



Sir David Martin Foundation
Helping young people in crisis

Triple Care Farm

Baseline Social Return on Investment

FULL REPORT

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Prepared by: SOCIAL VENTURES AUSTRALIA (SVA) CONSULTING

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About Social Ventures Australia

Social Ventures Australia (SVA) works with innovative partners to invest in social change. We help to create better education and employment outcomes for disadvantaged Australians by bringing the best of business to the for purpose sector, and by working with partners to strategically invest capital and expertise. SVA Consulting shares evidence and knowledge to build for purpose sector capacity. SVA Impact Investing introduces new capital and innovative financial models to help solve entrenched problems. SVA Consulting partners with non-profits, philanthropists, corporations and governments to strengthen their capabilities and capacity to address pressing social problems.

SVA Consulting is a specialist consulting practice that partners with social purpose organisations to strengthen their ability to address social issues and achieve results. We support leaders to make hard decisions, galvanise teams to sustain success and share insights with the social sector. Since 2007, we have developed unique, on-the-ground experience supporting over 300 clients through 550 engagements. We work on society's most challenging issues including health, disability, housing, employment, education and Indigenous disadvantage.

We measure our success by the results our clients achieve. Our people are passionate about the work they do and the opportunity to create a better Australia.



Executive Summary

About Triple Care Farm

Triple Care Farm (TCF) is a Mission Australia residential Alcohol and Other Drugs (AOD) rehabilitation and treatment program for young people aged between 16 and 24 years. Located on 110 acres in the NSW Southern Highlands, TCF is a national service receiving referrals Australia-wide. The program specialises in treating young people with co-morbid mental illness and drug and alcohol problems. The treatment model is a holistic psychosocial rehabilitation based on harm minimisation and health promotion.

Triple Care Farm's vision is to provide **“a safe place for change”** and the program operates with the goal of treating every student as an individual, catering for his or her specific needs in order to create **“A life worth living”**.

About the project

With the support and vision of Bill and Heather Webster and the Sir David Martin Foundation, Mission Australia commissioned Social Ventures Australia to understand measure and value the social and economic changes generated by Triple Care Farm. The Social Return on Investment (SROI) methodology was used to assess the outcomes created between the 2009 and 2013 financial years, and the investment made to generate those outcomes during this period. During the project, social, economic and cultural outcomes of the program were investigated. The analysis involved 57 consultations with stakeholders of Triple Care Farm including 32 past students, as well as a review of the program's financial, student enrolment and aftercare data.

Impact of Triple Care Farm

The young people who participate in the program are considered one of the most difficult cohorts to treat in the community services sector. In addition to a history of chronic and poly-drug use, the majority of young people present with a range of other complex challenges including mental illness, homelessness, criminal history, and unemployment.

Through its holistic model of treatment, Triple Care Farm supports young people to experience long-term changes across multiple life domains empowering them to live fulfilling and self-sufficient lives. These changes include sustained improvements in their physical health and wellbeing, stronger relationships with relatives and friends and engagement in education and / or employment.

Because of the changes experienced by 'Young people', their families / carers also benefit. The knowledge that their young person is being cared for in a safe environment reduces their anxiety for his / her immediate well-being and provides a valuable period of respite. Reconnecting with their young person throughout the program leads to improved communication which eventually helps to strengthen their family dynamic.

The Commonwealth and State Governments incur significant costs due to the harm caused by AOD misuse. In 2010 total government expenditure on prevention, treatment, harm reduction, law enforcement and research was estimated to exceed \$1.7bn¹. The treatment and care TCF provides to 'Young people' translates into substantial savings for the public purse. Specifically, there are fewer young people requiring acute hospital care or homelessness services and a large number are also diverted from entering or re-entering the justice system.

Finally, Triple Care Farm's commitment to sharing insights from its experience and contributing to improved best-practice informs Mission Australia's other AOD services and benefits the wider AOD

¹ 'Government drug policy expenditure in Australia – 2009/10', National Drug and Alcohol research centre, 2013

sector. Through TCF’s active involvement in Mission Australia’s AOD Community of Practice other service providers benefit from improved risk management practices and cost efficiencies from shared professional development and training.

Overall, the largest proportion of value generated by Triple Care Farm accrues to the young people who participate (63%). Notably, due to the extent of change that occurs for ‘Young people’, the value of the program for them alone is nearly twice the investment cost. More than a third of this value (37.5%) is attributable to outcomes relating to improvements in their Health & Wellbeing. This reflects the large number of young people who have been able to achieve a *maintained reduction of harmful AOD use*.

The majority of the remaining value accrues to Government; who while accounting for only ~13% of the investment cost of the program, benefit from more than 30% of the value created. The majority of this value is attributable to the potential resource allocation within the justice system. Specifically, by diverting 67 young people from detention during the investment period, Triple Care Farm generated ~\$9.2m in economic value.

Across FY09-13, \$13.5M was invested in Triple Care Farm (91% cash and 9% in-kind). This equates to approximately \$34k for each young person who participated in the program.

When the estimated \$39.5M in social value that was generated is compared with the \$13.5m investment, the SROI ratio equates to 2.9:1. This means for every \$1 that was invested in the program in FY09-13, approximately \$3 of social value was created. Figure S1.1 shows the relationship between the investment and value created.

As with any financial modelling, it is expected that changes to underlying assumptions will result in changes to the SROI ratio. In the high and low scenarios tested in the sensitivity analysis, the SROI ratio remains in the range of 1.7:1 to 3.4:1, indicating that - even with highly conservative assumptions – the social value created by Triple Care Farm is likely to be in excess of the investment.

Investment and value created by stakeholder group* (FY2009-13)

Millions of dollars

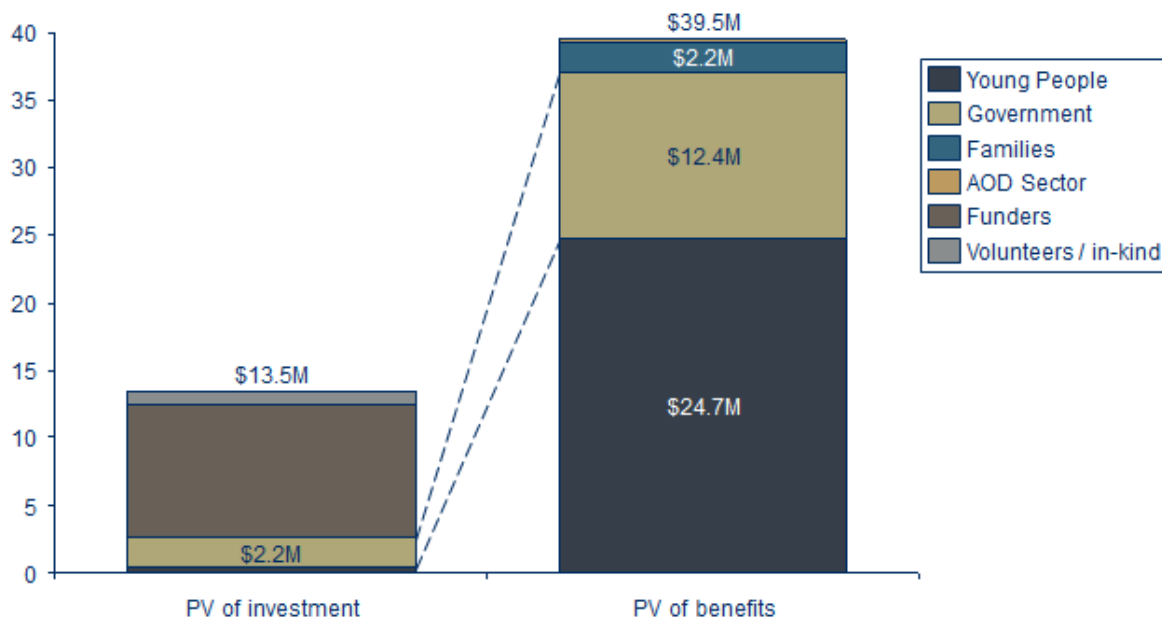


Table S1.1 – Value created for each stakeholder group

It should be noted that SROI ratios should not be compared between programs or organisations without having a clear understanding of each organisation’s mission, strategy, program logic, geographic location and stage of development. A judgement about investment decisions can only be made when using comparable data.

Insights from the analysis

Triple Care Farm’s vision is to provide young people experiencing co-morbid mental health and AOD issues with “a safe place for change” so that they can create “a life worth living”. The evidence provided by this analysis attests that the program is achieving this goal and has helped to change, if not save the lives of hundreds of young Australians. By consulting with those who have participated in the program over the last five years this analysis has shown that TCF has a significant long-term impact.

“...The Farm took away the mess and reminded me of who I was and where I wanted to go. They had faith in me and reminded me who I was and what I could do...”
– 2009 student

Triple Care Farm’s success has been built upon the strategic and evidence based design of its program. Five critical elements of this design are:

- **A holistic model of care** – Triple Care Farm recognises that to overcome AOD abuse and comorbid mental illness, young people require care that can address the range of issues they face. By providing treatment that includes counselling, medical care, case management, educational / vocational training and living skills, young people experience changes across a spectrum of life domains. Progress in one area supports change in another enabling young people to transform their own lives.
- **An individualised approach** – Within this structured holistic treatment model Triple Care Farm delivers a highly individualised program. Staff work with each young person to understand their specific needs and to help them set and progress towards achieving their own life goals. This approach empowers young people to take responsibility for their own lives, but gives them the support and tools they need to do so.
- **On-going support** – While the program provides its most intensive care for young people during their stay on the farm, the aftercare program provides essential ongoing support as they transition into their new lives. Going home can be a daunting time for young people who often find familiar circumstances and influences despite their new outlook and goals. Triple Care Farm’s Aftercare workers play a vital role in helping young people and their families navigate challenges as they arise and realise long-term improvements in their lives.
- **A commitment to continuous improvement** – Triple Care Farm has demonstrated a remarkable openness to critically review its activities and regularly assess itself against best-practice. As a result the program has, and continues to evolve as it seeks to continuously improve the outcomes it generates for young people. TCF’s willingness and commitment to sharing insights with the wider sector is making a valuable contribution towards increasing both the number and effectiveness of youth based AOD services in Australia.
- **Experienced and dedicated staff** – The success of Triple Care Farm is a strong reflection of the quality of its management and staff. Interviews with young people and their families consistently highlighted the dedication and professionalism of the program’s staff as one of its core strengths. Investing in professional development is a key element of the program’s commitment to continuous improvement. As a result, Triple Care Farm has built a team that is highly experienced and possesses significant expertise of youth related AOD issues.

1 Introduction

1.1 Project objective

With the support and vision of Bill and Heather Webster and the Sir David Martin Foundation, Mission Australia commissioned Social Ventures Australia to understand, measure and value the social and economic changes generated by Triple Care Farm. Triple Care Farm has already invested in building an evidence base of the program's effectiveness through multiple sources (i.e. on-going psychometric assessments, external reviews, and accreditation). The intent of this analysis was to gain a longitudinal understanding of the value of the program which could be shared with stakeholders and ultimately used to improve program delivery.

Specifically, there were three key objectives were identified at the outset of the project:

- Develop an improved understanding of the long-term impact of the program for the young people who participate and their families, and value the cost savings to government resulting from the service
- Identify differences in the outcomes experienced by young people and assess the effectiveness of different elements of the program
- Inform the ongoing development of TCF's measurement and evaluation approach and quality improvement process

The Social Return on Investment (SROI) methodology was used to complete this analysis. SROI is an internationally recognised methodology used to understand, measure and value the impact of a program or organisation. It is a form of cost-benefit analysis that examines the social, economic, cultural and environmental outcomes created and the costs of creating them. The principles of this approach are set out in Appendix 1.

1.2 SROI methodology

This project has been completed across the six stages presented in Table 1.1 below.

Stage	Description
Stage 1 Scope project	<ul style="list-style-type: none">• Define the project scope including boundaries, timing for analysis and stakeholders.• Gain ethics approval to conduct interviews
Stage 2 Understand change	<ul style="list-style-type: none">• Engage with stakeholders to understand the outcomes generated through the program. This includes testing the relationship between objectives, inputs, outputs and outcomes• Develop program logic and stakeholder logics
Stage 3 Measure change	<ul style="list-style-type: none">• Identify and measure the outcomes experienced by stakeholders through the program
Stage 4 Value change	<ul style="list-style-type: none">• Identify relevant indicators and financial proxies to value the outcomes• Define the investment for the program• Determine those aspects of change that would have happened anyway or are a result of other factors
Stage 5 Calculate the SROI	<ul style="list-style-type: none">• Calculate the outcomes and compare to the investment of the program
Stage 6 Reporting	<ul style="list-style-type: none">• Synthesise and present key findings

Table 1.1 – Project methodology

Stages 2, 3 and 4 (i.e. understand, measure and value stakeholder outcomes) are the key stages of the analysis. As part of each stage, a number of questions need to be considered. These are outlined in Table 1.2 below and are presented to highlight the types of areas explored through an SROI analysis.

Understand the change
<ul style="list-style-type: none"> ● What is the program logic? ● What is the stakeholder logic? ● What are the changes that matter most to the stakeholders? ● What are the links between the activities and different changes experienced by stakeholders? ● Are the changes consistent across regions and between stakeholder groups?
Measure the change
<ul style="list-style-type: none"> ● How do we know if changes have happened? ● How do we measure changes for stakeholders when there is limited data and evidence available?
Value the change
<ul style="list-style-type: none"> ● What is the value of the changes experienced by different stakeholders? ● Using financial proxies, how valuable is a particular change? ● How long does the change last for (drop off)? ● Would this value have been created anyway (deadweight)? ● Who else contributed to the value being created (attribution)? ● Did this value creation displace other value being created (displacement)? ● What does it cost to create this value?

Table 1.2 – Questions to consider when conducting an SROI analysis

1.3 Project boundaries and timing

There are two forms of SROI analyses described in the SROI Guide: a forecast and an evaluative SROI analysis.²

A forecast SROI analysis estimates the social value an organisation will create in the future. There is unlikely to be substantive evidence to support the value an organisation will create (because it has not happened yet).

An evaluative SROI analysis estimates the social value an organisation has created in the past. In contrast to a forecast SROI analysis, an evaluative SROI should be based on evidence that has been collected over time.

A baseline SROI analysis represents an alternative approach that assesses the value the organisation believes it created in the past, validated by the views of stakeholders, and provides a useful snapshot of the impact an organisation has created. This can be used as a benchmark for future measurement and evaluation. Please note that this is terminology that is used by SVA Consulting and is not documented in the SROI guide.

² The SROI Guide, released in May 2009 and updated in January 2012, available at: http://www.thesroinetwork.org/publications/doc_details/241-a-guide-to-social-return-on-investment-2012

This project is a baseline SROI analysis of Triple Care Farm for the five year investment period between the 2009 and 2013 financial years. A baseline SROI analysis was selected to develop a longer-term understanding of the outcomes experienced by young people and to overcome the limited existing availability of outcomes data for other stakeholders. During the project, social, economic and cultural outcomes of the program were investigated. The analysis involved 57 consultations with stakeholders of Triple Care Farm, including 32 past students, as well as a review of the program's financial, student enrolment and aftercare data. Interview guides used during consultation are set out in Appendix 2.

1.4 Report Structure

The structure of the report is set out below.

- Section 2 includes an overview of the Triple Care Farm program which describes the investment (inputs) in the program and activities (outputs) considered in the project
- Section 3 described stakeholder engagement in the project, presents the logic underpinning the program and includes an overview of the different stakeholder outcomes
- Section 4 describes the measurement approach adopted in this project
- Section 5 describes the valuation approach adopted in this project
- Section 6 describes the approach to the SROI calculations and testing of assumptions
- Section 7 synthesises the insights gained from this project



2 The Triple Care Farm Program

2.1 About Triple Care Farm (Participants and activities)

Mission Australia's Triple Care Farm (TCF) is a residential Alcohol and Other Drugs (AOD) rehabilitation and treatment program for young people aged between 16 and 24 years. Established in 1989, the program is provided through Mission Australia's community services and principally supported by the Sir David Martin Foundation.

Located on 110 acres in the NSW Southern Highlands, TCF is a national service, receiving referrals Australia-wide. The program specialises in treating young people with co-morbid mental illness and drug and alcohol problems. The treatment model is a holistic psychosocial rehabilitation, based on harm minimisation and health promotion.

Triple Care Farm's vision is to provide “**a safe place for change**” through a fulfillment of the following mission statement:

We aim to provide an AOD and Dual Diagnosis rehabilitation service of the highest quality which incorporates holistic, innovative, evidence-based, responsive and safe programs in which young people can address the issues that are impacting on their ability to live an addiction-free life.

Triple Care Farm aims to work as a multidisciplinary team that is committed to supporting young people to achieve their individual goals, rebuilding positive relationships and networks in the community.

We endeavour to achieve this within a philosophy of social justice, advocacy and equality.

Triple Care Farm operates with the goal of treating every student as an individual, catering for his or her specific needs in order to create “A life worth living”. As part of Triple Care Farm's goal to target the most marginalized young people, the structure of the program is adaptable to cater for students with intensive support needs.

Activities

Triple Care Farm's service model comprises of three core programs:

1) **On-site holistic rehabilitation and treatment program:**

Triple Care Farm's on-site program is structured to provide treatment and support for addiction and mental health issues, but to also provide opportunities for young people to gain important life skills whilst at the farm. By re-engaging with education and building job and living skills, students are better placed to live independently, find employment or undertake further study. The on-site program is typically 12 weeks which is broken down into three stages each comprising four weeks (see figure 2.1):

- **Gateway:** focuses on assessing the student's needs, introducing them to a range of activities to find their interests, and setting goals
- **Explorer:** allows students to explore their newly discovered interests and begin to start achieving their goals
- **Outbound:** centres on assisting students to make plans for the future and preparing them to return to the community



Figure 2.1 – Triple Care Farm treatment model

Throughout each stage of the program young people engage in individual case management and counseling, vocational and educational training, a residential living skills stream and a sport and recreation program. TCF also provides a clinical program with on-site access to a general practice doctor. For a more detailed description of the on-site program activities see Table 2.1 below.

2) 'Stepping Out: Placement and Aftercare' post program support

When a Young person has finished their time at the Farm, they are connected with a support worker as part of an Aftercare program, which continues for up to 6 months after graduation. 'Stepping Out: Placement and Aftercare' is aimed at reducing isolation, promoting independence and self-esteem, and positive problem solving, by assisting the student to smoothly transition from the Farm into independence within the community.

Aftercare supports young people after graduation, by placing an emphasis on strengthening and maintaining newly established support networks around the student. These support networks include family, peers, community-based agencies, as well as Mission Australia based and other external services necessary for the young person leaving care. Aftercare workers also help students to secure stable accommodation and create a plan for them to either return to education or enter the workforce.

The Aftercare program has two streams of support. For students that live within one hour's drive of the Campbelltown office, students receive face-to-face support to assist in forming and maintaining community networks and to attend appointments. For the majority of other students, they are supported by the Aftercare program based at Triple Care Farm. Typically students in this support stream receive a phone call once a week, while those students living in the Illawarra and ACT are visited once per month.

STREAM	DESCRIPTION
Residential living skills	Seeks to create a supportive and safe environment, encouraging the development of social skills and peer interaction. The residential stream endeavours to build positive relationships and teach students living skills including cooking, personal hygiene and home maintenance.
Case management	Assists students to access services, set and achieve their personal goals while at TCF. Providing a holistic and individual case management system; the case management stream works with each young person from the referral process through to exit and post program support.
Counselling	Aims to equip students with the knowledge and ability to manage their mental wellbeing and AOD issues. This is provided through group therapy which includes AOD and Dialectical Behaviour Therapy group framework. Individual counselling is also offered to each student, with family counselling available on request.
Training and education	Teaches skills and knowledge in vocational training (including accredited and non-accredited training) and personal development; boosting students' confidence, efficacy and employment skills. The educational aspects of this stream are provided through the Links to Learning stream which focuses on increasing literacy, numeracy and computer skills. Other aspects of the vocational and educational stream include woodwork and metalwork programs, gardening and horticulture, as well as the creative arts program, which offers students the opportunity to build skills through creative outlets including film and sound recording, editing and producing.
Sport and recreation	Focused on teaching students how to have fun without the use of drugs and alcohol, and operates on a Saturday and Sunday. This stream aims to build students' physical fitness, confidence, self-esteem, skills and knowledge of recreation and leisure activities. The sport and recreation program also includes educating students in the use of the on-site gym, and twice weekly sessions with qualified fitness professionals
Medical clinic	Weekly on site access to a general practice doctor who assess and provides treatment for all health needs.

