

Supporting Families Facing Homelessness:

Centrecare's Entrypoint Outreach Program

Summary



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Centrecare's Entrypoint Outreach Program

Centrecare's Entrypoint Outreach Program (EPO) was a preventative early intervention pilot funded by Lotterywest designed to divert families and individuals from homelessness into housing. The brief intervention (2–6 weeks) targeted families who were newly homeless or were at immediate risk of homelessness in a very tight rental market.

Objectives



- Prevent and reduce homelessness by lowering clients' barriers to accessing or maintaining housing.
- Increase the speed with which accommodation could be obtained.
- Alleviate pressure on the homelessness system and mainstream housing services by diverting people away from them.

Housing and homelessness in Perth, Western Australia



- Long waiting lists for public and community housing.
- High rates of homelessness and new entry into homelessness.
- Historically high private rental market rents and low vacancy rates.
- Cost-of-living pressures.

Program Participation



290 contacted
primary clients

- Families: 249 (86%)
- Female: 169 (58%)
- Indigenous: 48 (17%)
- Family Domestic Violence: 72 (25%)

950 people

370 adults

580 children

Wellbeing outcomes

Centrecare's EPO was able to positively affect life trajectories through advice and information, housing support, advocacy, encouragement, guidance, life and tenancy skills development, and individual development plans.



- Extreme distress dropped from 78% of clients pre-program to 37% of clients post-program.
- Increased happiness.
- Increased safety.
- Increased life satisfaction.
- Improved family functioning.
- Increased hope.

Housing outcomes

Decreased barriers

Reduced housing barriers through:

- Improved knowledge of rental search and application processes.
- Skills development, references, improved planning for rental entries/exits, increased awareness of rental inspection property standards.
- Centrecare's advocacy with real estate agents.

- **93%** of families felt confident in their ability to apply for housing on program exit.



Housing status on entry

51% people experiencing homelessness

49% at immediate risk of homelessness

■ Rough sleeping ■ Couch surfing ■ Short-term accommodation ■ Public or community housing
■ Private housing ■ Institutional settings ■ Other



Housing status on exit

48% increase in permanent housing

■ Rough sleeping ■ Couch surfing ■ Short-term accommodation ■ Public or community housing
■ Private housing ■ Institutional settings ■ Not stated/other



83% *avoided* homelessness

(of those at immediate risk of homelessness on entry)

- **156 adults**
- **232 children**

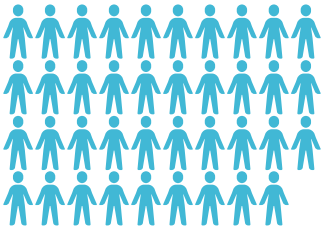
58% *exited* homelessness

(of those who were homeless on entry)

- **105 adults**
- **170 children**

Of 143 cases who were at immediate risk of homelessness on entry, 119 had avoided homelessness on program exit (156 adults, 232 children). Of 147 cases who were already homeless on entry, 86 were housed on exit (105 adults, 170 children).

Family Domestic Violence



- Families: 72
- Women: 70 (97%)
- Women with children: 61 (85%)
- Children: 149

Housing stability

93% not returning to a violent situation

89% felt safe and supported

Program entry

64% people experiencing homelessness

36% at immediate risk of homelessness



- Housed: 65%
- Private housing: 21% increase
- Couch surfing: 32% decrease

Program exit

System-level outcomes

Rapid outcomes at low cost

Average cost per support period - \$2,354, compared to an estimated WA SHS expenditure of \$3,015 per completed support period. Average cost per person \$723 (including children).

Client diversion away from chronic homelessness

- Avoid high average health and justice costs.
- Low reliance on the strained public housing system or stretched homelessness support system.

Why was Centrecare's EPO successful?

"A new low-cost early intervention approach that complements existing strategies to end homelessness."

1. Centrecare's existing relationships with stakeholders facilitated a collaborative, networked approach.
2. Centrecare's strong reputation in providing effective responses to vulnerable populations.
3. The program was well regarded by community workers.
4. The service was individualised, flexible, and holistic.