



Malatest
International

Report:

NEET (not in education, employment or training) Trial services evaluation

Prepared for the Ministry of Social Development

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Executive summary

An undesirably large proportion of young people are not in education, employment or training (NEET). NEET status is a common characteristic of youth at-risk of poorer long-term outcomes. The long-term support they often require makes them a priority target audience for Ministry of Social Development (MSD) intervention.

The Youth Service targets 16- to 18-year olds at risk of poor outcomes and aims to equip them with the skills and education to improve their lifetime outcomes.

The Ministry implemented a trial to explore different approaches to supporting NEET young people to successfully transition to adulthood

The Ministry implemented the trial of NEET services (the trial) in response to earlier evaluation findings highlighting the need for a more intensive intervention for high-risk NEET youth. The Ministry defined the trial target group as youth with high- or very high-risk ratings using the Ministry's assessment tool. The trial had the same overall goal as YS:NEET: enabling young people to transition successfully to adulthood.

The Ministry selected three providers to deliver trial services over 12 months: Kāpiti Youth Services (KYS) on the Kāpiti Coast, Vibe in the Hutt Valley and the 'In-house' Work and Income Youth Service provider in Wellington. KYS and Vibe are youth one stop shops (YOSS).

The trial aimed to determine whether:

- Providers could attract and retain higher-risk NEET young people by working differently
- Outcomes for higher-risk NEET young people were improved through more intensive support by the provider.

The Ministry supported the providers to draw on their expertise and experiences in supporting young people to provide innovative responses. In general, the key points of difference between the trial approaches and business-as-usual Youth Service:

NEET were:

- Monthly working group meetings including trial providers, Ministry staff and evaluators
- Significantly lower caseloads, allowing more time to work with each young person, whānau and the community
- A flexi-fund available to provide opportunities to engage young people in different ways
- Limiting the participant group to high-risk NEET young people

- Group work and activities with young people and their youth coaches.

Two of the three providers used a case management system call TOMM

KYS and Vibe used The Outcomes Measurement Model (TOMM), a youth focused case management tool developed jointly with KYS. KYS and Vibe used TOMM to assess young people in the trial and track outcomes. The In-house team was unable to use TOMM online due to restrictions in the Ministry's IT environment.

Only high- or very high-risk young people were eligible for the trial

Trial providers assessed the level of need of youth accessing the trial services using the Ministry's risk calculator. Only high or very high-risk young people were eligible, although some young people were accepted at lower risk ratings if providers identified them as high or very high-risk (some risk ratings were increased after youth coaches provided more evidence to the Ministry).

Providers reported to the Trial Working Group that the calculator ratings did not match their own views on young people's level of risk and held reservations that the risk ratings were not calculated by clinical staff. The risk ratings are under review by the Ministry.

The evaluation drew on interviews and analysis of the TOMM data

This evaluation of the NEET trial services aimed to:

- **Context:** Describe the current situation for young people and the current state of service delivery for each of the three providers
- **Implementation:** Describe the implementation of the new services and how they develop over time
- **Effect:** Describe the effect of the new services on participating young people in the context of their personal circumstances and their communities
- **Strengths and challenges:** Identify strengths and challenges of each of the different service delivery approaches
- **Learnings:** Identify learnings which may inform the development of similar services in other areas.

Over the approximately twelve-month evaluation data collection period (late 2017 to late 2018) the evaluation drew on:

- Group sessions and individual interviews with young people at two points in time across the three trial providers:

- Early in the evaluation period: Four group discussions and nine individual interviews.
- Late in the evaluation period: Two group discussions and eighteen individual interviews.
- Ten interviews with whānau/caregivers of participating young people at the end of the evaluation period
- Provider staff interviews and group discussions at three points in time – beginning, middle and end of the evaluation period
- Participation in the monthly working group meetings with MSD and provider staff.
- Group discussions with Oranga Tamariki staff working with high-risk young people in each of the three trial locations early in the evaluation period
- Analysis of TOMM data from two of the three providers
- Analysis of youth coach activity diaries recorded in the middle of the evaluation period.
- Analysis of the providers' monthly reports to the Ministry.

Key elements of the trial that contributed to improved engagement with education and employment

Lower caseloads

Lower caseloads allowed Vibe and KYS to put more time into engaging high-risk young people. This meant being more persistent when engaging young people, offering transport, incentives, and increasing learning opportunities. They had time to engage with whānau to seek their approval and support for the youth participation.

Having a lead-in period before taking on a caseload of young people allowed the youth coaches to engage and build relationships with key local services and providers. This was important to help identify the young people most in need of the trial as well as creating networks to provide opportunities for the young people.

A flexi-fund provided opportunities to engage young people in different ways

Trial providers had discretionary funding to invest in activities or purchases to engage with young people. Offering incentives such as paying for food at individual or group meetings, driver licence testing and driving lessons helped providers attract and retain NEET young people. Vibe and KYS used the funding to quickly respond to specific needs of trial participants without a long sign-off process. Response time was longer for the in-house Work and Income team.

Youth coaches

Two of the providers each employed two full-time youth coaches for the trial. Low caseloads allowed youth coaches to spend more time one-on-one with young people. This, combined with the quality of the youth coaches, meant good relationships were fostered. Young people saw the youth coaches as consistent and reliable support people who could respond to their individual needs (which were often not related to education or employment).

Being able to focus on more than education allowed the youth coaches to support the young people with what they needed the most.

Group work

The one-on-one work was supported by group work. Having fun group activities, workshops and trips helped to encourage young people to engage with the trial. It also provided a positive peer group where they could develop their interpersonal skills in a safe environment. Working in groups was also more efficient for the youth coaches as they could work with multiple young people at the same time.

Engagement with whānau was important for reaching young people

Interaction with whānau through the engagement process continued throughout the trial. This engagement helped convince some whānau, who were initially unsure that extra support for their young person would be a good thing, and helped give the whānau more skills towards their overall whānau wellbeing. It also normalised working with the youth coaches for the young people and helped them to stay engaged in the trial.

Youth outcomes

All the young people involved in the trial who were interviewed had some positive outcome from being involved. Improved wellbeing and motivation underpinned many of the other outcomes. These included:

- Educational enrolment and achievement
- Employment
- Improvements in broader wellbeing including improved interpersonal relationships, increased independence and life skills, improved goals/expectations and improved health outcomes such as reduction in alcohol and drug use.