Table 2.1 – Triple Care Farm onsite program streams

3) Community of Practice

Triple Care Farm is an active member of Mission Australia's Youth Alcohol and Other Drugs Services' Community of Practice (CoP). The Community of Practice exists to bring together interested staff working with young people experiencing issues relating to AOD use. It acknowledges that whilst issues with alcohol and other drugs may present as the primary issue, young people experience a range of needs, particularly mental distress, and require holistic support to assist them to overcome challenges and access opportunities.

The primary aim of the Youth AOD Community of Practice is to develop responsive and appropriate services to improve outcomes for young people, families and communities. The Community of Practice aims to create a structure for staff across Mission Australia's AOD youth services that:

- Supports strong teams, competent leaders and skilled practitioners
- Develops innovative, effective, evidence based early intervention, rehabilitation and post-care practice
- Enables effective sharing of information, model development and problem solving

The CoP consists of 26 members, all who work either in management or direct clinical roles associated with young people experiencing comorbid mental health disorders in a residential setting. Members participate in quarterly meetings as well as an online forum.

Participants

TCF has a team of staff and volunteers who operate a 24 hour a day 7 day a week program, with capacity to accommodate up to 18 young people at a time. Between 2009 and 2013 the annual number of participants increased steadily (see figure 2.2). In total, the program received 440 student visitations from 370 unique young people. This reflects that in an average year approximately 20% of the young people participating in the program are returning students. The program allows a young person to return where they have experienced a relapse in substance use, but demonstrated a desire to improve their lives and a commitment to adhering to the program's rules. A return visit to the program offers a young person a second-chance to complete the program, or an opportunity to continue to work on and develop important life skills.

Program participants – visits and unique students (2009-2013)

Number of students

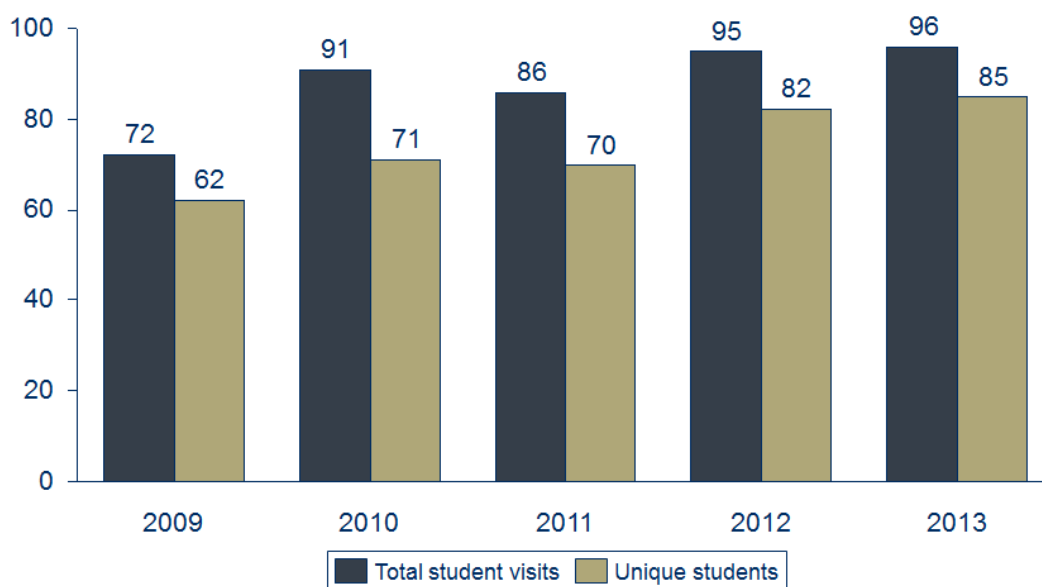


Figure 2.2 – Young people participating in the program

Between 2009-13 the average length of stay per visitation was approximately 7 weeks, with ~56% of unique young people participating in the Aftercare program. While the program is structured around a 12 week on-site stay and a 6 month Aftercare support period, its flexibility enables students to progress at their own pace - ~6% of students had stays of longer than 90 days and ~12% stays of less than 7 days. It is important to recognise that the number of young people who reach the 'Graduation' stage of the program is not a representative indicator of achievement. Because of the program's flexible approach young people need not complete the entire structured program in order to experience long-term benefits from their stay.

2.2 Context within which Triple Care Farm operates

Substance misuse is common among young people in Australia. In 2013 the National Drug Strategy household survey found that more than 38% of young people aged between 12-24 had been at very-

high risk of alcohol related harm in the last 12 months³. Over this same time period nearly a quarter of this group reported using an illicit drug. While drug use among younger people has remained relatively stable over the past five years, concerning trends in patterns of drug use are emerging including the adoption of more dangerous drug forms (such as Ice) and poly drug use.

The misuse of alcohol and other drugs can have and long-term implications for the physical and mental well-being of young people. These harms range from respiratory problems and the spreading of infections to liver disease and brain damage⁴. Although the nature of causality remains uncertain, there is also a strong link between drug use and mental health issues – it is estimated that 35% of people using illicit drugs have a co-occurring mental illness⁵.

Although the prevalence of methamphetamine use in Australia has remained relatively stable over the last decade, there has been a stark increase in the use of its most potent form, commonly known as ‘Ice’⁶. With usage rates almost doubling over the last twelve months, Ice is now considered by the Australian Crime Commission ‘to pose the highest risk of all illicit drugs to the community’⁷. In April 2015, upon establishing a National Ice Taskforce, the Prime Minister described the ‘ice epidemic’ as “worse than any previous drug problem the nation has faced”⁸. Triple Care Farm has felt full effect of this scourge with a trebling in the number of young people presenting for treatment since 2010 coinciding with a significant increase in experiences of suicidality (from 50% in 2010 to 71% in 2013).

As part of its response to this alarming issue, Triple Care Farm is developing a new on-site withdrawal support facility to complement its existing program. Current detox options for young people are limited, ineffective and often inappropriate. Approximately 30% of young people’s admissions are significantly delayed due to their inability to access withdrawal support. TCF’s proposed detox facility will incorporate assessment, detoxification and treatment in a 10 bed, 28 day residential program. The facility will help to serve a large unmet need, enabling Triple Care Farm to assist hundreds of young people each year who otherwise would not be accommodated.

2.3 Investment (inputs)

As part of an SROI analysis, the investment for the program or activity needs to be identified in order to appropriately understand and value the outcomes experienced by stakeholders. Both monetary (cash) and non-monetary (in-kind) contributions were required during the 2009 - 2013 investment period to support TCF’s activities. The total investment over those five years was ~\$14.6 million dollars, of which cash investment comprised the ~90% (~\$13.3m) and in-kind investment accounted for the remainder (\$1.3M). Table 2.2 provides a summary of that investment.

INVESTMENT	FY2009	FY2010	FY2011	FY2012	FY2013	TOTAL
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³ ‘National Drug Strategy Household Survey 2013’, AIHW, accessed at <http://www.aihw.gov.au/alcohol-and-other-drugs/ndshs-2013/tables/>. * Consumption of 11 or more standard drinks

⁴ The national Drug Strategy 2010-2015, accessed at <http://www.nationaldrugstrategy.gov.au/>

⁵ Ibid

⁶ Ibid

⁷ National Ice taskforce media statement, Office of the Prime Minister, April 2015, accessed at <https://www.pm.gov.au/media/2015-04-08/national-ice-taskforce-0>

⁸ ‘Prime Minister Tony Abbott says ice is the worst drug problem Australia has ever faced’ Sydney Morning Herald, 8 April 2015



INVESTMENT	FY2009	FY2010	FY2011	FY2012	FY2013	TOTAL
Cash	\$2,348,627	\$2,504,077	\$2,690,885	\$2,835,493	\$2,912,193	\$13,291,275
In-kind	\$265,244	\$267,830	\$270,568	\$242,119	\$255,584	\$1,301,344
Total investment	\$2,613,871	\$2,771,907	\$2,961,453	\$3,077,612	\$3,112,477	\$14,573,319

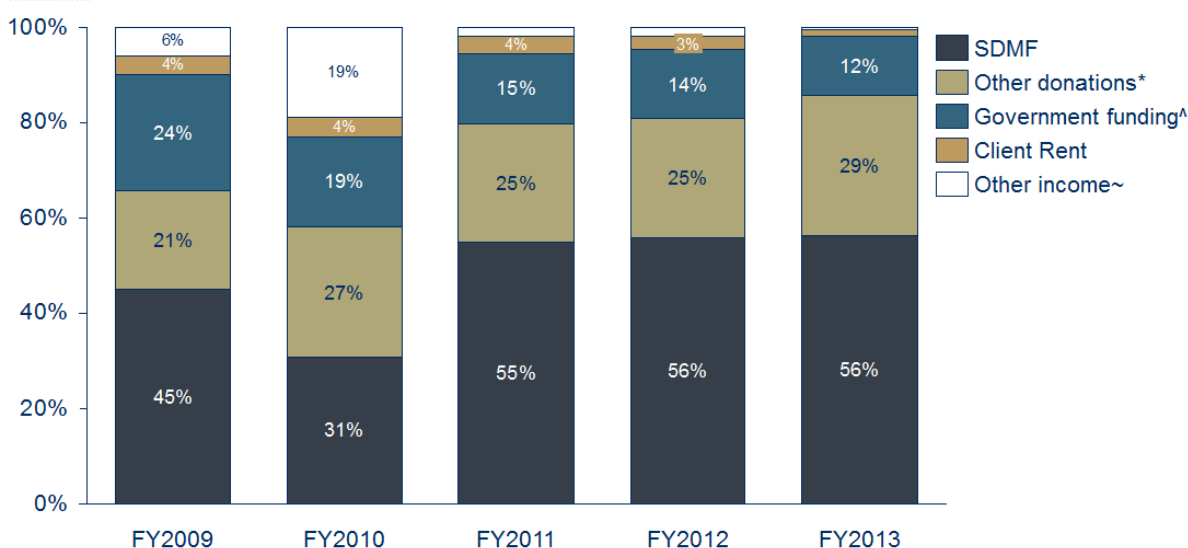
Table 2.2 – Summary of investment in TCF

Cash investment

The Triple Care Farm program is funded primarily by private donors, with the Sir David Martin Foundation being the single largest funder (See Figure 2.3). While the total amount of funding the program receives has increased modestly over the last five years, due to the steady decline of Government funding (from 24% in 2009 to 12% in 2013) TCF has become increasingly reliant on its private donors. Government funding is currently provided by the Department of Health and Ageing, who fund four staff positions as well as TCF’s professional development and training program. The program also receives a small amount of income (~4%) in the form of rent payments from students.

Cash Investment by source (FY2009-13)

Percent



Notes: * Includes current and prior year designated donations and capital donations; ^ Department of Health and Ageing; ~ Includes Sundry, internal and rollover income
Source: SVA analysis ; Triple Care Farm management accounts

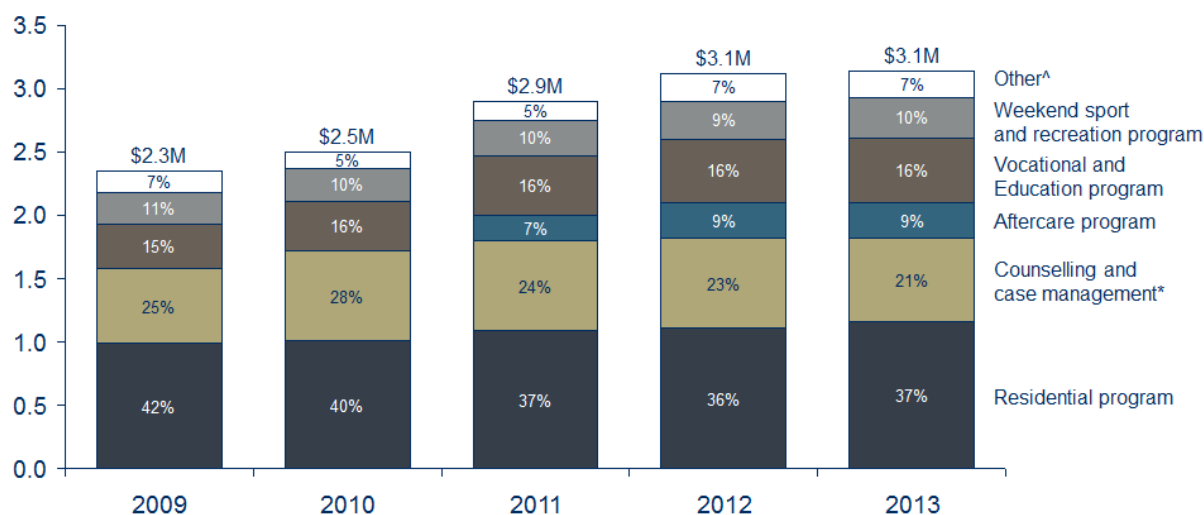
Figure 2.3 – Proportion of total Triple Care Farm cash investment by source

Investment, for the purposes of SROI analysis, focuses on the actual expenses required to deliver the program in question, rather than the total funding received. The actual expenses are seen as a more accurate representation of the inputs required to achieve the identified outcomes. Any discrepancy between funding and actual expenses is due to the full amount of funding not being acquitted within the financial year, or unspent funding from previous years being drawn upon.

Below Figure 2.4 shows program expenditure on an activity basis over the investment period. Between 2009 and 2013 TCF's total cash expenditure has increased at the moderate average annualised rate of 5%, with the proportion of funding allocated to each activity group remaining relatively constant. The residential program is the most cash intensive element of the program accounting for more than a third of total expenditure, while the Aftercare component accounts for less than 10%.

Total program cash expenses by activity (2009-13)

Millions of dollars



Notes: * Includes Aftercare program expenditure for 2009 and 2010; ^ Includes Community of Practice program, Clinical program development and Family & Carer program (2009 only)

Source: SVA analysis ; Triple Care Farm management accounts

Figure 2.4 – Total program cash expenditure by activity

In-kind investment

In addition to the cash investment in TCF, there has been significant in-kind support in the form of human and other resources. Specifically, TCF has received in-kind support from:

- Volunteers:** Triple Care Farm is supported by a large number of volunteers who assist the operation of the program both on a regular on-going and project specific basis. Between 2009-13 volunteers from organisations such as the University of Sydney, Illawarra Tafe, the Royal Navy and the Country Women's Association, as well as dedicated individuals invested nearly 34,000 hours on the Farm.
- Land:** The farm is located on 100 acres in the NSW Southern Highlands which is held by Mission Australia. The value of land has been included in the analysis as it has a commercial opportunity cost. The investment value of the land has been based on the estimated foregone annual rental yield.⁹
- Goods:** Triple Care Farm has also received a small investment of in-kind goods through a partnership with Vodaphone, as well as donated clothing and kitchenware. The Vodaphone partnership, now discontinued, provided students who completed the program with a handset which enabled them to keep in contact with their Aftercare worker.

The total estimated value of the in-kind investment made in the program over the investment period is shown in Figure 2.5 below.

⁹ The annual rental yield has been calculated using the current land valuation and an average land rental yield of 7% as suggested by NSW DPI: http://www.dpi.nsw.gov.au/__data/assets/pdf_file/0017/104093/leasing-land-calculating-a-rental

In-kind investment by type (FY2009-13)

Thousands of dollars

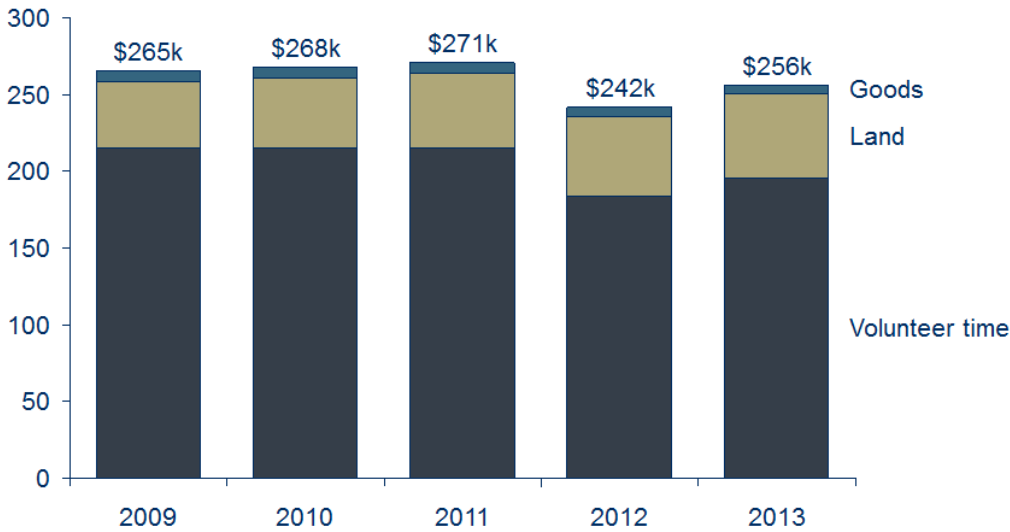


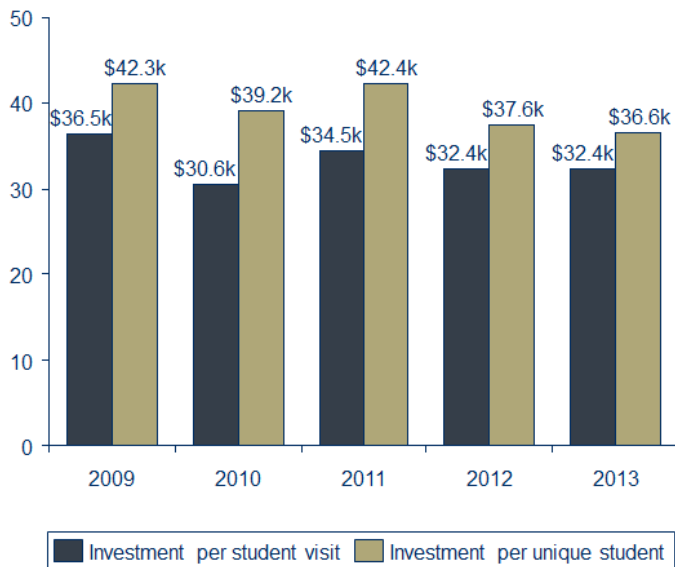
Figure 2.5 – Total program in-kind investment by type

Investment per Young Person

An analysis of the total investment made per young person who has participated provides a lens to understand the relative scale of the program’s inputs to its ‘output’. It also provides a high-level indicator to assess the cost efficiency of the program. Figure 2.6 illustrates that during the investment period the total cost of delivering the program per student visit was ~\$31k, and ~\$39k per unique student who participated. As the annual number of students participating in the program has increased, the cost of delivering the program per student has decreased at an average annualised rate of ~4%.

Investment per student (FY2009-13)

Thousands of dollars per student



Total investment per student

Thousands of dollars per student

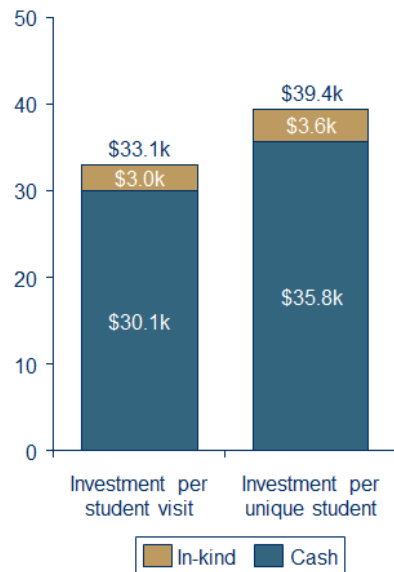


Figure 2.6 – Total investment per student

3 Understanding change

3.1 Defining stakeholder groups

SROI is a stakeholder informed methodology that involves engaging closely with stakeholders to identify and understand the changes created through a program or activity.

