Family and Community Services Insights, Analysis and Research (FACSIAR)

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Key findings from an Evidence Check exploring programs to address youth homelessness

In 2021, the Department of Communities and Justice (DCJ) contracted researchers from Deakin University and the University of Melbourne to conduct an Evidence Check exploring the effectiveness of programs that support unaccompanied children and young people who are homeless or at risk of homelessness. The Evidence Check, Evidence on programs to address youth homelessness was released in May 2022.

The Evidence Check involved a literature search of peer-refereed systematic reviews and evaluations and published grey literature. Ten programs that met the criteria for inclusion in the review were identified. A further ten programs, some of which are being trialled or implemented in Australia, were included at the



request of DCJ. The review found no evidence-based programs focused specifically on homelessness prevention or interventions for unaccompanied homeless youth. However, some family therapy and intensive case management approaches showed positive effects on housing outcomes and relationships for vulnerable children and young people experiencing similar challenges as those accessing specialist homelessness services.

An **Evidence Check** is a synthesis, summary and analysis of the best and most relevant research evidence to inform policy and program design.



What did the Evidence Check find?

The evidence for included programs was rated using a 'thumbs' rating scale developed by the researchers. Of the 20 included programs, four programs were rated as 'evidence based' (2 or 3 thumbs rating), seven programs were rated as 'promising' (1 thumb rating) and the remaining nine programs were rated as 'insufficient evidence' (Question mark or No evaluation evidence ratings) (see Box 1).



The 20 included programs were categorised as follows in descending order of evidence: family therapy and support, intensive case management, service capacity building and early intervention. While many of the programs have elements that cross over multiple themes, the included programs were categorised based on their primary focus. The majority of programs were delivered to children and young people already receiving support from child and welfare services, which means these findings are not readily generalisable to homeless youth residing out of these settings or unaccompanied homeless youth.

Box 1: Criteria for assessing the evidence

Let let 'Evidence-based': Three or more RCTs, supplemented with high quality quasi-experimental evaluations.

Let 'Evidence-based': Two RCTs, supplemented with high quality quasi-experimental evaluations.

• **Promising':** At least one RCT, supplemented with high quality quasi-experimental evaluations.

? 'Insufficient evidence': Limited evaluation evidence characterised by low quality evaluations or implementation at only one intervention site.

No evaluation evidence 'Insufficient evidence': No evaluations of sufficient quality to provide indications of effectiveness.



Family therapy showed positive effects on improving housing and family reunification outcomes

Of the four family therapy and support programs that met the inclusion criteria, three programs (Intensive Family Preservation, Functional Family Therapy – FFT and On the Way Home) were rated as 'evidence-based'.

What works?

Intensive Family Preservation, FFT and On the Way Home were delivered to young people receiving child welfare support services (e.g. in residential/out-of-home care). The evaluations found family therapy and support were effective in improving housing outcomes ¹²³⁴ and family reunification outcomes. ⁵⁶⁷⁸⁹¹⁰ These outcomes include reduced out-of-home care placement, reduced referral for child welfare problems (e.g. report of child abuse), reduced family conflict, and building safe and supportive relationships within the family and broader community.

What does the remaining evidence tell us?

One family therapy and support program delivered in NSW (Youth Hope) was included at the request of DCJ. Due to a lack of published evaluations of Youth Hope, there is no evidence that this program has a positive effect on housing and family reunification outcomes for children who are homeless or at risk of homelessness.



Some intensive case management interventions showed positive effects on out-of-home care placements, housing stability, supportive relationships, and other psychosocial outcomes

Eight case management programs were identified, with five of these programs meeting the inclusion criteria and three included at the request of DCJ. Only Multisystemic Therapy (MST) including Multisystemic Therapy for Child Abuse and Neglect (MST-CAN) was rated as 'evidence-based'.

What works?

Two RCTs examining MST showed reduced out-of-home care placements in the intervention groups compared to the comparison groups. One RCT examining MST-CAN showed young people receiving MST-CAN were less likely to experience an out-of-home care placement and had fewer out-of-home care placement changes compared to the comparison group. While MST received a three thumbs rating, this program did not specifically evaluate housing outcomes for children who are homeless or at risk of homelessness.

Six programs were rated as 'promising' (Treatment Foster Care Oregon, Take Charge/Better Futures, Pathway Program – PPP, YV LifeSet, North Carolina Independent Living and My Life), with four of these programs delivered to young people receiving child welfare support. Treatment Foster Care

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Oregon showed improved family reunification outcomes. Other outcomes included reduced running away from care placements, improved parent-child interactions, and building relationships with prosocial peers. Take Charge/Better Futures showed similar outcomes in relation to peer social support. PPP and YV LifeSet showed reduced out-of-home care placements in the intervention group, improved housing stability (without there being a specific housing intervention) and placements in safe and stable housing, as well as improvements in independent living skills. Other positive psychosocial outcomes included less contact with the justice system and less engagement in antisocial behaviour, improved educational attainment, for reduced mental ill-health, and the development of supportive relationships.

What does the remaining evidence tell us?

One program (Transition to Independence Process – TIP) was supported by two less rigorous studies and was rated as having 'insufficient evidence'.



There was limited evidence that service capacity building frameworks have significant effects on homelessness, housing or family reunification outcomes

Of the four service capacity building programs identified (Ruby's, Behavior Analysis Services Program – BASP, Sanctuary and Creating Ongoing Relationships Effectively – CORE), one program met the inclusion criteria and three were included at the request of DCJ. There was limited evidence, across all four programs, of positive effects on housing outcomes or family reunification. Positive effects on the development of supportive relationships were evident in the CORE program. In the BASP program, improvements in housing stability were observed where young people in foster care settings received targeted support. Available evaluations of the Sanctuary model found few differences between the intervention and control groups and did not examine outcomes relevant to housing/homelessness. Ruby's program had no published evaluative evidence available for assessment.



There was no available evidence for the effectiveness of early intervention programs in reducing youth homelessness

All four of the early intervention programs included in this Evidence Check (The Geelong Project – TGP/Universal Screening, Youth Foyers, Premier's Youth Initiative and Reconnect) were locally implemented programs included at the request of DCJ. As these programs did not have published pilot data, had not been evaluated, or had been implemented at only one intervention site, there was insufficient evidence for the effectiveness of early intervention programs for young people experiencing homelessness. Although some improvements were reported for educational outcomes (reduced early school leaving) and non-entry into the homelessness service system in The Geelong Project, implementation at only one intervention site and the absence of a control condition and a comparison group means the effectiveness of the program remains unclear.²⁰

What's next?

While family therapy and intensive case management showed positive effects on housing outcomes and relationships for vulnerable children and young people, none of the included programs targeted homelessness prevention or intervention for unaccompanied homeless children and most were not specifically designed for targeted delivery to youth at risk of, or experiencing, homelessness. Further investment in targeted programs with well-designed and rigorous evaluations is warranted to understand what works for these children and young people.

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Endnotes

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