The available TOMM data showed that many young people improved various areas of their lives. TOMM ratings for young people improved for their overall wellbeing as well as for other domains including:

- Physical health
- Basic needs

- Emotional wellbeing
- Hope
- Whānau relationships
- Peer relationships
- Safe non-violent behaviours
- Community participation

Contribution of the trial towards more positive youth outcomes

Qualitative evaluation of the trial demonstrated that youth coaches with low caseloads could develop effective strategies to attract and retain higher-risk NEET young people. Building trusting relationships with young people took considerable time and would not have been possible with higher caseloads.

Youth coaches working in a YOSS context had access to a range of health and social services. Low caseloads enabled them to build relationships with other providers in the community including training providers and potential employers.

Many trial participants reported that without the more frequent interactions with their youth coaches they would not have engaged with the service or achieved these outcomes.

The evaluation does not allow conclusions to be drawn on the impact of the trial approaches on youth wellbeing compared to business-as-usual support. However, it does provide qualitative evidence from providers and youth supporting the trial approaches.

1. Overview of the trial

1.1. At-risk Youth

Young people not in education, employment or training (NEET) represent an undesirably large share of the overall youth population. The annual NEET rate for the Wellington region in 2016 was comparable to the national rate.

2016 annual NEET rate ¹	Wellington region	All New Zealand
Aged 15-19 years	9%	8%
Aged 20-24 years	15%	16%
Aged 15-24 years	13%	12%

NEET status is a common risk factor for adverse outcomes in youth. Other risk factors are summarised in Table 1:

Table 1. MSD profiles for high- and very high-risk young people²

High-risk profiles (any of the below)
<ul style="list-style-type: none">• Considerable barriers to positive outcomes (potentially multiple convictions)• Received one or more school interventions e.g. stand-downs, suspensions or alternative education etc.• NCEA level 1 or equivalent or lower• Left school before end of school year• A lower socio-economic background (school decile 1-4)• Previous involvement with CYF (placement of Youth Justice intakes)• Spent most of their student life supported by Work and Income
Very high-risk profiles
A combination of the characteristics of a high-risk young person (as above) and: <ul style="list-style-type: none">• Barriers, e.g. conduct disorder, antisocial behaviour and/or psychological illness; or• Prior benefit receipt

¹ <http://www.stats.govt.nz/infoshare/> (Work Income and Spending > Household Labour Force Survey > Youth NEET by Regional Council by Age)

² Modified from the Youth Service (NEET) Pre-Trial Report (2017) which is a MSD internal document using additional input from MSD Youth Service staff.

The young people in the trial displayed the entire range of risk factors listed in Table 1. As well as having one or more of the above risk profiles, the young people involved in the trial had varying levels of support. Some had parents who were engaged in their lives while others felt they had limited support from their parents or caregivers.

I'm sorting out everything by myself now. I don't really have my parents' support anymore. (Young person)

Youth coaches often commented on how hard the young people's lives were especially in relation to their family situations.

1.2. The Youth Service

The Ministry of Social Development began contracting community organisations to deliver a Youth Service in 2012 to support young people at risk of long-term benefit receipt. The Service targets 16- to 18-year olds at risk of poor outcomes and aims to equip them with the skills and education to build an independent future.

Youth Service providers engage, assess and support young people to enter and remain in education or work-based learning. Participating in the Youth Service is:

- Compulsory for Youth Payment (YP) or Young Parent Payment (YPP) recipients: All young people aged between 16 and 18 who receive a benefit are required to participate.
- Voluntary for YS:NEET: Young people aged 16- to 17-years not in education, employment or training and not currently receiving income support from the government but identified as at risk of moving onto benefit.

In 2016, the Treasury published evaluations of YS:NEET and the YP and YPP strands of the Youth Service. The findings of these evaluations are summarised below.

YS:NEET 2016 evaluation findings³

The evaluation compared the outcomes of 9,294 young people who had participated in YS:NEET to a similar group of young people selected from 79,374 young people who did not participate. Key findings included:

- High-risk NEET young people were more likely to be recruited to YS:NEET than lower-risk young people. Young people recruited to YS:NEET while still enrolled in school represented one-third of the participant group, but were less likely to be a high risk.

³ Available at: <https://treasury.govt.nz/sites/default/files/2017-01/twp16-07.pdf>

- While YS:NEET increased participation in education and training by nine percentage points relative to a comparison group at exit, the effects were modest and reduced to four percentage points at 12 months and were not significant at 18 months.
- There was a very small positive effect (two percentage point increase) in completion of level 1 or level 2 NCEA qualifications, but no impact on NCEA level 3 attainment.
- YS:NEET had a higher impact on educational attainment for higher-risk young people not in education when they began working with YS:NEET, and very high-risk young people.
- In the two years following participation in YS:NEET rates of benefit receipt increased. Just under one-third (31%) of YS:NEET participants were on benefit two years after enrolment compared with 27% of the comparison group. Similarly, participants had a lower employment rate in the year after enrolment and there was no significant difference in the second year.

The authors noted that a significant study limitation was the inability to ensure a perfect match between the YS:NEET participant group and the comparison group. Unobserved characteristics of young people in the two groups could therefore have affected outcome estimates for one or both groups, resulting in over- or under-estimation of *real* differences in outcomes.

The Ministry of Social Development produced the Youth Service Provider Best Practice evaluation⁴ in 2015. It reported on current Youth Service approaches and provider views on what appeared to work well. The findings were grouped into three domains:

- **Organisational characteristics:** Large, multidisciplinary organisations (health and social services) able to provide wrap-around services and benefit from internal referrals. Holding multiple contracts meant providers were better resourced and able to develop and retain competent staff. Youth Services operated as distinct services with dedicated staff often specialising in Youth Service clients with specific risk profiles.
High performing providers were Māori/iwi led and tended to have reduced barriers to engagement for Māori and Pacific young people. Private Training Establishments (PTEs) were better placed to address literacy and numeracy issues.

⁴ Steven, D. (2015). Youth Service: Provider Best Practice evaluation. Wellington, New Zealand: Insights MSD.

- **Youth coach characteristics:** Youth coaches had varied backgrounds but a passion for working with youth was essential. The top performing provider employed social workers for their YP and YPP clients, while most others employed former Work and Income case managers. YS:NEET was voluntary so providers employed youth coaches with youth appeal and the ability to recruit NEET young people.
- **Service delivery elements:** Engagement with a wide range of community services (including schools, PTEs, agencies and others) was essential for generating incoming referrals and connecting young people with the services they needed. Providers actively recruited in schools and the community, including offering incentives. Once recruited, the relationship with the youth coach was pivotal. Time investment in initial engagement led to better longer-term engagement. Caseloads varied, but 60 was identified as an optimal maximum for YS:NEET youth coaches depending on client risk profiles. Providers extended their reach to young people under 16.