Stakeholder groups included in the analysis

Based on the initial scoping of the project and stakeholder consultation, stakeholders were included in this analysis if they experienced a unique and material change as a result of TCF's activities between 2009 and 2013. Stakeholders included in this SROI analysis are listed in Table 3.1 below.

Stakeholder group	Rationale for inclusion in the SROI analysis
'Young people'	<ul style="list-style-type: none"> • This stakeholder group is a major beneficiary of the program and includes all former students who participated in the program between 2009-2013 • By taking part in the program the lives of 'Young people' are likely to be significantly impacted as they are provided with a safe place and intensive support to help improve their lives • Data limitations prevented any further segmentation of this group based on differences in how outcomes were experienced
Families / carers	<ul style="list-style-type: none"> • This stakeholder group includes the parents / carers and siblings of the young people who participate in the program • This group experiences important changes because of their relationships with the participants and through their direct and indirect involvement with the program
Government	<ul style="list-style-type: none"> • This stakeholder group includes both the Commonwealth Government and the respective State Governments of participating students • As a result of the changes experienced by the young people who participate the cost of providing services to this cohort is reduced
AOD sector	<ul style="list-style-type: none"> • This stakeholder group includes Mission Australia's and other AOD services providers and peak bodies which Triple Care Farm either works or engages directly with • As a result of Triple Care Farm's participation in Mission Australia's Youth Alcohol and Other Drugs Services' Community of Practice and influence these organisations experience changes to their programs and operations

Table 3.1 – Stakeholder groups included for the SROI analysis

Stakeholders excluded from the analysis

Stakeholders were excluded from the analysis if their input or changes were not directly associated with TCF's activities or were not deemed to be material. The decision to exclude a stakeholder group was determined through the scoping phase of the project and throughout the stakeholder consultations. The rationale for excluding stakeholder groups is outlined in Table 3.2 below.



Stakeholder group	Rationale for inclusion in the SROI analysis
Triple Care Farm staff and management	This group has either direct or indirect involvement with the students, however they are not understood to experience material changes which differ from 'business as usual'.
Funders	This group includes other organisations and people who have provided financial support to sustain the program. While their support is highly valued this group is excluded from the analysis as they are unlikely to experience any material change from their investment in the program

Table 3.2 – Stakeholder groups included from the SROI analysis

3.2 Stakeholder engagement

An SROI analysis requires that changes are described, measured and valued. The purpose of stakeholder engagement is to understand the relative importance of changes (or outcomes), how stakeholders would prove and measure the outcomes, how they would place value on the outcomes, the duration of outcomes and what proportion of the outcomes are attributable to others or would have taken place anyway.¹⁰

Stakeholder engagement was a key part of the analysis and included an extensive interview process, involving representatives from each stakeholder group, as well as a student survey. Table 3.3 below is a summary of the stakeholder groups engaged for this analysis, the size of the group and the number of stakeholders engaged in each group. In addition, throughout the project SVA Consulting consulted with representatives from Triple Care Farm, Mission Australia and The Sir David Martin Foundation to share and test interim and final key messages from the SROI analysis.

Stakeholder group	Size of group	Stakeholder engagement
1. 'Young people'	370	<ul style="list-style-type: none"> ● 32 interviews ● 9 survey responses
2. Families / carers	370 family units	<ul style="list-style-type: none"> ● 5 interviews
3. Government	N/A ¹¹	<ul style="list-style-type: none"> ● 3 interviews
4. AOD sector	N/A ¹²	<ul style="list-style-type: none"> ● 4 interviews
Total		44 interviews 9 survey responses

Table 3.3 –Stakeholder engagement by group

Consultation with 'Young people'

As the primary stakeholder group, consultation with young people formed the largest component of the stakeholder engagement process. An iterative and adaptive approach was adopted to ensure the resources that were available for the project led to most extensive and robust engagement possible.

¹⁰ Please refer to Appendix 2 for the interview guide for stakeholders.

¹¹ Note: For a government stakeholder, we do not measure how many people within government experience change but rather how the efficiency and effectiveness of government as a whole has changed as a result of the program or activity.

¹² Ibid.

Initially, a random stratified sample of past students was drawn from the 2009–13 student database. The sample consisted of 80 students, 20 from each year, of which 46 had attended aftercare. In accordance with the approved ethics process, TCF staff made initial contact with students to request their consent to participate. SVA subsequently contacted students who had provided their consent to be interviewed.

From this initial sample nine consents were obtained, which resulted in three complete interviews. Responding to this weak response rate, the approach was revised to include the entire population of unique past students on a self-selecting (opt-in) basis. Significant effort was made to locate current contact details for students, including an extensive review of TCF’s paper based archive, drawing on TCF’s social community networks and placing notices through Sir David Martin Foundation and Mission Australia channels. An incentive was also introduced to encourage participation. Of the 370 students who have participated in the program throughout the investment period current contact details were located for 215 (Figure 3.1).

Contact availability of the unique student population (FY2009-13)

Number of students

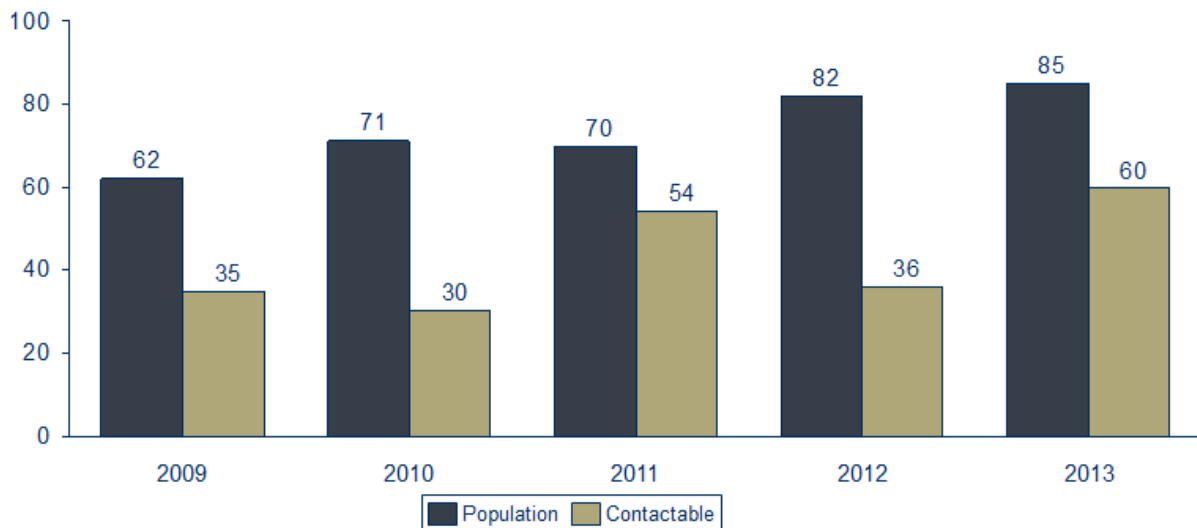


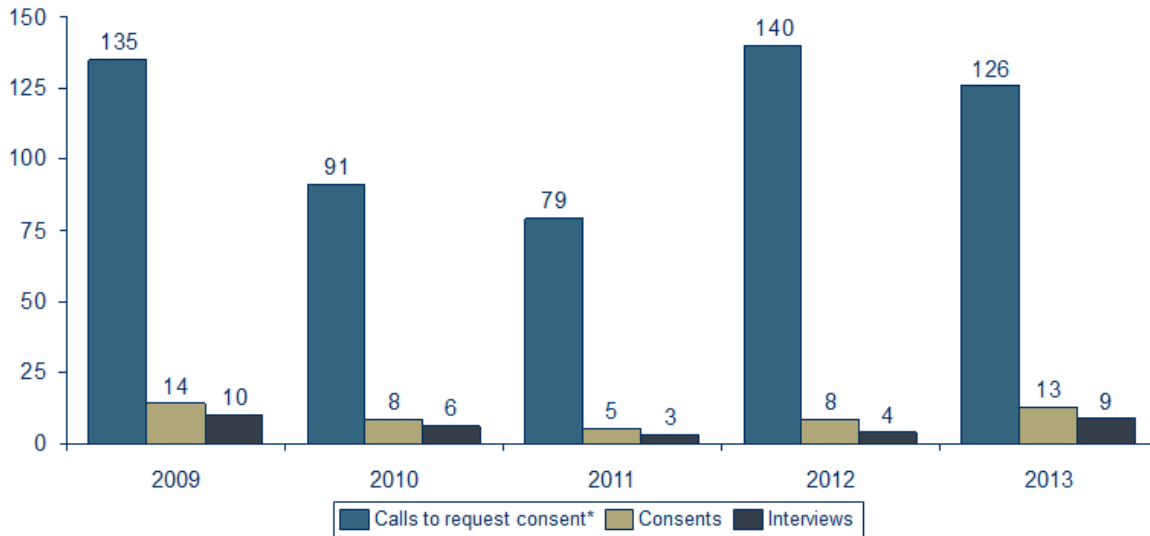
Figure 3.1 – Student contact availability

Securing interviews with students was difficult and resource intensive. The TCF team made multiple attempts to contact each available student over a seven week period. As shown in figure 3.2, more than 600 calls were made to students requesting their consent to participate in an interview. In each case where a student had provided their consent, at least five attempts were made to schedule the interview with SVA Consulting. In total 32 interviews with students were conducted.

The student survey had been proposed to validate the outcomes emerging from the interview process and to understand how students valued these outcomes. However, in response to our initial slow uptake of interviews, the scope of the survey was widened to help understand the changes young people had experienced. The design of the survey questions was informed by already completed interviews with additional feedback from the TCF clinical team. The survey was sent via email addresses available in TCF’s existing database and those gathered from interviews, as well as through the Mission Australia’s intranet and the TCF Facebook group. The survey received 16 responses, of which 9 were complete. While the response rate was low, those who completed the survey provided detailed answers.

Interview conversion rate (FY2009-13)

Number of calls / students



Notes: * Indicates the minimum number of calls recorded

Figure 3.2 – Interview conversion rate

Understanding the limitations

The breadth and depth of the consultation process provided a compelling picture of the impact that TCF has on the lives of young people who participate in the program. However, it is important to consider the limitations of the sample size and selection method.

The key consideration behind the number of stakeholders to involve in understanding change is minimising the risk that material outcomes have been misunderstood or not identified. As a general rule, it is recommended that the stakeholder sample should be increased until the point where no new themes or information is emerging – sampling saturation. SVA Consulting were confident at the conclusion of the consultation process that the in-depth interviews which were conducted had provided a clear and accurate representation of the changes experienced by young people.

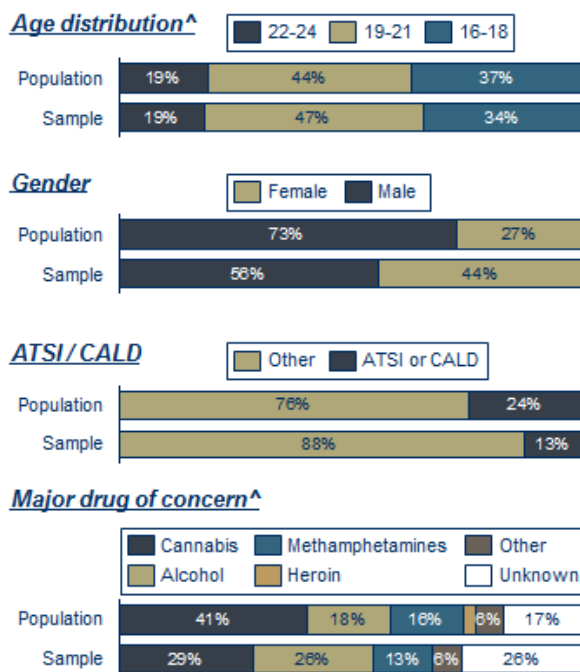
In addition, while random sampling is the preferred method of the SROI methodology, where this is not possible consideration must be made to ensure the sample is representative. The interviews conducted included a diverse mix of students and outcome ranges. Analysis of key demographic and participation characteristics demonstrates that the interview sample was broadly representative of the student population (See figure 3.3).

However, the reduced sample size has imposed some limitations upon the valuation of outcomes. Firstly, it has increased the amount of extrapolation required to estimate the occurrence of each outcome in the student population. Secondly, while the relative value of outcomes can be distilled from analysis of the aggregated interview data, determining the most appropriate financial proxies required a greater use of judgement. Finally, a smaller sample size precludes analysis which could differentiate how similar outcomes are experienced by different sub-groups of students (i.e. by type of AOD use).

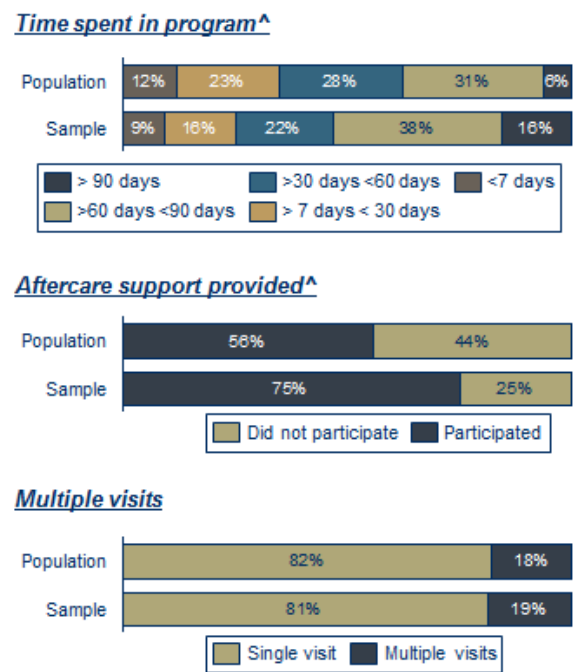
To help overcome these limitations and inform assumptions, the stakeholder engagement process was complemented by drawing on the rich experience of management and staff, existing program research and SVA Consulting’s experience.



The students we spoke to...*



Their participation in the program...



Notes: [^] As at each student's most recent visit to the program

Figure 3.2 – Young people interview sample composition

3.3 Other sources of data used

In addition to the primary research component, the data collection process also captured insights from the following sources:

- Annual on-site program and aftercare evaluations
- Triple Care Farm service based procedures & program manual (2013)
- A case study of the Community of Practice undertaken by the University of Wollongong
- Articles and reports written about TCF, its activities and impact

3.4 Program logic

A program logic tells the story of change that takes place as a result of the program or activity. The program logic for Triple Care Farm (see figure 3.4) includes:

- The issue that TCF is seeking to address
- The key participants of the TCF program
- The activities involved in the program
- The consequences of activities that occur through the program, for various stakeholders
- The overall impact of these outcomes.

The program logic was based primarily on stakeholder consultation, but was also informed by discussions with TCF management and staff, and a prior program logic prepared for Mission Australia.

The program logic is a hypothesis of the intended impact of Triple Care Farm. This SROI analysis assessed the extent to which outcomes have been generated and the value of these outcomes for stakeholders.

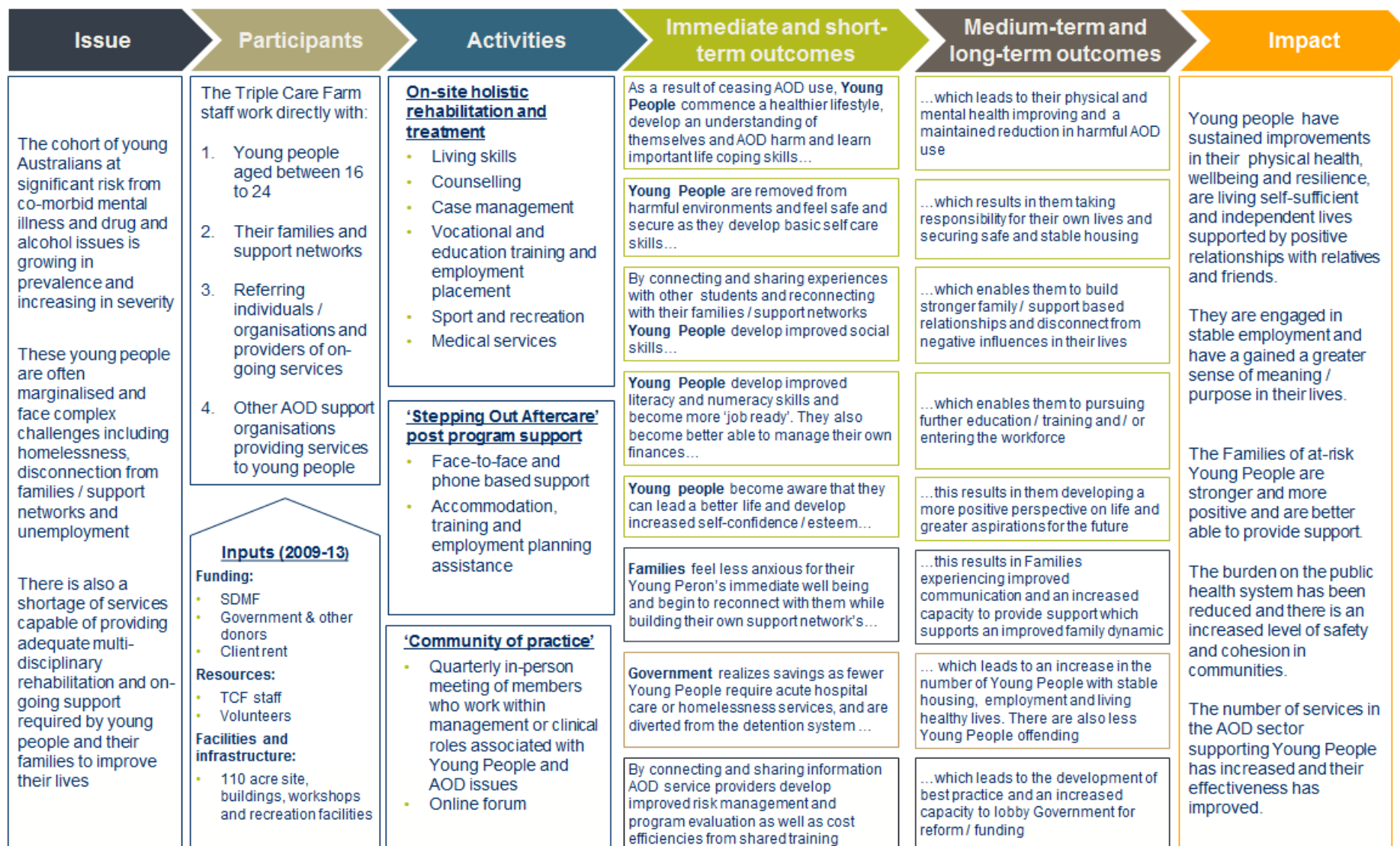


Figure 3.4 – Triple Care Farm Program logic

3.5 Stakeholder outcomes

Four stakeholder groups experienced material outcomes as a result of TCF's activities:

1. **'Young people' (who had participated in the program)**
2. **Their Families / carers**
3. **Government (Including Federal and relevant State Governments)**
4. **The AOD sector**

See section 3.1 for further detail on included and excluded stakeholders.

The stakeholder logics in Appendix 3 show the material outcomes which have been measured and observed and depict the relationships between them. The outcomes included in the SROI analysis are considered 'material', that is, they are the significant and relevant changes that stakeholders experienced due to TCFs activities. Materiality is a concept that is borrowed from accounting. In accounting terms, information is material if it has the potential to affect the readers' or stakeholders' decision. According to the SROI Guide, a piece of information is material if leaving it out of the SROI would misrepresent the organisation's activities.

Defining the material outcomes for stakeholder groups is complex. When defining the material outcomes for each stakeholder group, an SROI practitioner must ensure that each outcome is unique or it would be considered double counting. This is difficult as the outcomes for each stakeholder group are necessarily related because they describe all of the changes experienced by the stakeholder. For example, people do not compartmentalise the different changes they experience. Outcomes also happen at different times throughout the period being analysed with different levels of intensity. There are also complex relationships between outcomes for different stakeholder groups.

Stakeholder outcomes were determined by applying the materiality test to the range of outcomes identified in the program logic. This was done through initial consultations with the relevant stakeholders and TCF management. The materiality of outcomes was again tested when the number of people experiencing the changes were measured and valued.

The following sections outline the outcomes experienced by each stakeholder group and the impact of these changes.

