333 million for second generational impacts on children who have experienced violence (psychological and behavioural issues, and impacted wellbeing and development), with children who have witnessed violence far more likely to experience and perpetrate violence in adult relationships.

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs and benefits of reducing entries into child protection***

The economic case for early intervention in the child protection and out-of-home care system in Victoria (Social Ventures Australia, 2019)

This study provides quantifications of the costs of taking children into care. It also highlights the intergenerational costs to children and to society that too often result from care involvement - such as drug and alcohol misuse, homelessness and justice involvement.

- This study provides indicative costs for child protection involvement, relating to the receipt and assessment of notifications, conducting investigations, protective interventions. This provides costs for a child protection case (all per case, 2017-18) are:
  - Receipt and assessment of notifications: \$513
  - Conduct investigation: \$1,789
  - Protective interventions (children not on order): \$4,224
  - Issuing a care and protection order: \$13,080
  - Protective intervention (children in order): \$6,254
  - Child in out of home care: \$59,292
  - Child in Kinship care: \$44,000
  - Child in Third Party care: \$62,000
  - Child in foster care: \$70,000
  - Child in residential care: \$345,200
- The study notes that costs of care exceed this due to the likelihood of continuing costs after care, for example:
  - Probability of arrest in a given year of 16.3%
  - Probability of alcohol and drug dependence of 15.8%
  - Probability of homelessness 39%
  - Probability of experiencing hospital admission of 29.2%

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs of late action for children and young people***

How Australia can invest in children and return more. (Telethon Kids Institute, 2019)

Highlights the cost of failing to intervene early for children in the longer-term, and specifies the proportion of this cost being met by state/territory budgets from these failures to intervene.

- This study provided an assessment of the cost of late action (i.e. failure to intervene at the earliest opportunity) for children and young people in Australia.
- It identified the total cost of \$15.2 billion costs of not acting early as falling in the areas of (noting the below include double counting that has been adjusted for in the total):
  - Out of home care (\$5.9 billion)
  - Police, court and health costs of youth crime (\$2.7 billion)
  - Income support payments for young people who are not working (\$2.0 billion)
  - Youth and adult justice (\$1.5 billion)
  - Youth homelessness (\$1.4 billion)
  - Mental health (\$1.3 billion)
  - Physical health (\$1.1 billion)
  - Family violence (\$0.3 billion)
- It noted the majority of these costs are incurred for children who live in disadvantaged regions.
- They further note that around \$12 billion of the \$15 billion total is borne by the states and territories.

# Appendix 3: Evidence used in cost-benefit methodology

## ***Costs of accessing high-cost debt***

Payday Lending Report. (Stop the Debt Trap Alliance, 2019)

Discusses the growth in payday lending in Australia in past years and the impact on finances for households affected.

- Small amount credit contracts - also known widely as payday loans - are high cost, fast loans paid back over periods of several days to 12 months. The loans typically involve high fees and charges that result in equivalent interest rates of between 112% and 407%. Australians often take out these loans because of a short-term financial crisis, but can find themselves quickly mired in a debt spiral that becomes impossible to get out of.
- Between 2016 and 2019, the number of loans increased from around 100,000 per month to around 135,000 per month, with the value of new loans increasing from \$61 million to \$84 million.
- In 2019, of the 954,000 households with payday loans, 554,000 were classified as 'financially stressed' - under pressure, but getting by. While 400,000 were considered 'financially distressed' - those who are falling further behind, exhibit chronic repeat behaviour and are generally not able to meet their commitments.
- WA had the second highest growth rate in payday loans in Australia (after Tasmania), at 13.5% growth (between January to July 2019), with 101,563 new loans written in that six month period, for a value of \$9.1 million.
- Women and single mothers are particularly vulnerable to using payday lenders, and their use by women is growing at a faster rate than men.

# Contact us

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