1.3. The NEET Trial services

The Ministry implemented the trial of NEET services (the trial) in response to earlier evaluation findings highlighting the need for a more intensive intervention for high-risk NEET youth. The Ministry defined the trial target group as youth with high- or very high-risk ratings using the Ministry's assessment tool. The trial had the same overall goal as YS:NEET: enabling young people to transition successfully to adulthood.

The trial aimed to find out whether:

- YS:NEET providers could attract and retain higher-risk NEET young people by working differently?
- Outcomes for higher-risk NEET young people were improved through the provider offering more intensive support?

The Ministry's implementation approach gave the providers scope to try new ways of supporting the participating youth. The trial was initially planned for 12 months but in its later stages, MSD extended it for a further six months. Broadly, the main points of difference between the trial services and business-as-usual YS:NEET were:

- Monthly working group meetings including trial providers, Ministry staff and evaluators
- Significantly lower caseloads, allowing more time to work with each young person, whānau and the community
- A flexi-fund available to provide opportunities to engage young people in different ways

- Limiting the participant group to high-risk NEET young people
- Group work and activities with young people and their youth coaches.

The Ministry selected three providers to deliver trial services: Kāpiti Youth Services (KYS) on the Kāpiti Coast, Vibe in the Hutt Valley and the 'In-house' Work and Income Youth Service provider in Wellington.

1.4. The trial providers

As part of the evaluation, we developed logic models describing the three providers' approaches to delivering the trial. They are included in Appendix One. They were drafted and discussed in detail with each provider and the Ministry.

Details of each provider's approach are provided in sections below.

1.4.1. KYS

KYS is a Youth One Stop Shop (YOSS) based on the Kāpiti Coast. Their main site is in Paraparaumu. Their services include medical and nursing services, sexual health, clinical psychology, counselling, alcohol and drug services, social work, mentoring, parenting, peer support, transition to work, youth development, education programmes and therapeutic groups. Services are available free to young people aged between 10 and 24 years. KYS is well known in Kāpiti and has a strong reputation in the community.

KYS employed two youth coaches to develop the trial and manage two streams of 10 young people each. The streams were staggered with the second starting approximately six weeks after the first. Each stream had weekly group sessions complemented by formal one-on-one sessions with each participant. KYS provided other support as needed (driving people to appointments, support during other meetings and situations, and dealing with crises).

KYS delivered 17 group sessions for each stream. The young people were expected to attend all sessions. Activities included: learning workshops, trips such as a Kāpiti Island day trip, visiting the Museum of New Zealand Te Papa Tongarewa, white water rafting, high ropes course, cooking on a budget, and workshops on sexual health, mental health skills, alcohol and drugs and potential education options. KYS had helped the young people to get their driving license and arranged for mentor driving with the youth coaches and other KYS staff.

Support beyond the end of the group sessions varied. Some were only in contact via text messages or phone calls as they felt they did not need ongoing support, while others were still being supported for significant amounts of time each week.

I think, if I use [client] as an example, it might be [I] see him twice a week, and that's not including driving, but there's a lot of ringing other people and other services, his mum, him... Yeah, I'd say a good five hours for each one [of the young people who we still see a lot of]. (provider staff)

1.4.2. Vibe

Vibe is a YOSS based in the Hutt Valley with sites in Upper Hutt and Lower Hutt. Their services include general practice, nursing, counselling, health promotion, one-on-one support, workshops, and NEET, Youth Payment, Young Parent Payment, Youth development and Youth service programmes. Services are available free to young people aged between 10 and 24 years.

Vibe had two youth coaches and one team leader to run two streams of young people in the trial. The school stream consisted of 20 young people and was initially based at Wainuiomata High School. It became more community-based as the young people began leaving school. The community stream included ten young people who had already disengaged from all education.

Vibe hosted weekly or fortnightly group sessions for six months. All trial young people were encouraged to attend the group sessions that applied to them. Numbers of attendees at each session varied but there was a consistent core group. Group session content was based on what the young people wanted to learn about including: visits to training establishments, work-ready workshops, a beach trip, going to gyms and boxing gyms and presentations by various local organisations.

We had twenty, maybe twenty plus at the start, but we had this core group, that on any given activity we did run, would have 10-15 young people, and those were the constants. (provider staff)

Vibe continue to provide varying levels of support to the young people but the majority had drifted away from the service by the end of the trial period. Youth coaches still maintained some form of contact each month and Vibe was looking to start the trial extension with a new group of young people.

1.4.3. Work and Income Wellington In-house Youth Service

In-house is a youth service based in a central Wellington MSD – Work and Income office. In-house staff are youth coaches who work with 15- to 17-year olds who want to get into, or stay in, education, training, or work-based learning. In-house clients include young people receiving the business-as-usual (BAU) YS:NEET, Youth Payment or Young Parent Payment.

The In-house team for the trial comprised six youth coaches. All coaches worked with some trial youth but continued to carry BAU YS:NEET, YP and YPP client caseloads of up to 30 youth. Two of the youth coaches initially had a greater focus

on the trial but one was seconded elsewhere later in the trial period. They still had similar caseloads of trial and BAU:NEET youth but were tasked with recruiting the trial young people and organising and running the group sessions.

The In-house trial recruited participants through schools, education providers and home visits to build a school stream and a community stream.

The school stream aimed to create a girl's stream at Wellington East Girls' College, a single-sex girls' school, and a boys' stream at Rongotai College, a single-sex boys' school. The girls' group did not coalesce due to challenges with retaining enough participants but the Rongotai group ran for six months. It was structured around weekly group sessions which started with ten youth but reduced to two as participants moved on (for example, beginning work or moving to another area) or disengaged. As the size of the school stream group declined, there was increasing emphasis on one-on-one work.

There's been heaps of exits, and I think it's based on change of areas, so they've ended up living in another location, leaving school, and moving out of Wellington... that kind of thing, uncontactable. The other one's receiving the benefit, but in fact we've had a handful of ones who have been successful in getting jobs or getting Studylink. (Provider manager)

The weekly group session activities included: visiting training providers, goal setting and motivation sessions, doing up the school canteen and workout sessions at the gym.