1. 'Young people'

The young people who participate in the Triple Care Farm program are considered one of the most difficult cohorts to treat in the community services sector. In addition to a history of chronic and poly-drug use, the majority of young people present with a range of other complex challenges including mental illness, homelessness, criminal history, and unemployment.

Through its holistic model of treatment, Triple Care Farm supports 'Young people' to experience changes across five life domains: Health & Wellbeing; Housing & Safety; Connections to society; Education, Employment and Income and Aspirations. It is important to note that the changes within each of these domains are highly interrelated, that is, the occurrence of an outcome in one stream can both depend upon and support changes in another.

Health & Wellbeing

The material outcomes experienced by 'Young people' in the Health & Wellbeing domain include:

- Cessation of AOD and tobacco use
- Developed coping skills (AOD use, gambling and mental health)
- Improved physical health and lifestyle



- Improved mental health and emotional stability
- Maintained reduction of AOD use

Most young people present to the program in a state of very poor physical and mental health. All are assessed as experiencing significant AOD use issues, with ~80% reporting poly-drug use. These issues are compounded by a high prevalence of serious co-morbid mental health conditions, with 77% presenting with an existing diagnosis. In addition, many are malnourished and suffering from untreated acute health conditions.

Upon arriving at the Farm, the TCF team, including a resident GP, ensure that each student's immediate physical health needs are addressed and that they feel at ease in their new environment. However, the material change that occurs for young people at this point is a **cessation of their AOD use**. This initial change was described by young people as critical to enabling later stage changes to occur. Furthermore, regardless of their progress the time that students were able to remain abstinent while in the program was widely regarded as being highly valuable, providing a glimpse of life without substance use.

"...Not drinking while I was there was really important, it was a big wakeup call..."
- 2013 student

"...It was like a circuit breaker for me for me, if felt really good that I was clean for those three months..."
- 2009 student

By providing a formal timetable and opportunity for regular exercise the on-site component of the program assists young people to develop a healthier living routine and increased sense of stability. Meanwhile, as a result of their work in both individual and group counselling, young people develop increased self-awareness and an understanding of the harm their AOD use has on their lives. Critically, through the counselling process students **develop coping skills** which enable them to confront and overcome their issues. While relapses were a common experience, interviewees cited their ability to draw on these skills after leaving the program to overcome difficulties and set-backs.

"...The tools that you learn while you are there are really helpful, you don't lose those, like relapse prevention, and how to build healthy relationships..."
- 2012 student

Young people explained that as a result of these earlier stage outcomes by the time they leave the on-site component of the program their **physical health and lifestyle has improved** as well as their **mental health and emotional stability**. From this foundation, and the continued support of the aftercare program young people are able to achieve a **maintained reduction of harmful AOD use**.

"...I am heaps healthier, when I was taking drugs, I was underweight. I worked out every single day I was up there, it gave me something to look forward to..."
- 2013 student..."

"...The experience strengthens you. When I left I was feeling stronger in myself - it was really rewarding..."
- 2010 student

"...I got off all the drugs, and have been off them ever since - I lapsed once two years afterwards but it wasn't big a deal. I had the support there to help me that time ..."
- 2010 student..."

Housing & Safety

The material outcomes experienced by 'Young people' in the Housing & Safety domain include:

- Removed from harmful environment and feeling safe / secure
- Developed basic self-care skills (Hygiene, cooking, cleaning)
- Secured safe and stable housing

Approximately 43% of young people who participated in the program during the investment period had previously been homeless. Interviews revealed that for many others their prior accommodation was either inappropriate or unsafe. A similar proportion of students (41%) had spent time in detention in the six months prior to their intake, with many at risk of re-entering the justice system.

Arriving at the Farm, young people are diverted from the justice system and experience the immediate material outcome of **being removed from harmful environments and feeling safe / secure**. The support and care provided by staff, while being away from destructive circumstances and influences, provides an important foundation for further change.

"...I felt like I was surrounded by people who were caring, that you were in a caring place. There was a sense of kindness, that people wanted to help you..."

- 2013 student

"...It gave me some stability while I was there - it was a safe place, it kept me off the streets and out of trouble. ..."

- 2009 student

As well as providing a nurturing and caring environment, the residential stream of the program aims to help students acquire independent living skills. By undertaking daily chores, learning to cook nutritious meals and improving their personal hygiene young people **develop basic self-care skills**. These skills were particularly valued by those young people who had been living without the support of a family or carer. TCF management and staff have also observed developing these skills encourages young people to take increased responsibility for their own lives.

"...It taught me to clean, cook and look after myself ..."

- 2011 student

An important role of the Aftercare program is to develop accommodation placement plans for each student. Aftercare staff work with students, and engage with their families / carers (where appropriate), state housing authorities and community housing providers to determine a solution which will best meet their needs. As a result, young people are able to **secure safe and stable housing**. This material outcome was described by interviewees as being critical to maintaining long-term lifestyle change after leaving the program.

"...When I finished the program my mum let me come back to her place, after that I was able to find my own accommodation. ..."

- 2009 student

Connections to society

The material outcomes experienced by 'Young people' in the Connections to society domain include:

- Experienced conflict with other students (negative outcome)

- Stronger family / support based relationships
- Disconnected from negative influencers

In addition to overcoming the isolation of homelessness, the program also aims to enable young people to experience a sense of belonging to family and community, by building and / or rebuilding relationships. This is important as more than 75% of young people who participate in the program have experienced a family breakdown.

While it is not uncommon for young people to experience some amount of social disconnection as they initially settle-in on the Farm, this typically subsides quickly, as students begin to connect with one another and share experiences. During these early weeks of the program some young people will also **experience conflict with other students**. This was the only material negative outcome observed throughout the consultation process. In most cases conflict is minor and short-lived; however more serious incidents can occur, which may result in a student leaving the program on their own accord or being removed by management. The majority young people interviewed described conflict as an annoyance, but understood its natural tendency to arise and believed that it was well managed by staff.

“... At times I didn't feel very safe because guys would argue and punch on ...”
- 2011 student

“...There was a bit of drama with some of other students, just normal tensions. It is part of life but it can be off putting. I thought it was managed as well as it could be ...”
- 2013 student

The residential, counselling and recreation components of the program are designed to create opportunities for students to develop and build relationships with the staff and with their peers. As a result, young people develop improved social skills and cultural awareness. After leaving the on-site program, these skills enable students to identify and **disconnect from the negative influences** in their lives. This outcome was also seen by young people as essential in order to maintain a reduction in their AOD use.

“...I distanced myself from a lot of people. You go back home and open your eyes; I got rid of the toxic people in my life. ...”
- 2013 student

Triple Care Farm recognises that the inclusion of families, carers, and supporters is an important component of working holistically with young people. As such, the program actively supports students to reconnect with those people who are important in their lives through initiatives such as, the on-site rotary house and weekend leave. Where appropriate TCF also offers family counselling, while Aftercare staff ensure on-going support is available once a student returns home. This enables young people to build **stronger family / support based relationships**.

“...After leaving my self-esteem was higher so I made new friends, I didn't only feel comfortable hanging around drop-kicks ...”
- 2009 student

“...The foundation of my relationship with my family was laid while I was there. It was great that I could call them or they could call me and that they could come and visit. My dad and I now get along the best we ever have. I can also assert myself better around my mum, I have tools now not to blow up at her...”
- 2012 student

Education, Employment and Income

The material outcomes experienced by 'Young people' in the Education, Employment and Income domain include:

- Better able to manage finances
- Pursuit of education / training
- Entered / re-entered the workforce

The majority of young people arriving at Triple Care Farm are disengaged from education and employment. While the average age of participants is 20, the average level of education attainment at intake is year 9. Furthermore, only 10% of young people were employed at the time they commenced the program. The training and education stream aims to help support each Young person's recovery by providing them with the skills and tools they need to pursue a more active and fulfilling life.

The program offers a structured curriculum which includes both accredited and non-accredited courses. Tailored individual learning plans focus on identifying and filling gaps in each student's skill base, as well as providing them an opportunity to develop and pursue their own interests. Subject areas range from literacy and numeracy, computer skills, employment skills, creative arts and landscape management.

At the commencement of the program, TCF's case manager works with each student to ensure that they are receiving appropriate income support (i.e. Youth allowance payments). However, being **better able to manage their finances** was highlighted by young people as a more significant change which they attributed to the financial literacy skills taught during the program. Interviewees proudly explained how this change had led them to becoming more financially independent, with many describing how they had been able to save for their first car or holiday.

"...I've got a wallet that isn't empty anymore! - I'm much better at managing my finances now..."
- 2012 student

"...I saved enough money to be able to travel for the first time. I would like to say that I've always been good at budgeting - I wouldn't have had the skills before not to spend it on stuff that was bad for me..."
- 2012 student

Building upon their improved literacy, numeracy and job readiness skills and with the on-going support of their Aftercare worker, more than two-thirds of young people interviewed had gone on to **pursue further education or training**. Furthermore, more than half of the interviewees had either **entered or re-entered the workforce**. These two outcomes were widely regarded by young people as significant life changes and represent a major positive divergence from their earlier life trajectories.

"...TCF kick started me into education. While I was there I did my forklift license, which gave me the belief and confidence that I could do it. It set me up to enroll in Tafe and work part time as well..."
- 2009 student

"...Ever since I left last time I've had a job. Everything there really helped me, the skills stuff, being organized and having more confidence talking to people. I have worked as a manager in retail for two years while studying part time..."
- 2009 student

Aspirations

The material outcomes experienced by ‘Young people’ in the Aspirations domain include:

- A more positive perspective on life and aspirations for the future

The development of aspirations was an important theme that emerged from consultations with young people. In most cases their lives prior to the farm had been consumed by alcohol or substance use. Interviewees often portrayed how they were at their lowest point when they entered the program, desperate and without any hope for the future.

“...When I entered the program I was at a point where I either did something or I would die... I had been hospitalized a number of times, I was arrested and I had had a massive family breakdown...”

– 2009 student

Arriving at the Farm can have an immediate effect on a young person’s outlook. By ceasing their AOD use, leaving behind destructive environments and with the care provided by TCF staff, young people become aware that they can lead a different and better life. As they progress through the program, developing and employing new life skills and making positive connections, young people develop increased self-confidence and improved self-esteem.

As a result of these changes, young people depart the program with a more **positive perspective on life and aspirations for the future**. This material outcome strongly influences their resolve to realize outcomes occurring during the Aftercare support period, such as the pursuit of education / training or disconnecting from negative influences. The young people who had reached these late stage outcomes attributed the program to providing a greater sense of meaning / purpose in their lives.

“...When I went into the program I didn’t have any hope, I saw new possibilities by being part of the program...”

– 2010 student

“...After TCF I decided I was going to go and do something with my life. At the time I was just bumming around; after leaving I found a new place to live, enrolled in a course and am now at university...”

- 2012 student

2. Families / carers

Although the focus of Triple Care Farm is helping to improve the lives of ‘Young people’, the program also places a strong emphasis on the rebuilding or development of family / carer relationships. This approach is grounded in an evidence base that indicates the superior effectiveness of addiction and mental health treatment programs that comprehensively incorporate social connectedness¹³. The involvement of families / carers in such programs has been shown not only to improve outcomes for the participants, but to lead to improvements in family functions. In particular, studies examining the inclusion of family and other important social networks in treatment noted a reduction in the stress-related symptoms experienced by family members who had been affected by a loved one’s addiction or mental distress¹⁴.

The experience of family members and carers who were consulted as part of this analysis largely supported these conclusions. Through indirect and direct involvement in the program families / carers experience a series of changes involving their relationship with their young person, which can eventually lead to a stronger and more positive family environment. The involvement of families

¹³ Society for the Study of Addiction to Alcohol and Other Drugs, 2002

¹⁴ Copello et. al, 2000

/ carers in the program is determined by an initial assessment with students at the commencement of the program. Where agreed to be appropriate, family / carer involvement can include regular updates from TCF staff, family counselling and mediation, on-site visits and over-night stays (in separate accommodation facilities) and receiving their young person for weekend leave.

Family members highlighted that **reduced stress / concern for their young person's immediate well-being** was an important initial change in their lives, which they attributed to the program. Interviews depicted the high levels of anxiety experienced by families as they struggled to care for their dysfunctional young person. As such the program was described as providing a valuable period of respite, allowing families the opportunity to recuperate.

"...It gave us the respite we really needed. We have two other children, and he was taking up all of our time. My wife had a breakdown...we didn't get any breaks for a long time before the program..."

- Father of 2009 student

"...It used to be hell when he lived here. I used to fear coming home and things got worse and worse and worse. The farm gave him a chance and us three months of respite..."

- Father of 2010 student

As a result of their involvement with the program families / carers are able to establish a connection with their young person which leads to **improved communication**. Where young people were able to continue their recovery this was seen as leading to an improved family dynamic.

"...It has had a huge impact on our family. We have a relationship with her now, and we can also see when things are not going so well and be there to support her..."

- Mother of 2012 student

A number of the family members interviewed also noted the importance of establishing a greater support network for their family. This in turn increased their capacity to support their young person. However, these outcomes were not deemed to be material because of the relatively limited role that TCF currently plays.

3. Government

The costs to society of alcohol and drug misuse are well documented. In 2005, Collins and Lapsley estimated the economic value of these costs, including those related to the health and hospitals system, lost workplace productivity, road accidents and crime at \$23.7bn¹⁵. In terms of the direct expense incurred by Government, a more recent study estimated the total Federal and State Government expenditure on prevention, treatment, harm reduction, law enforcement and research to exceed \$1.7bn¹⁶.

As a result of the care Triple Care Farm provides to young people affected by AOD misuse Government benefits from potential resource reallocation across three key areas of service provision: the health system, the justice system and homelessness services.

Over the investment period more than 75% of students had been admitted to hospital in the 6 months prior to commencing the program. Of these young people, on average each had been admitted on at least two occasions. As a direct result of the outcomes that young people experience in the health and wellbeing domain there is a **decrease in the number of acute care hospital presentations**. This equates to an immediate cost saving for Government. It is understood that as

¹⁵ Collins & Lapsley, 2008 "The costs of tobacco, alcohol and illicit drug abuse to Australian society in 2004/05"

¹⁶ National Drug and Alcohol research centre

young people continue to lead healthier lives the burden on the public health system is more broadly reduced.

“...Before I went to TCF I had spent time in a mental hospital and in an emergency room after I ended up with a concussion after falling over while I was drunk. I haven't been to a hospital for reasons like that since I left the program...”
– 2010 student

Savings are also accrued to Government in the short-term, as young people are diverted from entering or re-entering the justice system. This translates to a **decrease in the number of young people in detention**. Breaking and entering, robbery and common assault were among the most common offences which were self-reported by young people. By reducing or ceasing their substance use and developing improved social skills young people are less likely to reoffend. The efficacy of the program in achieving this outcome was noted by representatives from NSW probation and parole and local law enforcement.

“...Without TCF, my client probably would have reoffended and gone to jail...”
– NSW Probation & Parole officer

Finally by providing at-risk young people with a safe place to stay, Government also benefits as a result of a **decrease in the need for homelessness support services**. As earlier described, in the medium to long-term as a result of the transition support that TCF provides there is also an increase in the number of young people with stable housing.

4. AOD sector

As one of only a small number of youth focussed drug and alcohol rehabilitation programs in Australia, Triple Care Farm makes a significant contribution to the wider AOD sector. Throughout its operating history the program has demonstrated a commitment to the continual improvement of its services. This has been achieved through a substantial investment in ensuring that all areas of its operations are developed based upon research and evidence based practice.

TCF's evidence based practice involves four key elements: 1) on-going evaluation of its programs, processes and procedures; 2) regular benchmarking against established best-practice; 3) investment in the professional development of staff; and critically, 4) learning from and disseminating insights to others working in the sector.

TCF contributes to improving the sharing of information amongst providers through the leadership role it takes within sector peak bodies, as well as through its participation in Mission Australia's AOD Community of Practice (See section 2.1). Drawing on the findings of a recent academic study of the CoP and consultation with the Network of Alcohol & other Drugs Agencies (NADA), it was observed that these activities led to the occurrence of two material outcomes for the AOD sector. Firstly, the organisations involved develop **improved risk / critical incidence management**. In their study of the CoP, Jones et al found that members willingly share their knowledge and experience of client risk management and that it assists in the development, implementation and review of policy and procedure¹⁷.

The CoP helps the members to review critical incidences - risk management and how to prevent in the reoccurrence.

NADA – the peak organisation for the non-government AOD sector in NSW

¹⁷ Jones et al 2013

Secondly, the CoP was also observed as generating **cost efficiencies from shared professional development and training**. This occurs as individual clinicians learn from each other's experiences and gain access to valuable resources.

These material changes for CoP members are understood have wider benefits for the sector as other services are able to leverage an emerging evidence base that improves upon existing best practice. In turn, the sector has a greater capacity to influence important policy reforms and demonstrate the need for funding. The long-term impact of this is an increase in the number, and effectiveness of AOD services supporting young people. Robert Stirling, Director of Planning and Strategy for NADA noted the development of the Junaa Buwa and Mac River programs, which were based upon TCF's service model, as examples of where this has already occurred.



4 Measuring change

4.1 Approach and data sources

The measurement approach of this analysis sought to identify which indicators should be used to demonstrate the outcomes experienced by each stakeholder group and subsequently to determine the quantity of change that has occurred for each outcome.

To achieve this three primary data sources were drawn upon:

Student entry / exit report database: Triple Care Farm has maintained a rich data set containing both demographic and program related information of its students. The database provided to SVA Consulting included all students who had participated in the program during the investment period. At the commencement of the project SVA Consulting worked with the TCF research manager to de-identify all records and identify inconsistencies in the data.

Aftercare outcomes reports: Triple Care Farm has also collected data documenting the progress of young people who participate in the Aftercare program. These reports record the progress of students three and six months after they have completed the on-site component. Information tracked includes substance use, housing, education / training and employment outcomes. Due to a change in the reporting methodology, consistent data across each of these areas was only available from 2009-2012. Furthermore, while substantial effort is made to maintain contact with all participating students for the duration of the Aftercare program, the data is limited by young people who drop-out of the program early / become unavailable for contact.

Stakeholder consultations: While the program has maintained a longitudinal evidence base of the immediate to short-term outcomes experienced by young people, there was limited data demonstrating the long-term impact for participants. Furthermore, outcome data had not previously been recorded for the other stakeholder groups included in the analysis. The stakeholder consultation process undertaken as part of this analysis has contributed to building this body of evidence.

4.2 Modelling the indicators of change

The availability of longitudinal attendance data combined, with the in-depth consultations permitted the use of relatively sophisticated analysis to determine appropriate indicators and occurrence rates for each outcome.

To ensure the full range of outcomes which had been experienced by stakeholders was identified, interviews were initiated by openly asking participants to describe what changes had occurred as a result of the program (See Appendix 2). Following this, to develop a deeper understanding of the changes experienced, interviewees were asked to indicate how much change had occurred (ranging from none to allot) and how important each change had been (ranging from not important to very important). Crucially, interviewees were also asked to describe how long each change had lasted for. In addition to consultations with TCF management and staff, this information assisted in testing and determining the materiality of each outcome.

By applying this aggregated data and threshold assumptions to the student database the number of young people experiencing each outcome could be estimated. Threshold assumptions set the minimum investment that a young person would need to make in the program in order to realise a particular outcome. As described in section 2.3 completion of the 12 week on-site program is not a definitive indicator that change has occurred – some students may experience the identified material outcomes in a shorter period, while others may require additional care and support. However,



consultations did suggest that certain participation stages needed to be met in order for a change to be attributable to Triple Care Farm. For instance, to *develop basic self-care skills* a student must have time to learn and practice the skills taught by the program, which typically takes four weeks (28 days)/

The assumptions underpinning the calculation of the indicator for ‘Young people’ outcome, *Maintained reduction of AOD use*, is set out in Table 4.1 below. A similar process was used to calculate the occurrence of outcomes for each other stakeholder group.