Later in the trial the team set up a community stream run fortnightly, then weekly, at a local youth organisation (Boys and Girls Institute - BGI). Sessions included cooking skills and fun activities with games. School stream participants merged with the community stream as the trial developed.

Trial participants not involved with the Rongotai group had experiences consistent with those of the In-house BAU YS:NEET clients during the trial period. The trial led to developments in the BAU service, for example: staff credit cards for buying food or coffees for young people to help with engagement. This small change reduced the administrative burden on staff and meant they did not spend their own money.

So from the outside it may not look like its changed much, for us on the inside I feel like we have been given a lot more freedom to be more creative in terms of what we can do, like actually think outside the square, even though it has been challenging to get some of those tasks up and running. But even to brainstorm and think about that and hiring the vans to drive the boys around in we've never done to that degree. (Provider staff)

1.4.4. Provider locality context

Analysis of regional statistics highlighted some differences between trial localities:

- Age: The Kāpiti Coast has a lower proportion of young people in the trial target age group (15 to 24 years) and a higher proportion in the 65 plus age group.
- Ethnicity: The Hutt Valley has a lower proportion of New Zealand Europeans and higher proportions of Māori, Pacific and Asian people.
- Income, employment and education: Statistics for Wellington City demonstrated the influence of relatively well-educated and higher-income urban populations. Both the Hutt and Kāpiti are characterised by mixed pockets of wealth and poverty.

The differences in the populations of the localities provide context for the trial services. While the young people targeted by the NEET Trial services were more likely to come from lower socio-economic households within the localities, school decile status for students in the three trial locations revealed marked differences. For example:

- Kāpiti students were almost twice as likely as Hutt Valley students to attend a decile 8 to 10 school
- Decile 1 to 4 schools were not represented at all in the Eastern Wellington trial location
- Similarly, decile 5 to 7 schools were not represented at all in the Kāpiti trial site yet represented one-quarter of eastern Wellington schools and more than one-third of Hutt Valley schools.

Further detail on the localities is provided in Appendix Two.

2. The evaluation

2.1. Evaluation aims

The evaluation of the NEET Trial services aimed to:

- **Context:** Describe the current situation for young people and the current state of service delivery for each of the three providers
- **Implementation:** Describe the implementation of the new services and how they develop over time
- **Effect:** Describe the effect of the new services on participating young people in the context of their personal circumstances and their communities
- **Strengths and challenges:** Identify strengths and challenges of each of the different service delivery approaches
- **Learnings:** Identify learnings which may inform the development of similar services in other areas.

This report summarises the context for the NEET Trial services and the implementation of the providers' approaches. The report also describes how they align with Youth Service elements of best practice and address challenges in working with NEET young people.

2.2. Evaluation approach

2.2.1. Evaluation framework

We developed an evaluation framework, describing the evaluation questions, sub-questions and information sources used to achieve the evaluation aims. The framework is included in Appendix Three. The framework guided the development of data collection tools and analysis.

2.2.2. Information sources

Table 2 provides a summary of the information sources for this report.

Table 2. Evaluation data sources

	Administrative data	Staff data	Youth data collection
KYS	<ul style="list-style-type: none"> • Monthly reports • Fortnight of activity diary 	<ul style="list-style-type: none"> • Attending the monthly working group meetings • Beginning, middle and end staff interviews 	<p>Initial interviews: Group session⁵ at KYS with focus group and three individual interviews</p> <p>Final interviews: Group session at KYS with youth focus group, seven individual interviews and five caregiver interviews</p> <p>TOMM assessment data</p>
Vibe	<ul style="list-style-type: none"> • Monthly reports • Fortnight of activity diary 	<ul style="list-style-type: none"> • Attending the monthly working group meetings • Beginning, middle and end staff interviews 	<p>Initial interviews: Group session with focus group and three individual interviews</p> <p>Final interviews: Group session with focus group, six individual interviews and two caregiver interviews</p> <p>TOMM assessment data</p>
In-house	<ul style="list-style-type: none"> • Monthly reports • Fortnight of activity diary 	<ul style="list-style-type: none"> • Attending the monthly working group meetings • Beginning, middle and end staff interviews 	<p>Initial interviews: Two group sessions at Rongotai College with a focus group and three individual interviews</p> <p>Final interviews: Five youth interviews, three caregiver interviews</p>

Young people, whānau and caregivers were identified as participants through the providers. The recruitment process involved:

- **Group sessions:** The providers delivered the trial through group sessions so the participating young people were used to interacting in a group setting. We scheduled a time to complete evaluation group sessions with the providers. They generally replaced or were appended to regular trial group sessions. Provider staff told young people about the evaluation session in

⁵ Group sessions were attended by the young people who chose to attend. They did not include all trial participants.

advance so the group of young people who participated was the group who attended on the day.

- Individual interviews: During group sessions young people were told about the evaluation interviews and the potential for further interviews in the future. Providers talked to all young people about the evaluation and gained young people's consent before passing their contact details to our team.
- Caregiver and whānau interviews: caregivers and whānau were recruited by asking the young people during interviews if there was someone who knew them well who would also be willing to participate in an interview. We asked providers to suggest potential participants. Providers contacted these people for consent to share contact details.

Interviews and group sessions used guides but were semi-structured and conversational. They were audio recorded and transcribed with participant permission.

We also completed focus groups with Oranga Tamariki staff working with high-risk youth in the three trial provider locations at the beginning of the evaluation period.

The providers used The Outcomes Measurement Model (TOMM), an online tool which measures outcomes across wellbeing domains, to assess young people in the trial. Youth Workers from all three trial providers were asked to complete monthly assessments in TOMM to monitor participants.

Both KYS and Vibe had experience with TOMM and were able to use it for the trial without any significant issues. However, the In-house team was unable to use TOMM online due to the restrictions in the Ministry's IT environment. They relied on hard copy for initial assessments and did not record any monthly follow-up assessments.

We have presented the TOMM assessment results for Vibe and KYS showing young people's status at:

- Entry (the first assessment)
- Lowest (the lowest result recorded in any assessment) which may capture setbacks or the disclosure of challenges not identified at initial engagement
- Most recent (the most recent assessment over the time period between September 2017 and November 2018) to show progress achieved through the trial.

TOMM consists of eight domains and 18 sub-domains important to the health and wellbeing of young people as outlined in Figure 1. Youth workers recorded answers to the questions in each domain when they had the information to do so.

Consequently, the amount of data recorded for each domain varied for each young person. Some domains were rarely completed while others were frequently updated. We have reported the domains with a high level of completion for trial

young people. They are highlighted in Figure 1 below (overall score, hope, education training and/or employment, community activities, emotional and social wellbeing, alcohol and drug use, safe non-violent behaviours, family and friends/peers, physical health and basic needs).

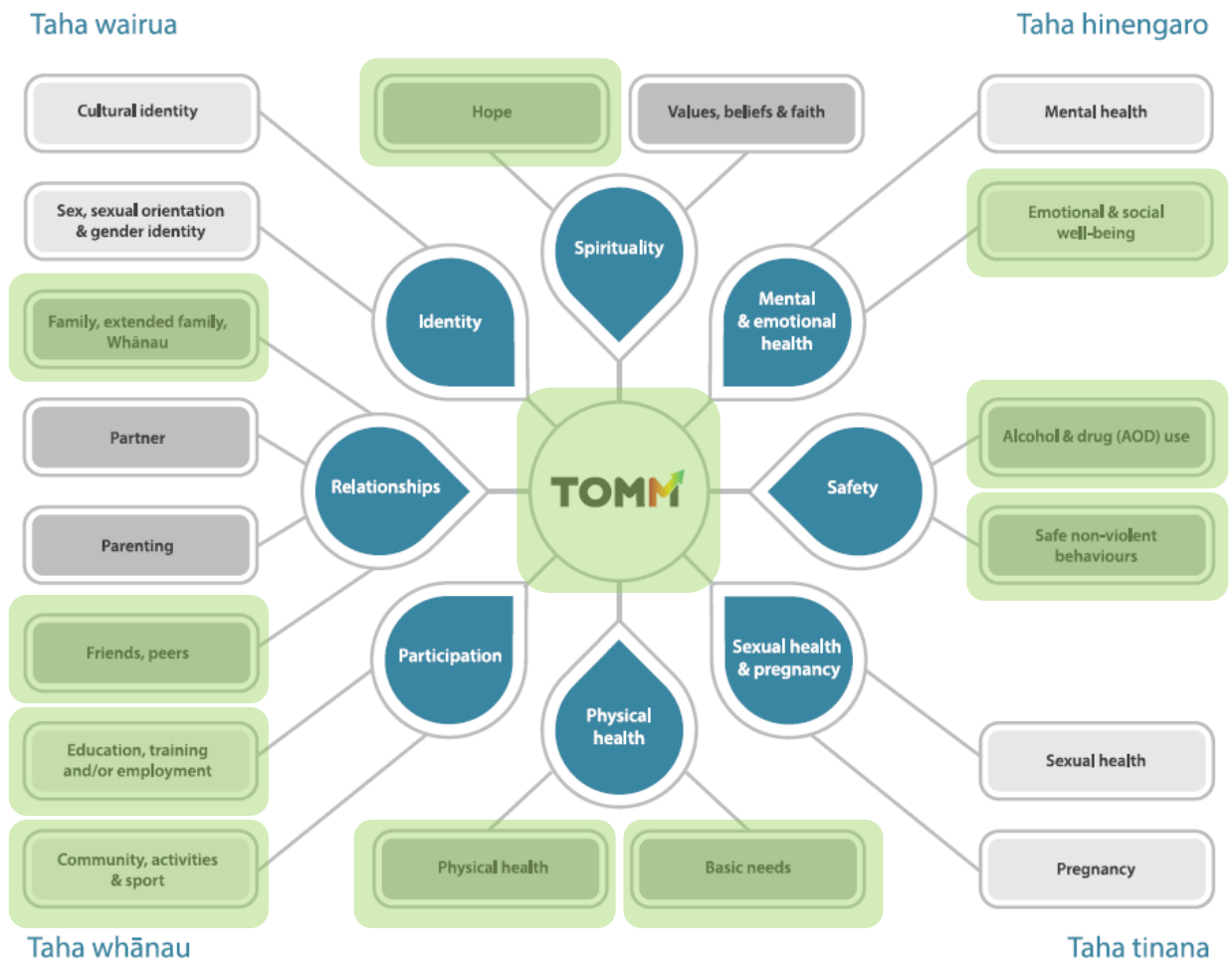


Figure 1. TOMM model of wellbeing (domains with sufficient data for analysis are highlighted green) (image sourced from TOMM)

Table 3 shows the number of young people who had enough data points for each sub-domain. The values in green have been analysed as the n value (number of individuals with data) was large enough. Other sub-domains were not analysed due to small numbers of completions.

Table 3. TOMM sub-domains and the number of completions (n-values are for the number of young people who had a minimum of two data points over the data collection period and who had engaged with the service for over three months)

Domain	Sub-domain	n value for trial
Spirituality	Hope	52
	Values, beliefs and faith	n<25
Identity	Cultural identity	n<25
	Sex, sexual orientation/gender identity	n<25
Mental and emotional health	Mental health	n<25
	Emotional & social wellbeing	41
Safety	Drugs and alcohol	49
	Safe, non-violent behaviours	42
Sexual health and pregnancy	Sexual health	n<25
	Pregnancy	n<25
Physical health	Physical health	46
	Basic needs	52
Participation	Education, training or employment	54
	Community, activities, sport	37
Relationships	Whānau	54
	Partner	n<25
	Parenting	n<25
	Friends, peers	33

2.3. Evaluation strengths and limitations

The evaluation includes a wide range of perspectives with an emphasis on reaching as many young people as possible within the project budget across all three locations. Data collection covered two (young people) or three (provider staff) points in time, so allowed us to consider the consistency of feedback over time.

However, not all young people participated in data collection. The young people targeted by the trial are in general difficult to contact and not always interested in participating in evaluation activity. We managed this issue by using text messaging to schedule and selecting participants opportunistically for group sessions and interviews rather than attempting to schedule times in advance. As a consequence, the sample of participants was not random and was less likely to include young people who disengaged from the trial.

The TOMM data provided a useful data source for considering the outcomes for participating young people. TOMM is a tool with a strong theoretical basis and is well

supported by the two providers who used it. However, it is important to note the following limitations:

- One of the three providers did not enter data in TOMM
- One of the strengths of TOMM for practitioners is its flexibility in allowing providers to record data on the needs or issues most relevant for each young person. However, as a consequence, data were not consistently recorded by the providers for all young people and data were not consistently recorded across all question domains for young people with assessments.
- Some domains have a more clinical focus so were not completed by the trial youth workers
- Our access to the unit record data was limited. TOMM data was extracted in standardised reports from TOMM which included the charts shown in this report. This precluded statistical analysis, though further analysis may have been of limited utility given the small size of the participant group.
- The TOMM results were not available until after this report so have been integrated into an earlier draft developed with a focus on qualitative findings.