Outcome		1.5 Maintained reduction of AOD use					
Indicator/s:	Inferred number of unique young people who have participated in the aftercare component of the program and experienced a change which was: a) <u>maintained</u> or b) <u>continued for sometime after the program</u>						
Rationale:	<ul style="list-style-type: none"> To avoid double counting the outcome is only valued once per student (multiple stays excluded). As a later stage outcome, to have occurred and be attributable to TCF a Young Person must have participated in aftercare. Of those, the total number who have experienced the change has been estimated based on the proportion of interviewees who described that the change was a) <u>maintained</u> or b) <u>continued for sometime after the program</u> 						
Calculation:	Source:	2009	2010	2011	2012	2013	TOTAL
# of unique students:	Database	62	71	70	82	85	370
# of unique students who have completed after care:	Database	39	40	36	47	45	207
Inferred % of students experiencing a change that was <u>maintained</u> :	<i>Interviews</i>	~56%					
Inferred % of students experiencing a change that only <u>continued for sometime after the program</u> :	<i>Interviews</i>	~22%					
# of students who experienced a <u>maintained</u> change:	Calculation	22	23	20	26	25	116
# of students who experienced a change which only <u>continued for sometime after the program</u> :	Calculation	9	9	8	10	10	46
Total number of students who experienced change:	Calculation	31	32	28	36	35	162
<i>Proportion of unique students:</i>	Calculation	50.0%	45.1%	40.0%	43.9%	41.2%	43.8%

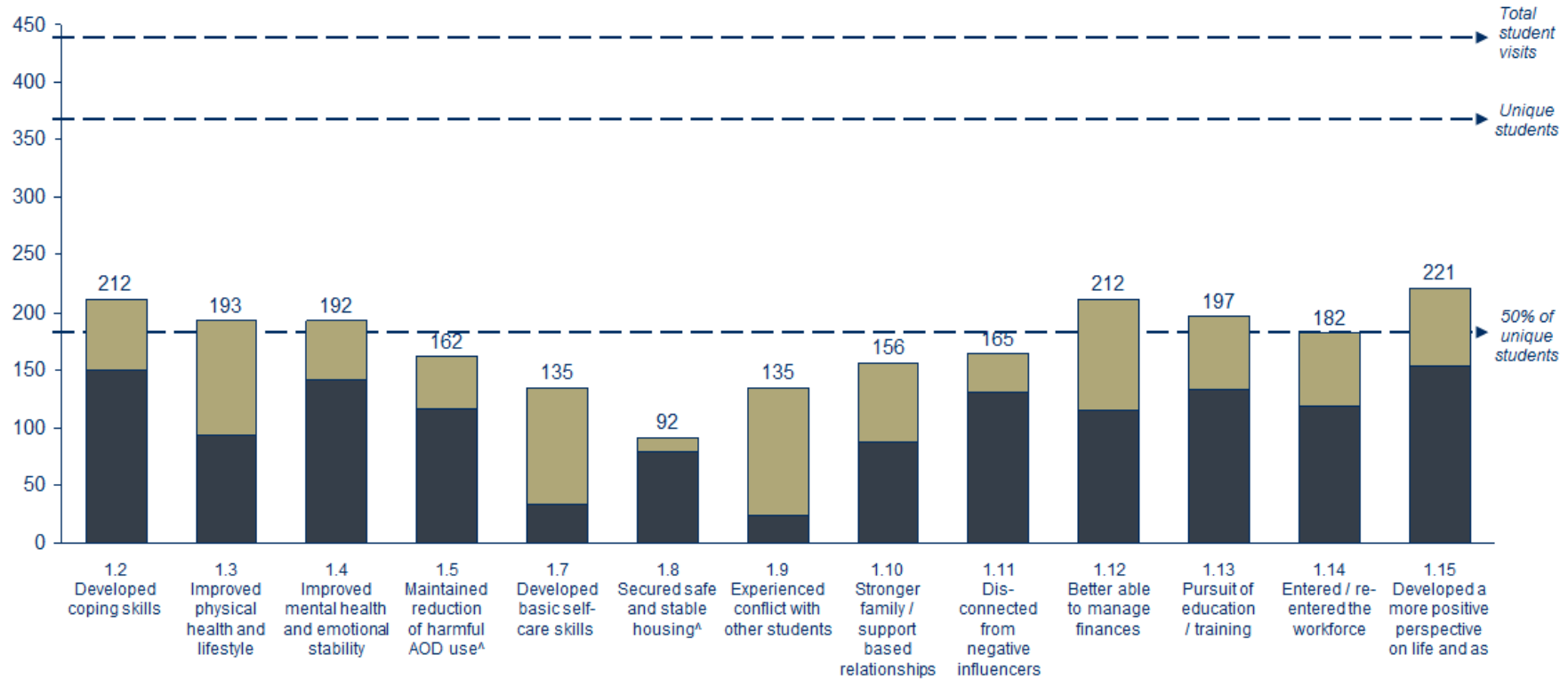
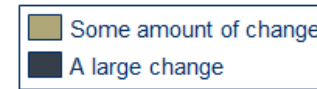
Table 4.1 – Indicator calculation example for outcome 1.5 Maintained reduction of AOD use

Figures 4.1 and 4.2 present the estimated incidences of the material outcomes experienced by each stakeholder group. On average, each of the material outcomes are experienced by ~50% of the unique young people who participate in the program. This is a significant achievement given magnitude of the challenges faced by the young people who participate

The full set of indicators for each of the outcomes valued in this analysis is set out in Appendix 4.

Instances per material outcome* - Young people (2009-2013)

Number of Young People



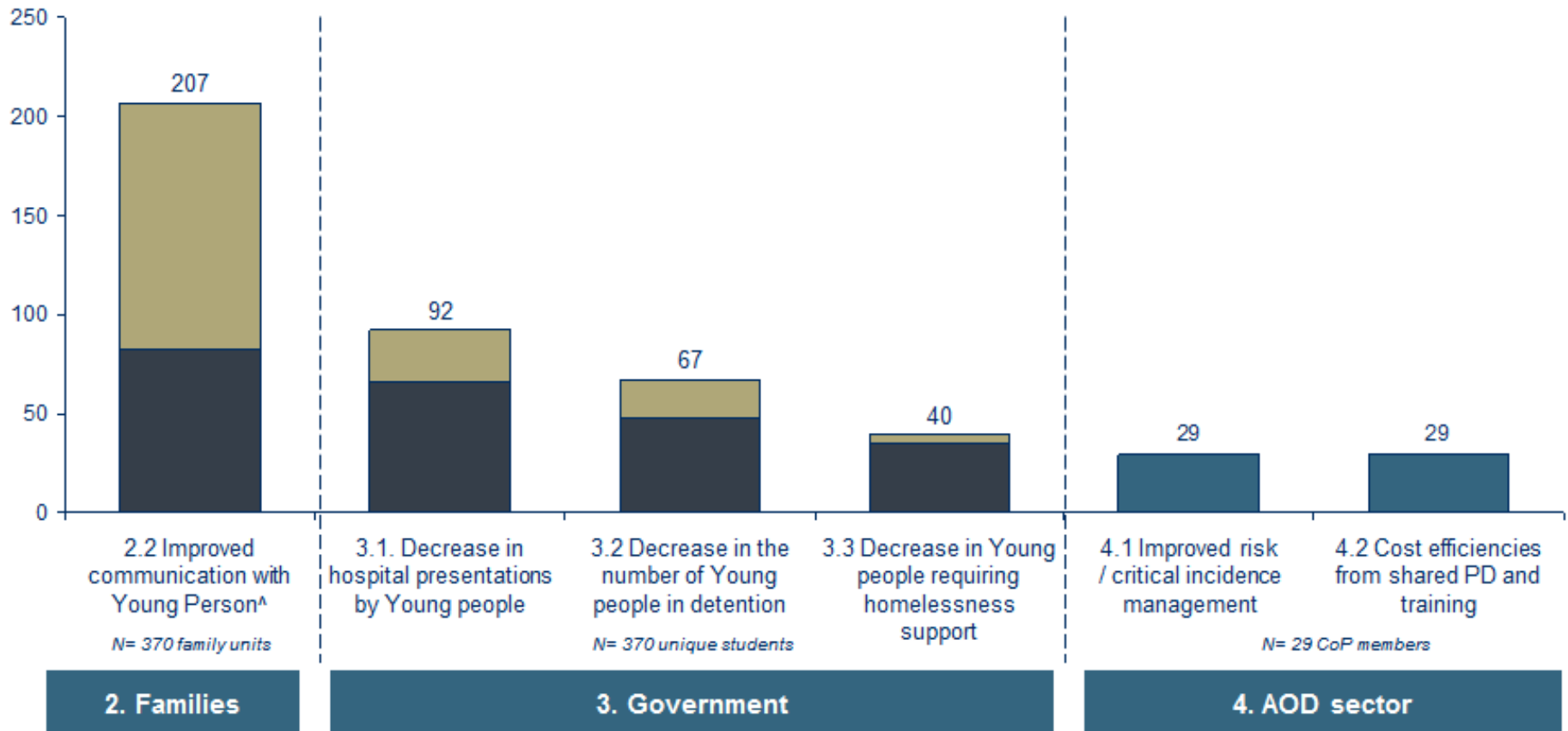
Notes: * Outcomes 1.1 and 1.6 are not shown as they refer to number of student days (see appendix); ^a Refers to Young People who experienced a) a change that was maintained or b) a change that lasted for sometime after the program.

Figure 4.1 – Instances of occurrence for outcomes experienced by ‘Young people’



Instances per material outcome* - Families / carers, Government, AOD sector (2009-2013)

Number of instances



Notes: * Outcomes 2.1 is not shown as they refer to number of student days (see appendix); [^] Refers to Families who experienced a) a large change or b) some amount of change
Source: SVA analysis

Figure 4.2 – Instances of occurrence for outcomes experienced by Families / Carers; Government and the AOD sector

5 Valuing change

5.1 Approach to valuation

Financial proxies

Financial proxies are used to value an outcome where there is no market value. The use of proxies in this SROI forms a critical component of the valuation exercise as most of the outcomes identified have no market values. There are a number of techniques used to identify financial proxies and value outcomes. Importantly, within an SROI, the financial proxy reflects the value that the stakeholder experiencing the change places on the outcome. This could be obtained directly through stakeholder consultation, or indirectly through research. Techniques for valuing outcomes are set out in Appendix 5.

The financial proxies approximate the value of the outcome from the stakeholders' point of view. The main challenge faced when determining the most appropriate proxy for the outcomes experienced by stakeholders was being able to explain the concept of financial valuation. In determining appropriate financial proxies, we were informed by:

Stakeholder consultations: Testing financial proxies during the stakeholder consultation process was restricted by the limitations imposed by phone interviews and the limited familiarity of interviewees with financial valuation. Young people found it particularly difficult to disaggregate the value of the range of outcomes they had experienced. As such, to help provide a reference point for the analysis young people were informed of the cost to deliver the program and asked how much of this amount they would have been willing to spend in order to attend. Although it was difficult for most to contextualise the size of the investment, young people nearly unanimously indicated that they would have spent the entire amount. Taking a replacement valuation approach, interviewees were also asked to suggest similar ways they could have achieved some of the outcomes they had experienced. Although specific valuation questions were considered abstract, interviewees were comfortable with ranking the outcomes they had experienced from most to least valuable. This proved a valuable reference point when assessing appropriate financial proxies.

Social Ventures Australia research and experience: During the analysis both literature on population outcomes, as well as SVA experience was drawn upon to supplement the information that was collected throughout the stakeholder consultation process, as well as to inform assumptions of financial proxies where guidance from stakeholders was not available. SVA has undertaken 70 SROI analyses in the past four years, of which a substantial number has included programs involving young people and / or AOD use.

Discussion with TCF management and staff: Given their significant experience working with the cohort of young people who participate in the program management and staff were consulted to test financial proxies.

Financial proxies in this SROI analysis have been identified primarily by using the revealed preference technique, which looks at the market price of a similar service, program or activity that could achieve a similar outcome for the stakeholder. Other techniques used include potential resource reallocation from changes in demand for service and cash transactions. Examples of each of these techniques in the context of the outcomes identified in this analysis are as follows:

- *Revealed preference:* When valuing the outcome *disconnected from negative influences* for 'Young people', we used the cost of relocating (\$4,460) as a financial proxy, being an alternative approach to achieve the outcome which was suggested by interviewees.



- *Resource reallocation:* When valuing a *reduction in acute care hospital presentations* from the perspective of Government, we referred to the national average cost per case mix adjusted separation for a psychiatric hospital based on two admissions per year, calculated as \$17,720. For every young person diverted from hospital attributable to their participation at Triple Care Farm, \$17,720 worth of State government resources were freed up for other purposes.
- *Cash transaction:* When valuing the outcome *cessation of AOD and tobacco use* for ‘Young people’, we calculated the reduction in spending on drug and alcohol consumption as a proportion of their income. This represents an actual cash saving.

All financial proxies along with a description of their rationales and the approach to calculation are set out in Appendix 6.

5.2 Valuation filters

To present an accurate view of the unique value created through Triple Care Farm, valuation filters (SROI filters) are applied to the financial proxies. This is in accordance with the SROI principle of not over claiming. Different techniques were used to identify the most appropriate filter for each of the outcomes, including SROI filter assumption categories (see Appendix 7).

Deadweight:

To estimate how much of the change would have happened anyway (i.e. without the intervention of TCF), stakeholders were asked to estimate the degree to which they believe the change would have occurred anyway.

For ‘Young people’, interviews with students who had only participated in the program for a very short period were particularly helpful in assisting to estimate deadweight. While preferable, it was not possible to use comparable population data as none was available.

Excluding the AOD sector, some amount of deadweight has been applied to each material outcome. However, where it has been applied it has not exceeded 25 per cent (apart from the negative *outcome experienced conflict with other students*). This reflects the limited opportunities to achieve the outcomes through other means.

Attribution:

Attribution estimates how much of the change was as a result of other stakeholders or activities which were not included in the investment. An understanding of the contribution of others to each outcome was determined through stakeholder engagement and applied to assumption categories to calculate attribution.

For outcomes that occur during the on-site component of the program, limited or no attribution was assumed. However, as many of the material outcomes which occur after the completion of the formal on-site program it was appropriate to assume a certain amount of attribution. For the most significant changes such as a maintained reduction of harmful AOD use experienced by young people, attribution was assumed as 50% reflecting the important role that their families / support networks play in providing on-going support.

Displacement:

Stakeholder consultations as well as the student database were used to identify if any of the outcomes will displace other activities.



A limited amount of displacement was recognised to occur for four of the outcomes experienced by ‘Young people’: 1.2 *Developed coping skills*; 1.3 *Improved physical health and lifestyle*; 1.4 *Improved mental health and emotional stability*; and 1.6 *Removed from harmful environment and feeling safe / secure*. This accounts for the minority of young people who were either receiving treatment, had stable accommodation or were employed prior to commencing the program.

Duration:

Duration refers to how long an outcome lasts for. The duration of each of the identified outcomes ranged between one and five years. In general, later stage outcomes had longer duration periods, reflecting both the significance of and difficulty involved in achieving them.

5.3 Valuing outcomes

The adjusted value is the value calculated for each outcome, which takes into account the following components:

- Quantity: the number of stakeholders that will experience an outcome
- Financial proxy: value of the outcome
- SROI filters: accounting for whether the outcome would have happened anyway (deadweight), who else will contribute to the change (attribution), whether the outcome will displace other activities or outcomes (displacement) and the how long the outcome will last for (duration and drop off)

The application of the SROI filters results in an adjusted value for each financial proxy identified for the analysis. This adjusted value represents the value of the outcome that can be solely attributed to the investment described in this analysis. A worked example of the adjusted value for the outcome for ‘Young people’ - *Maintained reduction of AOD use*, is set out in Figure 5.1 below.

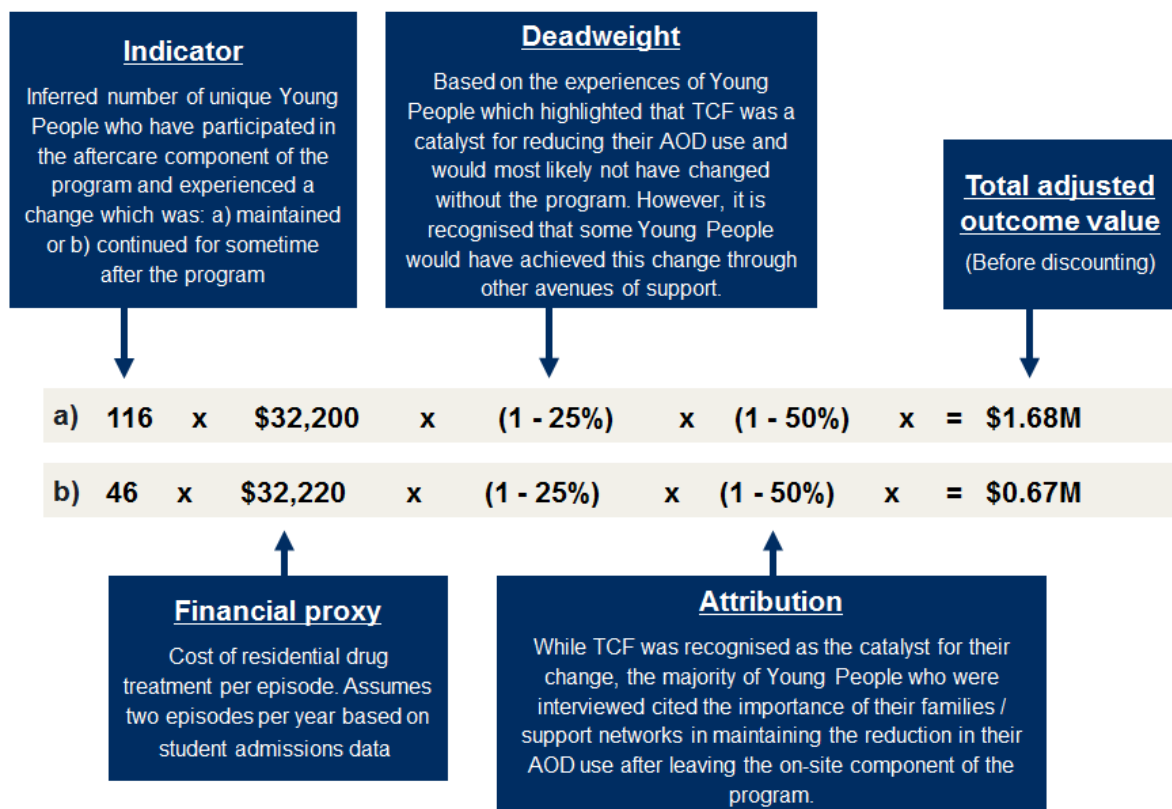


Figure 5.1 – Worked example for adjusted value of the outcome

The total adjusted value for outcomes sums the value created for each group of stakeholders experiencing change and also incorporates duration and drop-off. The following table is a summary of the total adjusted for all of the outcomes experienced by each stakeholder group.

OUTCOMES	TOTAL VALUE FOR OUTCOME	VALUE PER STAKEHOLDER GROUP
1. 'Young people'		
1.1 Cessation of AOD and tobacco use	\$419,174	\$27,149,949 (63.0%)
1.2 Developed coping skills (AOD use, gambling and mental health)	\$652,877	
1.3 Improved physical health and lifestyle	\$1,206,001	
1.4 Improved mental health and emotional stability	\$1,836,327	
1.5 Maintained reduction of harmful AOD use	\$6,046,083	
1.6 Removed from harmful environment and feeling safe / secure	\$5,112,806	
1.7 Developed basic self-care skills (Hygiene, cooking, cleaning)	\$205,781	
1.8 Secured safe and stable housing	\$1,727,566	
1.9 Experienced conflict with other students	(\$8,060)	
1.10 Stronger family / support based relationships	\$1,916,582	
1.11 Disconnected from negative influencers	\$314,096	
1.12 Better able to manage finances	\$1,233,225	
1.13 Pursuit of education / training	\$1,439,864	
1.14 Entered / re-entered the workforce	\$2,269,337	
1.15 Developed a more positive perspective on life / aspirations for the future	\$2,778,291	
2. Families / carers		
2.1 Reduced concern for Young Person's immediate well-being	\$1,734,622	\$2,416,534 (5.2%)
2.2 Improved communication with Young Person	\$681,912	
3. Government		
3.1 Decrease in the number of acute care hospital presentations	\$3,683,691	\$13,411,711 (31.3%)
3.2 Decrease in the number of young people in detention	\$9,245,766	
3.3 Decrease in young people requiring homelessness support services	\$482,254	
4. AOD sector		
4.1 Improved risk / critical incidence management	\$93,960	\$181,830 (0.4%)
4.2 Cost efficiencies from shared PD and training	\$87,870	
Total before discounting		\$43,160,023

Table 5.1 – Value created by stakeholder group

6 Results of the analysis

6.1 Calculating the Social Return on investment

Triple Care Farm has delivered an SROI ratio of 2.9:1 based on the investment and operations for the FY2009 to FY2013 period.
That is, for every \$1 invested, approximately \$3 of social and economic value is created.

$$\text{SROI Ratio } 2.9:1 = \frac{\text{Present value of benefits } \$39.4\text{M}}{\text{Present value of investment } \$13.5\text{M}}$$

If only cash investment is considered (\$12.3M), Triple Care Farm has delivered an SROI ratio of 3.2:1

The SROI ratio is generated by comparing the total value of the adjusted outcomes experienced by stakeholders to the investment required to create the value. That comparison is depicted below in Figure 6.1.