3. Needs of participating young people

This section provides an overview of the needs of the young people targeted by the trial in the providers' localities. These findings are drawn from interviews with providers, youth and Oranga Tamariki staff.

3.1. Characterising high-risk NEET youth

The trial providers, youth and Oranga Tamariki staff described issues for high-risk NEET youth in their localities (Table 4). These risk factors were consistent with the MSD high- and very high-risk profiles reported in section 1.1. They noted high-risk youth were characterised by complexity arising from a combination of challenges.

[Why do they need youth services?] Drugs, alcohol, dependency history of it in their family, violence, child youth and family and Oranga Tamariki involvement, mental health issues, learning difficulties, broken families, what they deem as unstable home environments, how much they drink, how often they drink, what they drink, what drugs they're using.... Offending, youth justice involvement, some of the young people, their behaviour they have normalised it. (Provider)

The table below reports issues identified by providers, youth and Oranga Tamariki staff for high-risk NEET youth in their localities. Youth in the target group were more likely to have a combination of issues rather than just one or two.

Table 4. Issues for high-risk youth identified across all regions.

Issue	Description
Personal issues	
Mental health	Anxiety, depressions, psychosis, personal confidence, general wellbeing, identity. <i>[What are the defining issues for that high-risk group?] The ones that have been in child youth and family, parents that are on the long-term benefit, those trajectories, having a mental health disorder. The anxiety is huge it affects young people's ability to function. (Provider)</i>
Physical health	Substance abuse issues, physical and sexual health issues, dental health issues.

Issue	Description
Sexual identity	<p>LGBT+⁶ is often associated with challenges for youth including mental health and peer group issues.</p> <p><i>Sexuality seems to be a massive thing.... Lots of questions around that, who am I. (Provider)</i></p>
Social connection and peer group	<p>Underdeveloped social skills, bullying (perpetrator and victim). Peer groups consisting of other high-need youth resulting in shared negative influence.</p> <p><i>A few people that I know who will be in the group here are in their room 24/7 and so just for them to be involved in some sort of community activity is the best outcome ever. (Provider)</i></p>
Anger	<p>Difficulty managing anger and short tempers.</p> <p><i>I see how they deal with things with anger and violence. It's just assault all the time to everyone. That's just what they do. That's how they deal with things when they get angry. That's a common theme, that and self-harm stuff. (Oranga Tamariki)</i></p>
Trauma	<p>History of trauma from abuse/neglect.</p> <p><i>Their lack of education for a start, their home life, their background, the trauma they have experienced. Chances are if they've got a status with us they should fit. (Provider)</i></p>
Unstable routines	<p>Varied schedules, no fixed routine, unable to commit to attending appointments/activity on time consistently.</p> <p><i>We just need to get this kid out of bed every day. That's a start, that's a win for us, get them engaged in their community again, never mind about English, maths or science. (Provider)</i></p>
Crime and youth justice	<p>Involvement in crime and/or youth justice.</p> <p><i>We might have a young person that will commit a high-profile crime and the school will then stand them down, not because of anything they've done in school but because of this. (Oranga Tamariki)</i></p>

⁶ Lesbian, gay, bisexual, transgender/transsexual and other groups.

Issue	Description
Whānau issues	
Negative family experiences and lack of support	<p>Family violence, domestic abuse, sexual abuse, neglect.</p> <p><i>Lack of family support is an issue. They can close doors, and that is really difficult to work with and the youth payment is really specific, you can't move them out of home. (Provider)</i></p>
Gangs	<p>Involvement in gangs can impact all aspects of their lives.</p> <p><i>A lot of the young people growing up in the gangs don't want to be in it. A lot of the reasons they contemplate and follow through on suicide is 'cause they can't see an out. (Provider)</i></p>
Generational benefit dependence	<p>Young people who have been part of households dependent on Work and Income support their whole lives.</p> <p><i>[Who is most at risk?] The ones that have been in Child Youth and Family, parents that are on the long-term benefit, those trajectories, having a mental health disorder, the anxiety is huge it affects young people's ability to function. (Provider)</i></p>
Lack of role models	<p>Absence of role models in their lives.</p> <p><i>[There are] dreadful families, there's the drugs and alcohol, there is the gang involvement, parents in prison.... It can be an awful family situation, they're starting from a huge deficit. (Provider)</i></p>
Accommodation	<p>Unstable accommodation – no permanent placement through Oranga Tamariki, inability to pay market rent, frequent moves and no permanent address.</p> <p><i>(What are some of the good/bad things about life in Kāpiti?) Rent prices and accommodation costs a lot. (Youth focus group)</i></p>
Access to services and support	
Placements	<p>Very limited numbers of placements available for youth in need of long-term accommodation.</p> <p><i>We would have nowhere to place them, no safe accommodation for them to go into. (Provider)</i></p> <p><i>Oranga Tamariki if they have an emergency case with a four-year old vs a 17-year old [they go for the four-year old], and rightly so, the higher-risk is based there. (Provider)</i></p>

Issue	Description
Health and mental health services	<p>Difficulty accessing mental health services for all levels of mental health need.</p> <p><i>CAMS is really hard to get into. (Provider)</i></p> <p><i>Health providers are a big one. A lot of them are closing their books because they are overloaded. (Provider)</i></p>
Unwelcome in schools	<p>Youth feel unwanted at mainstream schools. Not enough resources in schools, especially for high-risk youth (teacher time, counsellors, funding for teacher aids).</p> <p><i>... what we find is the school saying, “troublesome kid, let’s try and get rid of them”... as soon as they’ve had the opportunity they have kicked them for touch... (Oranga Tamariki)</i></p>
Difficult transitions between services	<p>Difficult processes for handover between some services. Eligibility for services/funding dependent on individual situations and advocacy.</p> <p><i>We know there is a cohort who don’t access services for whatever reason and what we have created here, we were reaching them in the way they needed to be supported. (Provider)</i></p>
Transport	<p>Transport between regions was an issue for young people accessing the services they needed which were not available locally, particularly for alternative and tertiary education.</p> <p><i>Especially in Otaki, there’s just one bus out of town each day. If you get them into a course they have to get up at some ungodly hour of the morning and getting to Wellington is not sustainable, it doesn’t work. So when a young person drops out of college in Otaki it’s like, what are we going to do with you? (Provider)</i></p>
Service boundaries	<p>Service boundaries could pose challenges for youth accessing the services they needed. For example, Otaki fell between two regions with different services having different boundaries. This made building relationships and working together more challenging.</p>

3.2. Needs identified for trial participants

All providers reported they were reaching the target population of high-risk NEET young people. This was supported by interviews with provider staff and young

people where all young people were reported to have a range of MSD risk factors including: convictions, low educational achievement, low socio-economic backgrounds, Oranga Tamariki involvement, behavioural issues, mental health issues and a high likelihood of future benefit receipt.

I was just gonna get on the dole, but now I want other stuff. (Young person)

TOMM risk ratings identified the majority of young were ‘seriously at risk’ (31%) or ‘at risk’ (45%) at entry with lower ratings recorded for some young people later in their engagement with the trial (Figure 2). Overall risk ratings reflected youth workers’ overall opinion of each young person’s life. The results suggest most young people participating in the trial fell into the targeted high-risk group.

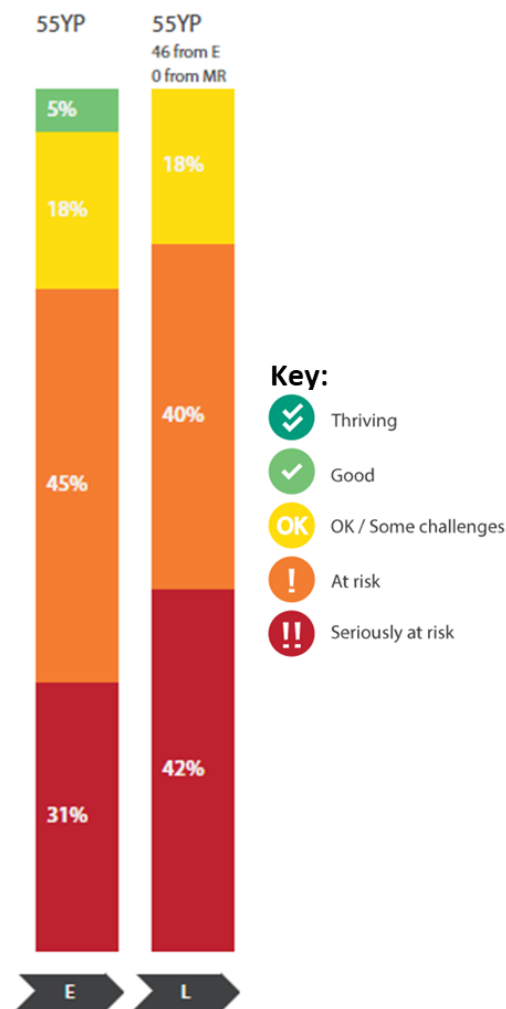


Figure 2. Overall TOMM risk ratings (Vibe n = 21 and KYS n = 34) (E=entry, L=lowest rating)

3.3. The Ministry's calculator for defining youth risk levels

The Ministry used a separate risk rating calculator to assess each young person at the time they entered the service. The risk rating calculator was the same tool used for business-as-usual youth services.

The earlier Youth Service evaluation found some providers were concerned about the accuracy of the Ministry's risk rating for some NEET youth. The providers did not have a good understanding of the criteria and thought the ratings should recognise and weight risk factors differently. Queries about its accuracy focused on:

- Inclusion of decile, a population level measure which did not necessarily correspond to individual socio-economic status
- Young people who did not have a diagnosis of a mental health issue or record of receiving treatment but who providers identified as having mental health issues
- Young people involved in crime and antisocial activity but who did not yet have an arrest or criminal record.

In addition, some providers thought the ratings could be strengthened by including more clinical/frontline experience in the assessments.

Providers raised concerns about the calculator with the Ministry in the working group meetings. The Ministry allowed the providers' views on youth risk levels to override the calculator ratings. All three trial providers recruited young people they believed were high risk but some of these young people were initially given lower ratings by the Ministry's calculator. Figure 2 showed youth workers allocated almost all young people in the trial into the 'at-risk' and 'seriously at-risk' groups. Feedback in interviews suggested youth workers included some young people who were on a trajectory towards the seriously at-risk group but not yet there.

The flexibility of the Ministry showed that it trusted the trial providers' expertise in youth work. The calculator is now undergoing review.

4. Delivery of the trial

4.1. Overview

Figure 3 below provides an overview of the differences in the trial compared to business-as-usual YS:NEET. Further detail is provided in the following sections of the report along with findings on how trial providers addressed challenges in the business-as-usual YS:NEET approach and how those changes affected the providers and the participating young people.