Investment and value created by stakeholder group* (FY2009-13)

Millions of dollars

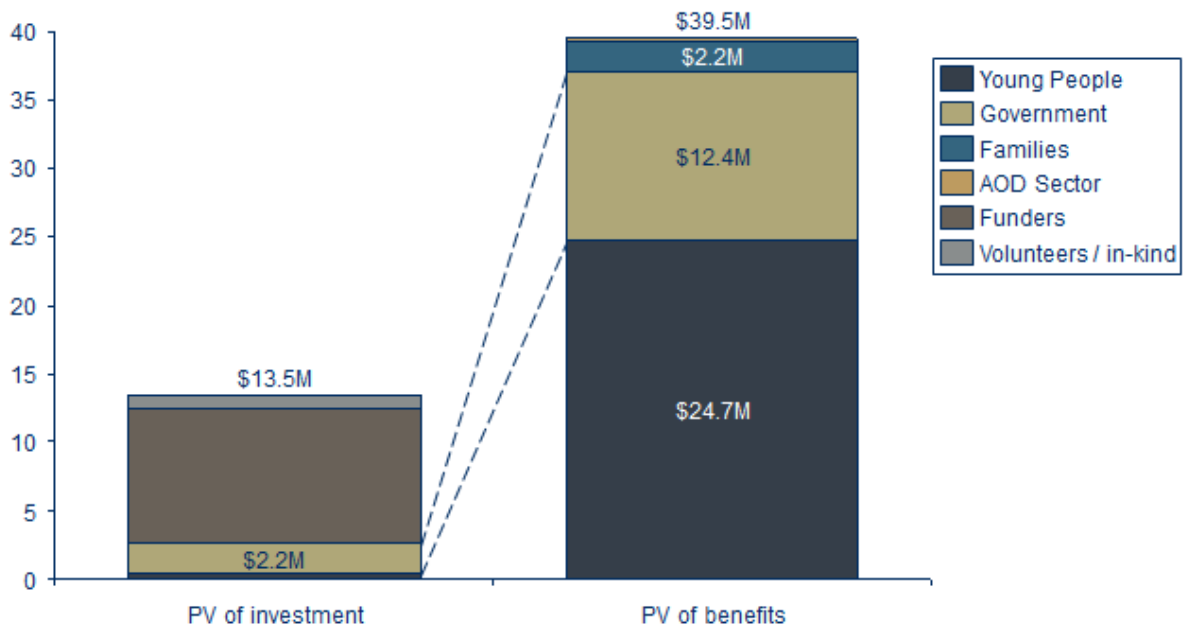


Figure 6.1 – Investment by and value created for each stakeholder group

There are a number of issues that need to be considered when interpreting the SROI ratio. Some of the key issues include:

- The values for the outcomes created are estimates and provide an indication of the value that was generated by Triple Care Farm.
- The SROI ratio represents the additional value created, based on the SROI principles. This is the unique value that is created by Triple Care Farm attributable to the investment for this specific period.
- SROI ratios should not be compared between organisations without having a clear understanding of each organisation's mission, strategy, program or stakeholder logic, geographic location and stage of development. A judgement about investment decisions can only be made when using comparable data.
- To calculate the present value, the costs and benefits incurred or generated in different time periods need to be aggregated. For these costs and benefits to be comparable, a process called discounting is used. A discount rate of 2.5% was used, which was the Reserve Bank of Australia's average target inflation rate.

6.2 Testing assumptions

It is important that the SROI calculations are tested by understanding how the judgements made throughout the analysis affect the final result.

In this section, SVA Consulting identified the judgements that are most likely to influence the SROI ratio, and considered how sensitive the ratio is to changes in these judgements. To decide which judgements to test, two key questions were considered:

- **How much evidence is there to justify our judgement?** The less evidence available, the more important it is to test
- **How much does it affect the final result?** The greater the impact, the more important it is to test.

The assumptions that were tested in the sensitivity analysis for this report are set out in Table 6.1 below.

As with any financial modelling, it is expected that changes to underlying assumptions will result in changes to the SROI ratio. In the high and low scenarios tested in this sensitivity analysis, the SROI ratio remains in the range of 1.7:1 to 3.4:1, indicating that - even with highly conservative assumptions - social value created by Triple Care Farm is likely to be in excess of the investment in those programs.



Variable	Baseline judgement / SROI ratio	Lower threshold / New SROI ratio	Upper threshold / New SROI ratio
Deadweight – Testing the assumptions for the extent to which each outcome would have occurred without TCF	As per Appendix 8 SROI ratio = 2.9	Base case + 25% for each outcome SROI ratio = 2.1	Base case - 25% for each outcome SROI ratio = 3.3
Attribution – Testing the assumptions for the extent to which other people / organisations contributed to each of them		Base case + 25% for each outcome SROI ratio = 1.7	Base case - 25% for each outcome SROI ratio = 4.0
Duration – Testing the assumptions for the duration of which each outcome is expected to last for		Each outcome lasts only for a duration of 1 year SROI ratio = 2.0	Base case + 1 year SROI ratio = 3.4

Table 6.1 – Sensitivity analysis

7 Conclusion

7.1 Creation of value

This analysis demonstrates that Triple Care Farm has generated significant social and economic outcomes for the young people it works with, as well for other stakeholders who are affected by the program. The achievement of these outcomes is reliant upon the valuable work that the program undertakes with young people during their on-site stay at the Farm and throughout their transition period, in addition to TCF's commitment to increasing the capacity of the wider AOD sector.

"...Going to the farm was the best thing I have ever done in my life. It taught me how to live again..."
– 2013 student

Value by stakeholder group

Overall, the largest proportion of value generated by Triple Care Farm accrues to the young people who participate (63%). Notably, due to the extent of change that occurs for young people, the value of the program for them alone is nearly twice the investment cost (see figure 7.1). More than a third of this value (37.5%) is attributable to outcomes relating to improvements in their Health & Wellbeing. This reflects the large number of young people who have been able to achieve a *maintained reduction of harmful AOD use*.

Triple Care Farm SROI ratio by stakeholder

Social value per \$1 investment

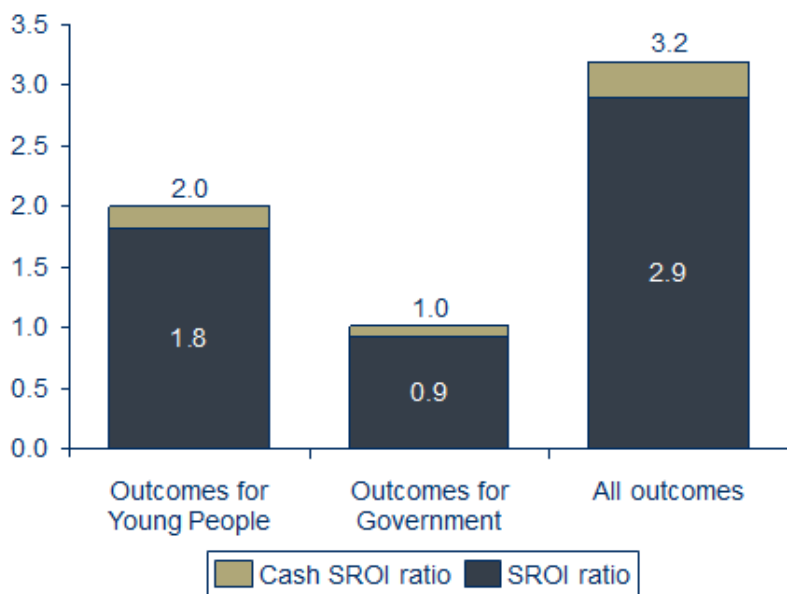


Figure 7.1 – SROI ratio by stakeholder

On average the program creates ~\$73,000 of social value for each unique young person who participates and ~\$61,000 for each student visit. However, a young person who participates and experiences each of the 15 material outcomes will generate ~\$130,000 in social value. Due to the limitations of the stakeholder consultation process it was not possible to differentiate how value has been created for different sub-groups of 'Young people'. For example it is understood that



characteristics such as the type and frequency of substance use will affect how a young person experience's change. This is an area that will need to be explored as part of a future evaluation.

The majority of the remaining value accrues to Government; while accounting for only ~13% of the investment cost of the program, Government benefits from ~31% of the value created. The majority of this value is attributable to the potential resource allocation within the justice system. Specifically, by diverting 67 young people from detention during the investment period, Triple Care Farm generated ~\$9.2m in economic value.

Value over time

It is also important to note that while the on-site component is the most significant part of the program in terms of resources invested, the majority of the value created by the program is attributable to outcomes that occur, or are fully realised afterwards. As shown in figure 7.2, nearly two-thirds of the value created is generated by long-term outcomes. This further reinforces the importance of the support that the Aftercare program provides.



Figure 7.1 – Value by stakeholder group and occurrence

7.2 Reasons for success

Triple Care Farm's vision is to provide young people experiencing co-morbid mental health and AOD issues with "a safe place for change" so that they can create "a life worth living". The evidence provided by this analysis attests that the program is achieving this goal and has helped to change, if not save the lives of hundreds of young Australians. By consulting with those who have participated in the program over the last five years the program has been shown to have a significant long-term impact.

"...The Farm took away the mess and reminded me of who I was and where I wanted to go. They had faith in me and reminded me who I was and what I could do..."
– 2009 student

The young people that Triple Care Farm works with are often highly marginalised with limited access to health services. Furthermore, there are an extremely limited number of alternative rehabilitation programs that cater specifically for them. Many of the young people who arrive at the farm have had several attempts in adult detox facilities. In this context the importance of the program's success is magnified.

Triple Care Farm's success has been built upon the strategic and evidence based design of its program. Five critical elements of this design are:

- **A holistic model of care** – Triple Care Farm recognises that to overcome AOD abuse and comorbid mental illness, young people require care that can address the range of issues they face. By providing treatment that includes counselling, medical care, case management, educational / vocational training and living skills, young people experience changes across a spectrum of life domains. Progress in one area supports change in another enabling young people to transform their own lives. This holistic model of care also means that the benefits of the program extend past the young people themselves, to also improve the lives of their families / carers.
- **An individualised approach** – Within this structured holistic treatment model Triple Care Farm delivers a highly individualised program. Staff work with each young person to understand their specific needs and to help them set and progress towards achieving their own life goals. This approach empowers young people to take responsibility for their own lives, but gives them the support and tools they need to do so. The program allows young people to progress at their own pace and understands that set-backs can occur. By maintaining faith in its students, Triple Care Farm instils young people with hope and helps them to realise their potential.
- **On-going support** – While the program provides its most intensive care for young people during their stay on the farm, the aftercare program provides essential ongoing support as they transition into their new lives. Going home can be a daunting time for young people who often find familiar circumstances and influences despite their new outlook and goals. Without stable accommodation and a strong support network it is incredibly difficult to maintain the changes they have begun to make in their lives. Triple Care Farm's Aftercare workers play a vital role in helping young people and their families navigate challenges as they arise and realise long-term improvements in their lives.

"...The aftercare program was astonishing – he was there when I really needed him. I stayed clean because of the support it gave me..."
– 2012 student

- **A commitment to continuous improvement** – Triple Care Farm has demonstrated a remarkable openness to critically review its activities and regularly assess itself against best-practice. As a result the program has, and continues to evolve as it seeks to continuously improve the outcomes it generates for young people. An example of this is the development of a new onsite detox clinic which will respond to the severe lack of appropriate facilities for young people. Furthermore, TCF's willingness and commitment to sharing insights with the wider sector is making a valuable contribution towards increasing the both the number and effectiveness of youth based AOD services in Australia
- **Experienced and dedicated staff** – The success of Triple Care Farm is a strong reflection of the quality of its management and staff. Interviews with young people and their families consistently highlighted the dedication and professionalism of the program's staff as one of its core strengths. Examples were abundant of staff performing over and above their contracted duties to provide the best possible care. Investing in professional development is a key element of the program's commitment to continuous improvement. As a result, Triple Care

Farm has built a team that is highly experienced and possesses significant expertise of youth related AOD issues. Staff tenure is remarkably high, with many of the current staff working in the program for the entire duration of this report's analysis period.

"...it was all the staff, not just formal parts of the program which made it great. All of the staff were always there and available to talk to you - you didn't have to make an appointment if you wanted to talk. It helped me to open up..."
– 2010 student

7.3 Recommendations

Through this project, SVA Consulting has gained insights into to how the value created by the program may continue to be increased. An important element will be on-going measurement and evaluation of the program to inform continuous and communicate its powerful story to existing and potential funders. Detailed recommendations have been shared with Triple Care Farm management to consider as it continues to grow its impact and influence.



8 Appendix

1. Social Return on Investment

The SROI methodology was first developed in the 1990s in the USA by the Roberts Enterprise Development Fund, with a focus on measuring and evaluating organisations that provided employment opportunities to previously long-term unemployed. During the early to mid-2000s, the United Kingdom (UK) Office of the Third Sector provided funding to continue the development and application of the SROI methodology, resulting in the formation of the UK SROI Network.

The SROI principles developed through the UK SROI Network guide SROI analyses. These principles, described in Table A1.1, form the basis of an SROI.

PRINCIPLE		DEFINITION
1	Involve stakeholders	Stakeholders should inform what gets measured and how this is measured and valued.
2	Understand what changes	Articulate how change is created and evaluate this through evidence gathered, recognising positive and negative changes as well as those that are intended and unintended.
3	Value the things that matter	Use financial proxies in order that the value of the outcomes can be recognised.
4	Only include what is material	Determine what information and evidence must be included in the accounts to give a true and fair picture, such that stakeholders can draw reasonable conclusions about impact.
5	Do not over claim	Organisations should only claim the value that they are responsible for creating.
6	Be transparent	Demonstrate the basis on which the analysis may be considered accurate and honest and show that it will be reported to and discussed with stakeholders.
7	Verify the results	Ensure appropriate independent verification of the analysis.

Table A1.1 - SROI Principles

2. Interview guides

'Young people' (past students)

Background

1. When did you first become involved with TCF?
2. For how long were you part of the program?

Inputs, outputs and outcomes

3. What made you want to join the program? What were you hoping to change in your life?
4. What did you do as part of the program?
5. What do you put into the program? Time? Effort? Money? How much?
6. What were some of the things that changed for you soon after you started the program?
 - a. Specifically, describe what Triple Care Farm helped you do once you started?
 - b. How important was this support? Do you think you could have gotten support with these things somewhere else?
7. What are some of the good and bad things that have happened in your life because of Triple Care Farm?
 - c. [Prompts for areas to explore: Drug & Alcohol use; Offending; Health (mental & physical wellbeing); Relationships / Friendships; Education; Employment; Community Engagement?]
8. What things do you do differently now that you didn't do before the program?
9. Has anything changed for your family as a result of your involvement with the program?
10. How do you think the changes you have experience affected your future?
 - a. What are some of your plans for the future? Have you always had these plans or you have changed them since undertaking the program?
11. Are the any other changes you would like to share with me that have happened since joining the program?

Measuring and valuing change

[Note the changes in the table below need to be aligned with the outcomes identified through the program logic AND Q3-5 above. Below is an indication of how some changes might be segmented.]

12. Based on what you told me as well as what I have heard about the experiences young people report about the program, I would like you to help me understand how much these different things happen to you. I will read these out to you and I would like you to tell me if you have experienced this not at all, a little bit, quite a bit, or a lot? *(Interviewer to tick the correct response).*
13. How important were these changes to you? *(interviewer to tick the correct response)*
[Rating: Not important, a little important, Important, critical, N/A]
14. How long did each of these changes last for?

Family member / carers

Background

1. When was your family member involved with the TCF program?
2. How long did they participate in the program?

About the changes experienced by the students

I would like you to consider some of the changes in the lives and behaviour which you have observed in your [relative] participating in the program.

If you would find it helpful, use specific examples of stories or experiences you have shared with your relative, though it is not necessary to reveal their names.

Inputs, outputs and outcomes

3. Why did your [relative] want to join the program? What were he / she hoping to change in their life?
 - a. What was their situation before entering the program?
4. What are some of the most important changes, good and bad, that *he / she* experienced as a result of the program?
 - a. [Prompts for areas to explore: Offending; Health (mental & physical wellbeing); Relationships / Friendships; Education; Employment; Community Engagement?]
 - b. Are there any negative consequences for students arising from their involvement with TCF?
5. Specifically, what things does he / she do differently as a result of the program that they didn't do before?
6. Which of the changes that you have described are
 - a. The most important / significant to your [relative]? Why?
 - b. Which of these changes are important to other people? Why?
7. What do these changes mean for the future of your [relative]?
8. How would he / she value the changes?
 - a. What are some other things he / she could have done that would have led them to experience the same changes?
 - b. What are some things or activities that young people like to do (and that have a market value)?
9. How would their lives have been different if this program did not exist?
 - a. What sort of services and support would have they received?
 - b. To what extent do you think he / she would have been able to achieve the things you have seen them do, if the program did not exist?
10. For the changes described in the lives, how long is each of them is likely to last for?
11. Before your [relative] came into the program what sort of support or governmental services would have they been using?
 - a. For example: welfare services/Centrelink, doctors/hospitals, child protection, police...



- b. Have they continued using or contacting these services more or less since their involvement with the program? How much less e.g. one less police call out per person, 6 months less working with employment service provider?

About the changes experienced by you and your family

Measuring and Valuing Impact

12. What has changed for you and your family as a result of your and your relative's involvement with the program? Which changes are most important?
13. What impact has this had on your life [and the life of your family, community]?
14. What do you do differently now that you didn't do before?
15. Are there any negative factors arising from your involvement with the program?
16. We are trying to understand how valuable the program is to you. As the world works on dollars and cents, we're trying to put this in dollar terms. We can do this by comparing what's changed for you to the value of other ways that could have happened, or by understanding how the program ranks compared to other things you value.

[Options for testing value:

Stated preferences technique

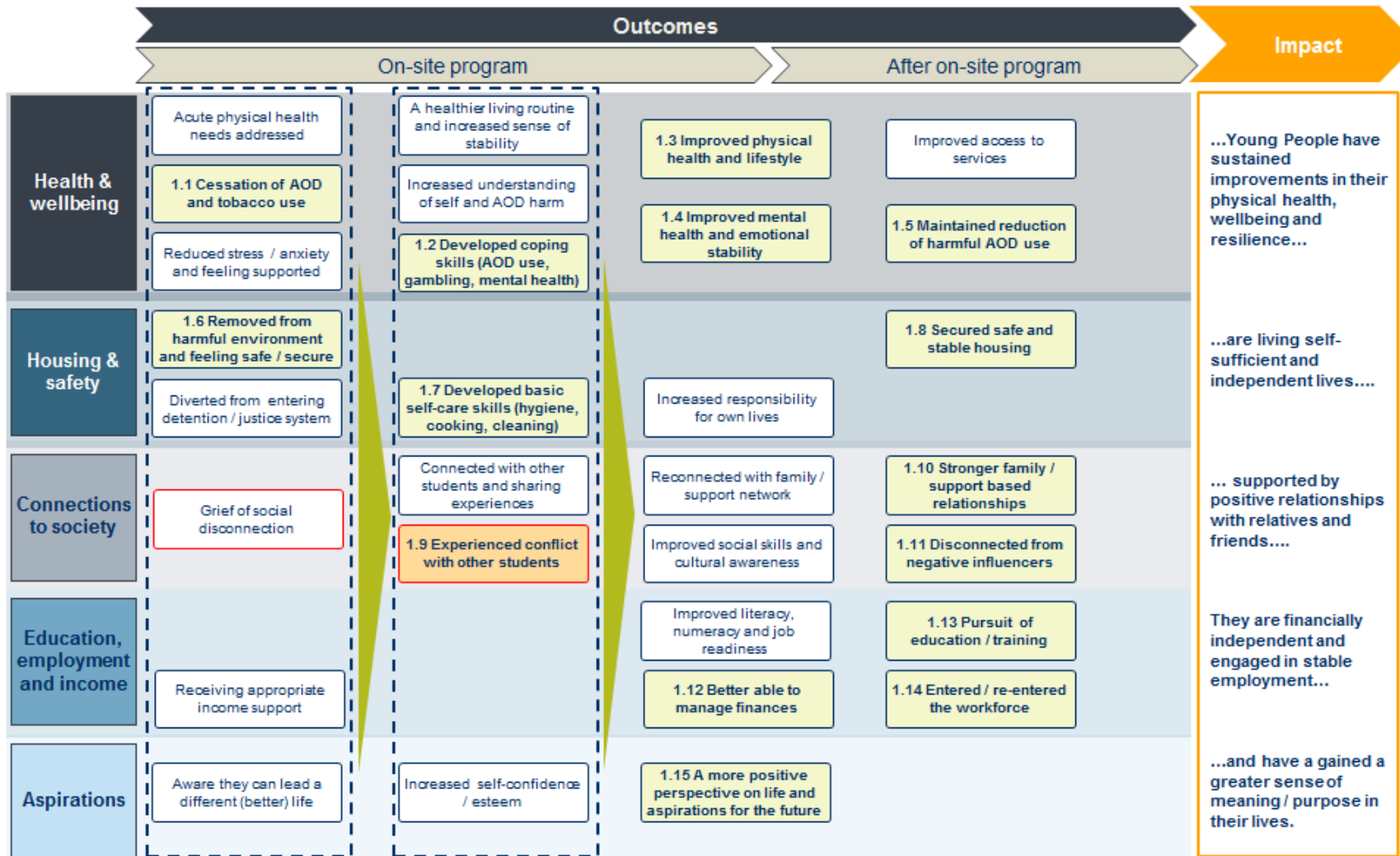
- *Willingness to pay: If you could have the money that it costs to deliver these changes in your pocket instead (\$x), what would you do with it? How much, if any, would you spend on your family member attending the program?*

Revealed preferences technique

- *Replacement valuation: What are some things you could do that would come closest to getting you the same changes you have experienced as a result of your [relative's] and your own involvement with the program?*
17. What would have happened for you and your family without the program?
 18. What other organisations or people, if any, played a role in helping you and your family achieve the changes you described?
 19. How long did you / do you expect these changes to last for?
 20. Has being involved in the program displaced other activities or outcomes you would have done / achieved?

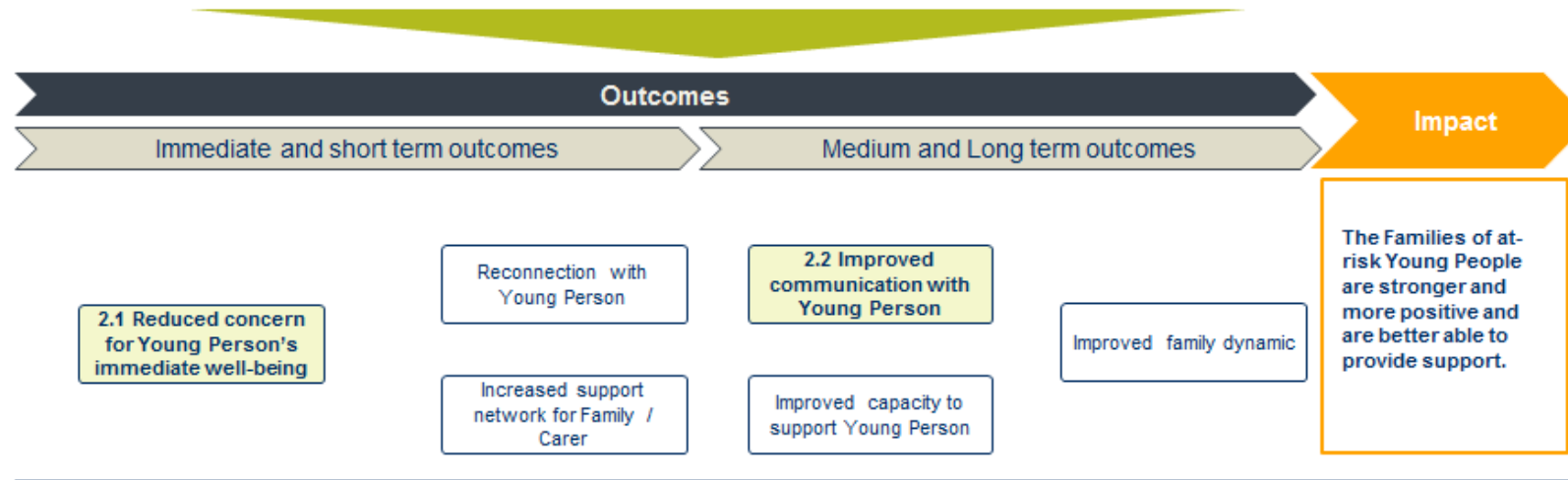
3. Stakeholder logics

1. 'Young people'

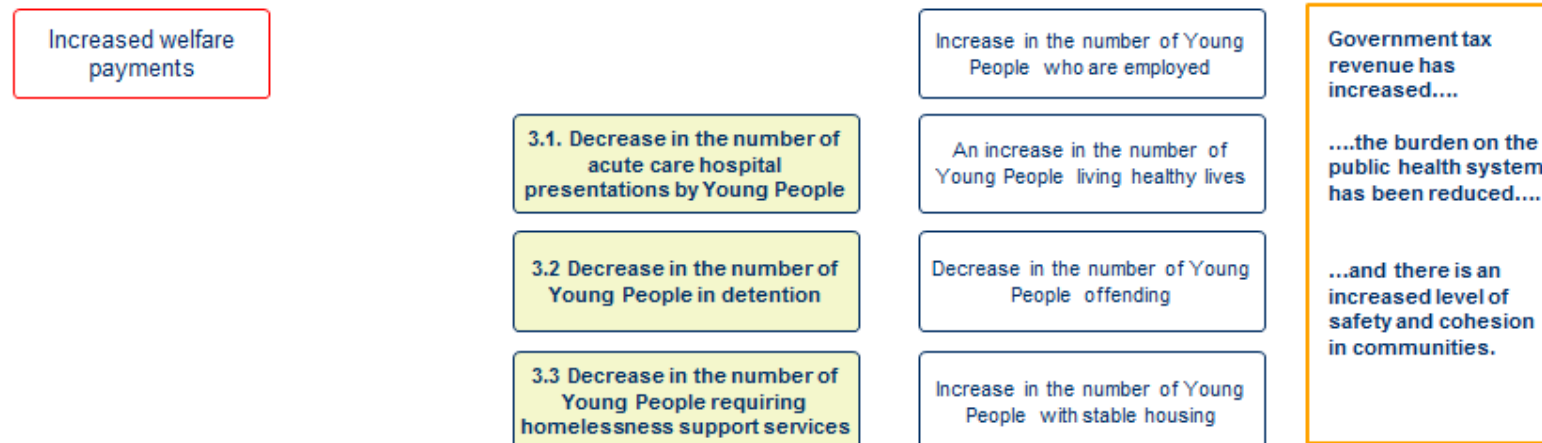


2. Families / Carers

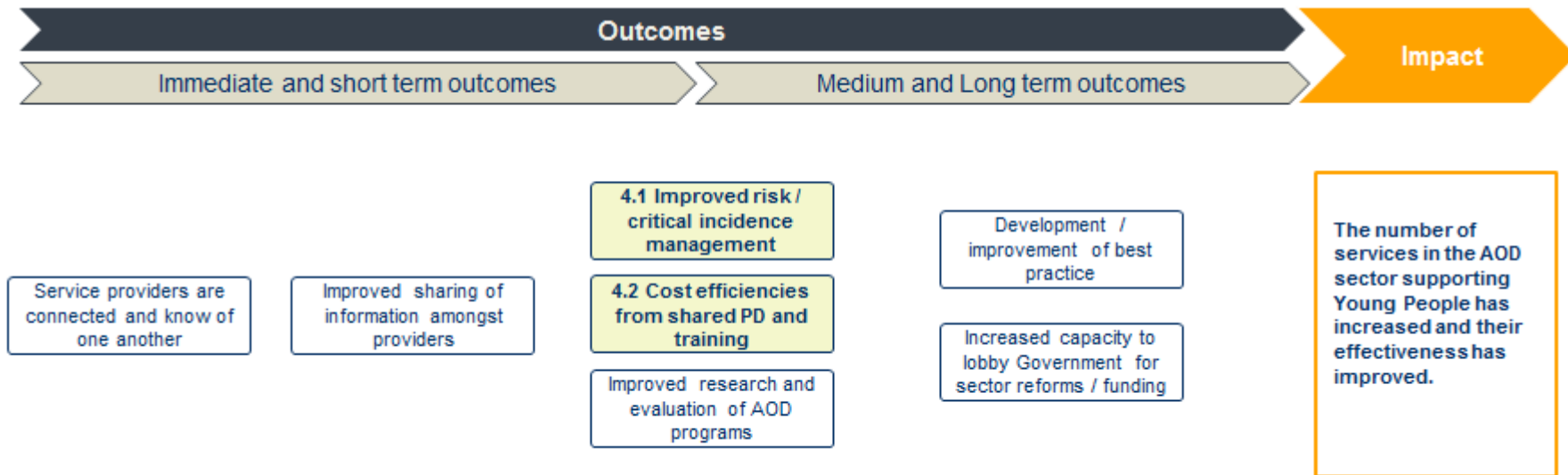
...as a result of the changes experienced by the Young People, other stakeholders also benefit...



3. Government



4. The AOD sector



4. Measurement¹⁸

OUTCOME	INDICATOR	QUANTITY				
		09	10	11	12	13
1. 'Young people'						
1.1 Cessation of AOD and tobacco use	# of days spent in program for young people whose visit was at least 7 days in duration	3,765	4,148	3,700	5,041	4,656
1.2 Developed coping skills (AOD use, gambling and mental health)	Inferred number of unique young people who have participated in the program for at least 60 days and experienced a large change	26	26	26	36	35
	Inferred number of unique young people who have participated in the program for at least 60 days and experienced a some amount of change	11	11	11	15	15
1.3 Improved physical health and lifestyle	Inferred number of young people who have participated in the program for at least 60 days and experienced a large change	17	18	13	23	22
	Inferred number of young people who have participated in the program for at least 60 days and experienced a some amount of change	18	19	14	25	24
1.4 Improved mental health and emotional stability	Inferred number of young people who have participated in the program for at least 60 days and experienced a large change	26	27	19	35	34
	Inferred number of young people who have participated in the program for at least 60 days and experienced a some amount of change	9	10	7	13	12
1.5 Maintained reduction of harmful AOD use	Inferred number of unique young people who have participated in the aftercare and experienced a change which was maintained	22	23	20	26	25
	Inferred number of unique young people who have participated in the aftercare and experienced a change which was maintained sometime after the program	9	9	8	10	10

¹⁸ A more detailed description of the rationale and calculation for each indicator is available in the SROI Impact Map. Please refer to Triple Care Farm

OUTCOME	INDICATOR	QUANTITY				
		09	10	11	12	13
1.6 Removed from harmful environment and feeling safe / secure	Number of days spent in program for young people whose visit was at least 14 days in duration	3,719	4,111	3,627	4,983	4,577
1.7 Developed basic self-care skills (Hygiene, cooking, cleaning)	Inferred number of unique young people who have participated in the program for at least 30 days, had not been previously living with their families and experienced a large change	6	8	7	8	5
	Inferred number of unique young people who have participated in the program for at least 30 days, had not been previously living with their families and experienced some amount of change	17	25	20	23	16
1.8 Secured safe and stable housing	Inferred number of unique young people who have participated in the aftercare component of the program and experienced a change which was maintained	15	15	14	18	17
	Inferred number of unique young people who have participated in the aftercare component of the program and experienced a change which was maintained sometime after the program	2	3	2	3	3
1.9 Experienced conflict with other students	Inferred number of young people who have participated in the program for at least 7 days and experienced a substantial amount of conflict	4	5	5	5	5
	Inferred number of young people who have participated in the program for at least 7 days and experienced some amount of conflict	19	22	23	24	23
1.10 Stronger family / support based relationships	Inferred number of unique young people who have participated in the aftercare component of the program and experienced a large amount of change which was maintained	16	17	15	20	19
	Inferred number of unique young people who have participated in the aftercare component of the program and experienced some amount of change which was maintained	13	13	12	16	15
1.11 Disconnected from negative influencers	Inferred number of unique young people who have participated in the program for at least 60 days and a large change	26	22	20	31	32
	Inferred number of unique young people who have participated in the program for at least 60 days and experience some amount of change	7	6	5	8	8

OUTCOME	INDICATOR	QUANTITY				
		09	10	11	12	13
1.12 Better able to manage finances	Inferred number of unique young people who have participated in the program for at least 60 days and experienced large change	20	20	20	27	27
	Inferred number of unique young people who have participated in the program for at least 60 days and experienced some amount of change	17	17	17	24	23
1.13 Pursuit of education / training	Inferred number of unique young people who have participated in the aftercare component of the program but had not been enrolled in an education / training course prior to intake and experienced a large amount of change	25	26	23	31	29
	Inferred number of unique young people who have participated in the aftercare component of the program but had not been enrolled in an educational / training course prior to intake and experienced some amount of change	12	12	11	14	14
1.14 Entered / re-entered the workforce	Inferred number of unique young people who have participated in the aftercare component of the program but who were not employed prior to intake and experienced a large amount of change	19	20	21	30	28
	Inferred number of unique young people who have participated in the aftercare component of the program but were not employed prior to intake and experienced some amount of change	10	11	11	16	16
1.15 Developed a more positive perspective on life / aspirations for the future	Inferred number of young people who have participated in the program for at least 30 days and experienced a large change	28	31	29	35	33
	Inferred number of young people who have participated in the program for at least 30 days and experienced a some amount of change	12	14	12	15	14
2. Families / carers						
2.1 Reduced concern for Young Person's immediate well-being	# of days spent in program for young people whose visit was at least 30 days in duration	3,564	3,888	3,293	4,772	4,411
2.2 Improved communication with Young Person	Inferred number of unique young people who have participated in the aftercare component of the program experienced a large amount of change	16	16	14	19	18
	Inferred number of unique young people who have participated in the aftercare component of the program experienced some amount of change	23	24	22	28	27

OUTCOME	INDICATOR	QUANTITY				
		09	10	11	12	13
3. Government						
3.1 Reduction in acute care hospital presentations	Inferred number of unique young people who had been admitted to hospital within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained	15	15	7	14	15
	Inferred number of unique young people who had been admitted to hospital prior within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained sometime after the program	6	6	3	5	6
3.2 Decrease in the number of young people in detention	Inferred number of unique young people who had been placed in detention within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained	10	12	7	8	11
	Inferred number of unique young people who had been placed in detention prior within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained sometime after the program	4	5	3	3	4
3.3 Decrease in the number of young people requiring homelessness support services	Inferred number of unique young people who had been homeless within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained	8	8	7	6	6
	Inferred number of unique young people who had been homeless within the 6 months prior to intake, participated in the aftercare component of the program and experienced a change which was maintained sometime after the program	1	1	1	1	1
4. AOD sector						
4.1 Improved risk / critical incidence management	Total number of members participating in the MA Youth AOD CoP	-	-	29	29	29
4.2 Cost efficiencies from shared PD and training	Total number COP member hours per year	-	-	29	29	29

5. Valuation techniques

Technique	Description and examples
Cash transaction	An actual cash saving or cash spent by the stakeholder group. For example: <ul style="list-style-type: none"> • A reduction in welfare payments is a direct cash benefit to the Government
Value of resource reallocation	A program or service results in outcomes that allow resources to be used in different ways. For example: <ul style="list-style-type: none"> • A reduction in crime may not result in less cost to the justice system because there is not a change in the overall costs of managing the justice system (so it is not a “cash transaction”). However, a value can be placed on the amount of resources that can be reallocated for other purposes
Revealed preferences	This is when a financial proxy is inferred from the value of related market prices. This can be achieved in the following ways: <ul style="list-style-type: none"> • Is there something in a stakeholder’s group behaviour that will reveal the value of an outcome? For example, we may observe that stakeholders with less depression are now socialising more and going out for dinner with friends. The financial proxy is therefore the value of the dinners • Through stakeholder consultation, is there a similar service or program that would achieve the same amount of change? This is often referred to as a “replacement valuation”
Stated preferences	This is when stakeholders are explicitly asked how much they value an outcome. This can be done in a number of ways: <ul style="list-style-type: none"> • Stakeholders are asked their “willingness-to-pay” or willingness-to-avoid” to achieve the outcome • These are hypothetical cash transactions. • Stakeholders are asked to make a choice based on a series of options presented to them through “participatory impact” exercises. This can also be referred to as “choice modelling”.

6. Financial proxies used in this analysis

MATERIAL OUTCOME	FINANCIAL PROXY	VALUE	RATIONALE	SOURCE
1. 'Young people'				
1.1 Cessation of AOD and tobacco use	Reduction in spending on drug and alcohol consumption	\$22 / d	A reduction in the proportion of total income (\$385 / fortnight – Youth Allowance) spent of alcohol / drugs from 80% to 0%	DSS; TCF management
1.2 Developed coping skills (AOD use, gambling and mental health)	Cost of seeing a clinical psychologist - 16 private sessions + 16 groups sessions	\$1,556	Cost of 16 individual + 16 groups sessions with a clinical psychologist (\$147 / \$37 per session), less the allowable benefits (\$107 / \$32 per session) for the first 10 sessions	MBS 2015; The Center for Dialectical and Cognitive Behavioural Therapies
	75% of the cost of seeing a clinical psychologist - 16 private sessions + 16 groups sessions	\$1,167		
1.3 Improved physical health and lifestyle	Estimated annual expenditure on a healthy food basket and health club membership for a single young person	\$9,255	Estimated proportion of income required to purchase a healthy food basket (28%) applied to the minimum wage (\$30,231). Plus, annual cost of a fitness club membership (\$790).	Monash University; Numbeo
	75% of the estimated annual expenditure on a healthy food basket and health club membership for a single young person	\$6,941		
1.4 Improved mental health and emotional stability	Cost of seeing a clinical psychologist (for severe problems) and a school based mentoring program	\$6,293	Cost of 40 sessions with a clinical psychologist (\$147 per session), less the allowable benefits (\$107 per session) for the first 10 sessions. Plus the cost of a school based mentoring program per annum (\$6,292)	MBS 2015; Youth Mentoring.org.au
	75% of the cost of seeing a clinical psychologist (for severe problems) and a school based mentoring program	\$4,719		
1.5 Maintained reduction of harmful AOD use	Cost of residential drug treatment for two episodes per year	\$32,220	Average cost of residential drug treatment per episode (\$16,110) based on the average number of hospital stays per student (2)	Australian National Council on Drugs
1.6 Removed from harmful environment and feeling safe / secure	Cost per client support day of specialised homelessness support services	\$318 / d	Cost per client day for supported accommodation services by a cost multiplier for serving young people	AHURI 2013; TCF management



MATERIAL OUTCOME	FINANCIAL PROXY	VALUE	RATIONALE	SOURCE
1.7 Developed basic self-care skills (Hygiene, cooking, cleaning)	Cost of a Certificate II from TAFE in Kitchen Operations	\$2,500	As per proxy	NSW Smart and Skills price list 2015
	75% of the cost of a Certificate II from TAFE in Kitchen Operations	\$1,875		
1.8 Secured safe and stable housing	Annual value of rental housing at current market rates	\$14,967	Average weekly cost of an 'affordable' 1 bedroom unit in (\$250 per week) plus estimated establishment costs (\$1,167) and annual utilities cost (\$1,320)	SVA experience; Latrobe university
1.9 Experienced conflict with other students	Cost of attending a self-defence course	(\$300)	As per proxy	Krav Maga Defence Institute
	75% of the cost of attending a self-defence course	(\$225)		
1.10 Stronger family / support based relationships	Average cost of a family support program	\$10,232	Average unit cost per client of a Youth and Family parenting support program (\$2,558) assuming three family members plus a TCF participant	NSW Human Services 2011
	75% of the average cost of a family support program	\$7,674		
1.11 Disconnected from negative influences	Cost of relocating	\$4,460	Average estimated cost of moving house (\$3,500), plus four weeks bond (\$960)	Moving Services
	75% of the cost of relocating	\$3,345		
1.12 Better able to manage finances	Financial coaching course + average cost of a holiday	\$4,872	Annual cost of a financial coaching course (\$1,920) plus average annual spend on holidays (\$2,952).	ING Direct
	75% of a financial coaching course + average cost of a holiday	\$3,654		
1.13 Pursuit of education / training	Cost of a diploma from TAFE	\$11,769	Cost of a diploma in Conservation and Land management (\$10,950) plus a stationary allowance (\$819)	NSW Smart and Skills price list 2015
	75 % of the cost of Certificate IV from TAFE	\$8,827		

MATERIAL OUTCOME	FINANCIAL PROXY	VALUE	RATIONALE	SOURCE
1.14 Entered / re-entered the workforce	Value of increased annual net income	\$20,253	Net annual income based on the minimum wage (\$30,231) less eligible welfare payments (\$9,978 Youth Allowance)	DSS; Fairwork
	75% of the value of increased annual net income	\$15,190		
1.15 Developed a more positive perspective on life / aspirations for the future	Average weekly spend on recreational activities and clothing	\$6,708	Average weekly spend by an individual under 35 on recreation (\$106) plus spend on clothing (\$23)	Moneysmart.gov.au
	75% of the average weekly spend on recreational activities and clothing	\$5,031		
2. Families / carers				
2.1 Reduced concern for Young Person's immediate well-being	Cost per day, per young people subject to community-based supervision	\$97 / d	As per proxy	ROGS 2015
2.2 Improved communication with Young Person	Average cost of a family support program	\$5,740	As per proxy	NSW Human Services 2011
	75% of the average cost of a family support program	\$4,305		
3. Government				
3.1 Reduction in acute care hospital presentations	Average cost per of hospital presentations (based on an average of two per Young Person per year)	\$34,540	Cost per case mix adjusted separation for a psychiatric hospital (\$17,720) for two admissions per year	AIHW 2013
3.2 Decrease in the number of young people in detention	Estimated cost per Young Person in detention	\$306,659	Total prison cost per offender day (\$292/d) applied to the mean aggregate sentence for theft and assault related offences (35 months)	ROGS 2015; ABS 2011
3.3 Decrease in the number of young people requiring homelessness support services	Cost to Government per young person requiring homelessness services	\$9,526	Total cost to Government per client for a street-to-home service, including the opportunity cost of capital	AHURI 2013

MATERIAL OUTCOME	FINANCIAL PROXY	VALUE	RATIONALE	SOURCE
3. The AOD sector				
4.1 Improved risk / critical incidence management	Cost of workplace supervision (12 sessions per year)	\$1,440	Minimum number of supervision sessions for social work practitioners with 2+ years' experience at \$120 per session	Australian Association of Social Workers
4.2 Cost efficiencies from shared PD and training	Cost of membership to the Australian Association of Social Workers	\$1,010	As per proxy	Australian Association of Social Workers

7. SROI Filters – general assumptions

1. Deadweight – Deadweight is an estimation of the value that would have been created if the activities from the program did not happen. An outline of the deadweight categories adopted for this analysis is included in Table A5.1.

Category	Assigned deadweight (%)
1. The outcome would not have occurred without the activity	0%
2. The outcome would have occurred but only to a limited extent	25%
3. The outcome would have occurred in part anyway	50%
4. The outcome would have occurred mostly anyway	75%
5. The outcome occurred anyway	100%

Table A5.1 – Deadweight description

2. Displacement – Displacement is an assessment of how much of the activity displaced other outcomes. An outline of the displacement categories adopted for this analysis is included in Table A5.2.

Category	Assigned displacement (%)
1. The outcome did not displace another outcome	0%
2. The outcome displaced another outcome to a limited extent	25%
3. The outcome partially displaced another outcome	50%
4. The outcome displaced another outcome to a significant extent	75%
5. The outcome completely displaced another outcome	100%

Table A5.2 – Displacement description

3. Attribution – Attribution reflects the fact that the investment and core program activity is not wholly responsible for all of the value created. An outline of the attribution categories adopted for this analysis is included in Table A5.3.

Category	Assigned attribution to others (%)
1. The outcome is completely a result of the activity and no other programs or organisations contributed	0%
2. Other organisations and people have some minor role to play in generating the outcome	25%
3. Other organisations and people have a role to play in generating the outcome to some extent	50%
4. Other organisations and people have a significant role to play in generating the outcome	75%
5. The outcome is completely a result of other people or organisations	100%

Table A5.3 – Attribution description



4. Duration and Drop-off – Duration refers to how long an outcome lasts for. Drop-off recognises that outcomes may continue to last for many years but in the future may be less, or if the same, will be influenced by other factors. The drop-off rate indicates by what percentage the value of the outcome declines each year. An outline of the drop-off categories adopted for this analysis is included in Table A5.4.

Category	Assigned drop-off (%)
1. The outcome lasts for the whole period of time assigned to it	0%
2. The outcome drops off by 25% per year from year 2 on	25%
3. The outcome drops off by 50% per year from year 2 on	50%
4. The outcome drops off by 75% per year from year 2 on	75%
5. The outcome drops off completely by the end of the time period	100%

Table A5.4 – Drop-off description



8. SROI Filters – applied in this analysis

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
1.1 Cessation of AOD and tobacco use	Deadweight	10%	Due to the high level of chronic and poly drug use by students it is unlikely that this reduction in their use would have occurred for the given time without the program. However, as students are required to complete a detox program prior to commencing at TCF it is possible that some may have found alternative avenues of support which would have enabled them to experience this change.
	Displacement	0%	Interviews indicated that the program did not displace any other efforts to attain the outcome. While the majority of interviewees indicated that although they had attempted other rehab programs they were largely regarded as ineffective.
	Attribution	0%	As the change occurred during the duration of the Young Person's stay at the farm this outcome is only attributable to the program.
	Duration & Drop off	n/a	The outcome lasts for the total number of student days spent in the program (i.e. as per indicator)
1.2 Developed coping skills (AOD use, gambling and mental health)	Deadweight	10%	While the young people interviewed consistently cited that they did not believe they would have acquired these skills without the program, it is appropriate to assume that some students would have been able to develop them on their accord.
	Displacement	10%	While interviewees attributed the skills they developed to TCF and the uniqueness of the program's approach, it is appropriate to assume that some young people would have developed increased coping skills without the program as a result of other therapies which they were receiving before their intake.
	Attribution	0%	As the change occurred during the duration of the Young person's stay at the farm this outcome is only attributable to the program.
	Duration & Drop off	5 yrs / 2 yrs (20% / 50%)	For young people who experienced a maintained change the outcome lasts for the year in which the program is completed, plus four additional years. For those who experienced a continued change for sometime after the program, the outcomes lasts for one additional year.
1.3 Improved physical health and lifestyle	Deadweight	10%	Young people identified that TCF was a catalyst for improving their health / lifestyles and would most likely not have changed without the program.
	Displacement	10%	It is appropriate to assume that some students would have been engaged in activities that were beneficial to their health had they not participated in the program (i.e. living at home, employment)
	Attribution	25%	Some amount of attribution is assumed to reflect that after completing the on-site component of the program, young people need to make a continued investment to maintain the improvement.
	Duration & Drop off	2yrs / 1yr	For young people who experienced a large amount of change the outcome will last for the year in which the

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
		(50% / 100%)	program is completed, plus one additional year. For those who only experienced some change the outcome lasts for the year of the program
1.4 Improved mental health and emotional stability	Deadweight	10%	Young people identified that TCF was a catalyst for improving their mental health and would most likely not have changed without the program. However, it is recognised that some students would have achieved this change through alternative avenues of support (i.e. counselling).
	Displacement	10%	While interviewees cited the importance of the TCF program in improving their mental health, it was also found that a small number of young people had been receiving treatment from other allied health professionals prior to commencing the program.
	Attribution	25%	Attribution is assumed to reflect that a material number of young people who were interviewed cited the importance of their families / support networks in developing and maintaining the change after leaving the on-site component of the program
	Duration & Drop off	5yrs / 2yr (20% / 50%)	For young people who experienced a large amount of change the outcome will last for the year in which the program is completed, plus four additional years. For those who only experienced some change the outcome lasts for 1 additional year
1.5 Maintained reduction of harmful AOD use	Deadweight	10%	Young people identified that TCF was a catalyst for reducing their AOD use and would most likely not have changed without the program. However, it is recognised that some students would have achieved this change through other avenues or life experience.
	Displacement	0%	Interviewees cited that the experience of the program was unique, and did not prevent them from participating in any other activity which may have led to a similar outcome.
	Attribution	50%	A large amount of attribution is assumed to reflect that a material number of young people who cited the importance of their families / support networks in developing and maintaining the change after leaving the on-site component of the program.
	Duration & Drop off	5yrs / 2yr (20% / 50%)	For young people who experienced a maintained change the outcome lasts for the year in which the program is completed, plus four additional years. For those who experienced a continued change for some time after the program, the outcome lasts for one additional year.
1.6 Removed from harmful environment and feeling safe / secure	Deadweight	10%	The Young People interviewed who experienced a feeling of security and safety from being in the program indicated that it would not have occurred otherwise, however, it is appropriate to assume that some students would have experienced this change independently.
	Displacement	15%	A small of displacement has been assumed based on the proportion of students who were employed at the time of intake. In this case their engagement in employment is considered as an indication of the level of stability / security in their lives

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
	Attribution	0%	As the change occurred during the duration of the Young Person's stay at the farm this outcome is only attributable to the program.
	Duration & Drop off	n/a	The outcome lasts for the total number of student days spent in the program (i.e. as per indicator)
1.7 Developed basic self-care skills (Hygiene, cooking, cleaning)	Deadweight	25%	As the outcome relates to the attainment of relatively basic skills, and sits at the early stage of the stakeholder logic it is assumed that some young people would have achieved this change without the program
	Displacement	0%	Displacement has been factored into the indicator for the outcome by excluding any Young person who was living at home prior to intake. This logic is consistent with the experiences of the young people who were interviewed.
	Attribution	0%	As the change occurred during the duration of the Young person's stay at the farm this outcome is only attributable to the program.
	Duration & Drop off	n/a	As the outcome relates to the learning of relatively basic skills it is only valued at the time it is attained.
1.8 Secured safe and stable housing	Deadweight	10%	Due to the seriousness of the issue it is likely that some of the vulnerable Young People who participate in TCF would have been provided with a housing referral by another provider
	Displacement	0%	For those Young People who were homeless or without stable housing at the time of entering the program, the assistance that TCF provided them with securing housing did not displace any other services or activities they were involved in
	Attribution	50%	TCF advocated on behalf of the Young People by providing them a referral to a housing provider and / or assisting them with their application to the Housing Department waiting list. While TCF acted as a catalyst for this change the housing provider made the most significant contribution to realising this outcome.
	Duration & Drop off	5yrs / 2yrs (20% / 50%)	For young people who experienced a maintained change the outcome lasts for the year in which the program is completed, plus four additional years. For those who experienced a continued change for some time after the program, the outcome lasts for one additional year.
1.9 Experienced conflict with other students	Deadweight	75%	Considering the underlying issues of substance abuse and the unstable nature of their lives it is appropriate to assume young people would have been likely to experience conflict with others in their everyday lives had they not been attending the program
	Displacement	0%	The conflict with Young People experience during their time at the Farm is unique to their experience at TCF
	Attribution	0%	While the conflict experienced in most cases occurred with other students, no other organisation contributed to its occurrence
	Duration & Drop off	n/a	The outcome is only attributable to the period of time that the Young Person spends in the on-site component of the program

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
1.10 Stronger family / support based relationships	Deadweight	10%	Young People who were interviewed indicated that it was unlikely that their relationships would have improved if they had not attended the program. Nonetheless, it is appropriate to assume that some young people would have experienced this change through another means.
	Displacement	0%	Interviewees cited that the experience of the program was unique, and did not prevent them from participating in any other activity which may have led to a similar outcome.
	Attribution	50%	Young people indicated that they were able to improve their relationships because of the communication and coping skills they learnt within the program. However, they also attributed a large amount of this change to the support their families / carers / friends gave them after leaving the program.
	Duration & Drop off	5yrs / 2yrs (20% / 50%)	For young people who experienced a maintained change the outcome lasts for the year in which the program is completed, plus four additional years. For those who experienced a continued change for sometime after the program, the outcomes last for one additional year.
1.11 Disconnected from negative influences	Deadweight	10%	While the Young People interviewed who had disconnected from the negative influences in their lives after leaving program indicated that it would not have occurred otherwise, it is appropriate to assume that some students would have experienced this change independently.
	Displacement	0%	Interviewees cited that the experience of the program was unique, and their time at the program did not prevent them from participating in any other activity which may have led to a similar outcome.
	Attribution	50%	While the skills and increased understanding that young people gained during their stay at the program was critical to them making the decision to disconnect from the negative influences in their lives, they also noted that they were able to achieve this change because of the ongoing support they received from their families / support networks
	Duration & Drop off	n/a	As the outcome relates to Young People disconnecting from negative influences in their lives it is assumed that this can only occur once
1.12 Better able to manage finances	Deadweight	10%	Young people indicated that they would not have improved their ability to manage their finances without the program. However, as the outcome relates to the attainment of relatively basic skills, it is assumed that some young people would have achieved this change without the program
	Displacement	0%	Interviewees cited that the experience of the program was unique, and their time at the program did not prevent them from participating in any other activity which may have led to a similar outcome.
	Attribution	0%	As the change occurred during the duration of the Young Person's stay at the farm this outcome is fully attributable to the program.
	Duration & Drop off	2yrs (50%)	Nearly all young people indicated that they were able to maintain the change after leaving the program. However, it is recognised that they will receive ongoing assistance to help them manage their finances as their

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
			situation changes. As such the outcome is assumed to last for the year in which the program is completed, plus one additional year.
1.13 Pursuit of education / training	Deadweight	10%	Young People who were interviewed indicated that TCF was the catalyst for them to pursue further education or training and that it provided them with the requisite skills to do so. Nonetheless, it is appropriate to assume that some Young People would have experienced a change through another means.
	Displacement	0%	Displacement has been factored into the indicator by excluding any Young person who was undertaking an education or training course at their time of intake
	Attribution	50%	While the program's education stream played an important role in preparing young people to pursue further training they also received important support from their families and educational providers to attain this change
	Duration & Drop off	2yrs (50%)	The outcome will last for the year in which the program is completed, plus an additional year. This reflects the amount of time it would take to complete a diploma level course. It is also consistent with the experiences of young people who were interviewed
1.14 Entered / re-entered the workforce	Deadweight	10%	Young People indicated that TCF was the catalyst for them to enter the workforce and that it provided them with the requisite skills to do so. Nonetheless, it is appropriate to assume that some would have experienced this change had they not attended the program with assistance from other organisations (i.e. JSAs)
	Displacement	0%	Displacement has been factored into the indicator by excluding any Young person who was already employed prior to commencing the program
	Attribution	50%	The program's education stream played an important role in increasing students' job readiness and employability. However, interviews with young people revealed that the support they received from families and organisations such as JSA's was critical to them achieving this change.
	Duration & Drop off	2yrs (50%)	The change refers to a Young Person initially entering the workforce for the first time, or re-entering after a period. As such the outcome is assumed to last only for the year in which the program is completed plus one additional year
1.15 Developed a more positive perspective on life / aspirations for the future	Deadweight	10%	Young People who were interviewed indicated that it was unlikely that their perspective on life would have improved without the program. Nonetheless, it is appropriate to assume that some Young People would have realised the change through another means.
	Displacement	0%	Interviewees cited that the experience of the program was unique, and that their time at the program did not prevent them from participating in any other activity which may have led to a similar outcome.
	Attribution	25%	Some amount of attribution is assumed reflecting that a material number of Young People who were interviewed cited the importance of their families / support networks in developing and maintaining the change after leaving the on-site component of the program.

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
	Duration & Drop off	5yrs / 2yrs (20% / 50%)	The majority of Young People interviewed indicated that they maintained this change after leaving the program. As such the outcome is assumed to last for the year in which the program is completed, plus 4 additional years.
2.1 Reduced concern for Young Person's immediate well-being	Deadweight	10%	The family members who were interviewed cited the importance of the program in reducing the concern they had for their Young person. However, it is appropriate to assume that some families would have been able to achieve this change by seeking the support of a different program
	Displacement	0%	The program did not require any investment of time or recourses from family members and as such did not prevent them from undertaking any other activity which may have led to this same outcome
	Attribution	0%	As the change occurred during the duration of the Young Person's stay at the farm this outcome is fully attributable to the program.
	Duration & Drop off	n/a	The outcome will last for the total number of student days spent in the program (i.e. as per indicator)
2.2 Improved communication with Young Person	Deadweight	10%	While most of the family members interviewed attributed the improvement in communication with their Young Person to the time he/she spent it in the program, it is appropriate to assume that for some families this change could have occurred as a result of other forms of assistance that were being sought.
	Displacement	0%	The program did not require any investment of time or resources from family members and as such did not prevent them from undertaking any other activity which may have led to this outcome.
	Attribution	50%	While TCF acted as a catalyst which helped to improve the communication between the Young person and their family, as a later stage outcome it is important to account for the effort that families and young people had to make after leaving the program to maintain the change.
	Duration & Drop off	2 yrs. (50%)	The outcome lasts for the year in which the program is completed, plus an additional year. This assumption is based on the comments from family members who were interviewed who indicated that the farm was the catalyst for this change but it did require additional investment overtime to maintain
3.1 Reduction in acute care hospital presentations	Deadweight	10%	As this outcome is dependent upon a reduction in harmful AOD use by Young People, the rationale for each filter is as per outcome 1.5
	Displacement	0%	
	Attribution	50%	
	Duration & Drop off	5yrs / 2yrs (20% / 50%)	
3.2 Decrease in the	Deadweight	10%	As this outcome is dependent upon a reduction in harmful AOD use by Young People, the rationale for each

MATERIAL OUTCOME	FILTER	VALUE	RATIONALE
number of young people in detention	Displacement	0%	filter is as per outcome 1.5
	Attribution	50%	
	Duration & Drop off	1 year	The outcome will last for the duration of the mean aggregate prison sentence as described in the financial proxy. Assumes that each young person can only be diverted from detention once because of their participation in the program
3.3 Decrease in the number of young people requiring homelessness support services	Deadweight	10%	As this outcome is dependent upon Young People securing safe and stable housing, the displacement rationale is as per outcome 1.8
	Displacement	0%	
	Attribution	50%	
	Duration & Drop off	5yrs / 2yrs (20% / 50%)	
4.1 Improved risk / critical incidence management	Deadweight	0%	The MA Youth COP is a unique initiative for MA AOD employees, and the benefits they members gain from participating would not occur if the group did not exist
	Displacement	0%	While participating in COP meetings requires members to take time out of their day-to-day duties it does not prevent them from participating in any activity that would lead to a similar outcome
	Attribution	25%	While the COP is the main contributor to the change it is appropriate to consider the impact of other internal processes to improve risk management at each of the member's organisations
	Duration & Drop off	1 year	The value from the outcome is once-off as it relates directly to the members participating in the COP, and will not be maintained beyond the time spent working with group
4.2 Cost efficiencies from shared PD and training	Deadweight	0%	The MA Youth COP is a unique initiative for MA AOD employees, and the benefits they members gain from participating would not occur if the group did not exist
	Displacement	0%	While participating in COP meetings requires members to take time out of their day-to-day duties it does not prevent them from participating in any activity that would lead to a similar outcome
	Attribution	0%	As the change relates to the training that occurs through the COP program, the outcome is fully attributable to TCF
	Duration & Drop off	1 year	The value from the outcome is once-off as it relates directly to the members participating in the COP, and will not be maintained beyond the time spent working with group