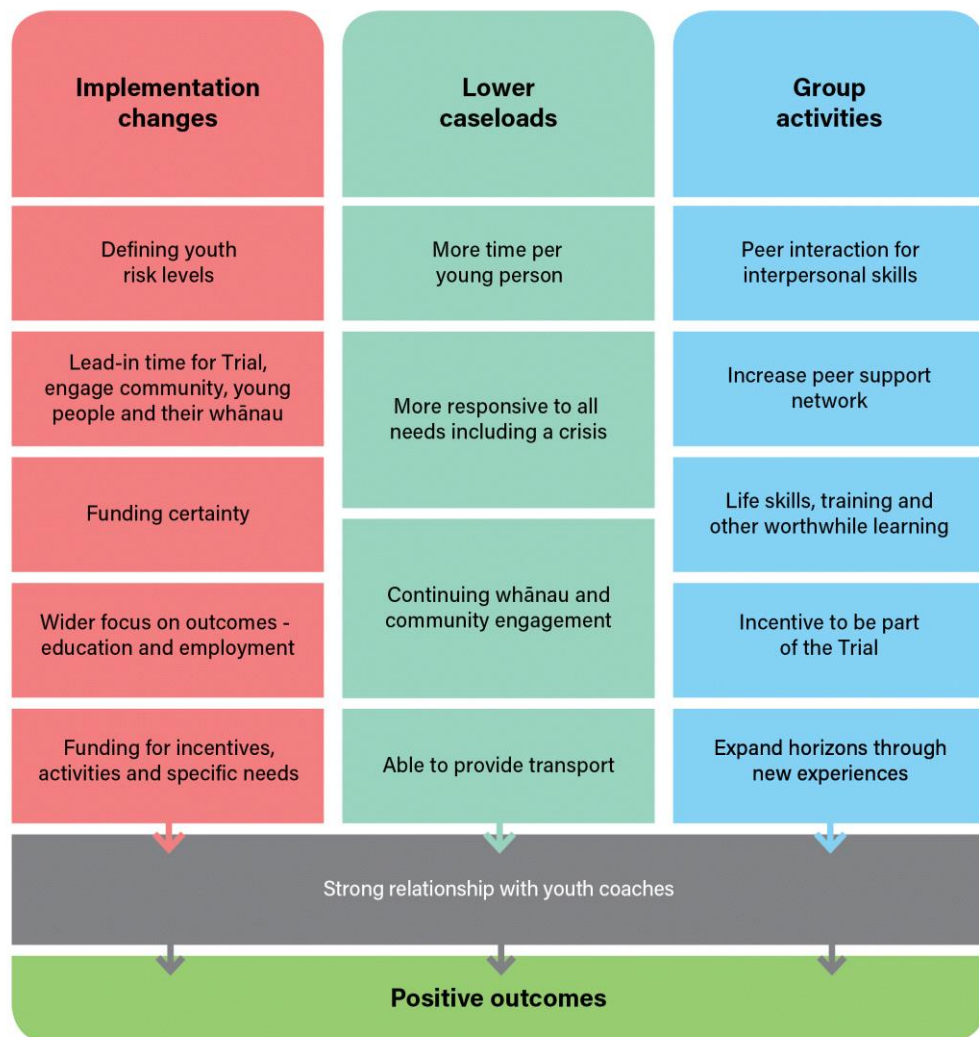


Figure 3. Overview of the differences between the trial and the business-as-usual YS:NEET approaches and the consequences of those changes observed in the evaluation.

Some of the key challenges with the BAU approach the trial aimed to address were highlighted by the three providers early in the trial (Table 5).

Table 5. BAU YS:NEET challenges as described by providers

BAU YS:NEET challenges	Description
Funding arrangements	<p>Funding linked to achievement of education outcomes and completion of 90-day plans.</p> <p>BAU funding focused on education but providers had difficulty re-engaging high-risk NEET with school. Schools were difficult to engage and there were few alternative or tertiary education options particularly in the Hutt and Kāpiti.</p>
Planning requirements	<p>Funding was linked to the completion of plans for youth at least every 90 days. Providers reported the focus on the plans created a barrier for real engagement with young people and made some feel they were only seeing their youth coaches to 'tick the box'.</p>
Attracting the right staff	<p>Unpredictable funding (due to funding links with outcomes and plan completion) meant staff did not have certainty about funding for their roles continuing, making recruitment difficult.</p>
Defining the risk level of the engaged youth	<p>Ministry risk calculator did not produce risk ratings consistent with the providers' view of youth risk levels.</p>
Reaching high-risk youth	<p>Difficulty engaging high-risk NEET youth because lists from the Ministry of Education were often out of date and the highest risk young people disengaged with school when very young.</p>
Limited whānau engagement	<p>The BAU model did not allow enough time to engage with whānau which limited opportunities for youth coaches to use whānau engagement as a way to make an impact on the young people.</p>
High youth caseloads	<p>High caseloads limited the time available to engage each young person and provide the services they needed. The impact of high caseloads appeared to be at the root of other challenges related to activities and outputs.</p> <p>Providers found it difficult to build relationships where they managed high caseloads because establishing the relationships depended on a large time investment early in the service.</p>

BAU YS:NEET challenges	Description
No or limited group work	The business-as-usual approach was predominantly one-on-one giving limited opportunity to model positive behaviour. There was also no chance to work with youth in different settings to build stronger relationships, better understand them and work on their specific needs.
Lack of resources for engagement	Limited ability/resources to offer incentives/activities to keep youth engaged and/or achieving.
Limited time for relationships with other services	High caseloads restricted time available for building relationships with other services. Providers did not have enough time to consistently engage with community providers (schools, health services, social services and community organisations). Providers reported the lack of time to connect to other services made it harder to identify youth who needed support.

4.2. The Trial Working Group

Throughout the trial period the three providers met with the Ministry monthly to discuss progress in implementation and any issues encountered.

The meetings enabled open communication with the Ministry and some issues were able to be identified and addressed more readily. Participation in the working group also fostered a sense of comradery among providers and enabled them to share information about what was working and not working.

Regularly reflecting on the trial promoted self-analysis of providers' own work and ensured they felt the Ministry understood the reality of some of the young people's lives.

4.3. Strengths of the trial providers

All three trial providers offered expertise and experience in engaging and supporting young people. As organisations, they brought different strengths to the trial.

Vibe and KYS are both Youth One Stop Shops (YOSS). They were able to provide social support as well as a full range of clinical services to address trial participants' physical and mental health challenges. Delivery of these services within the same organisation resulted in seamless and timely referral. The benefits were particularly evident in quick access to mental health services for participants in the context of

high-demand and waitlists in the community. All three providers reported referrals to external providers were more challenging and time consuming.

Like, occasionally the doctor will have someone from CAMHS come over and do a bit of a dual session. We managed to slip him in because of concerns around ADHD, and something that would normally take three or four weeks to even suss an appointment, we were able to get done within two days. (Provider staff)

I happened to walk past the doctor, and I said, “[Client] wants an appointment. I think he needs to be reassessed for the ADHD... He’s run out of stuff.” And she’s like, “Is he here now? Just go and grab him.” Which is just awesome. You couldn’t get that anywhere else, I don’t think, which I suppose is just lucky for us, that we can do that. (Provider staff)

In-house was part of a Work and Income office and part of MSD. They were able to quickly and easily address any issues with young people’s and their family’s Work and Income arrangements. They were also closely connected with Oranga Tamariki and based across the street from the main offices for the Oranga Tamariki staff working with high-risk young people in Wellington.

However, working within the Ministry meant the In-house team had longer approval processes for changes to staffing (for example, hiring new youth coaches for the trial), changes to processes (for example, access to credit cards to use the trial’s discretionary fund) and access to new tools (for example, use of the online TOMM within the Ministry’s IT environment). Already-established guidelines limited what could be done on the trial.

The red tape that just [is really annoying] at the moment, because it’s a sort of change in job description, when you only focus on high needs. That’s a change in job description itself, and that requires you to be available after hours, so I’m investigating that at the moment. And then if you do that, that’s a whole new role which involves a new business case to propose to national office, and then they do a new job description. So, you know, there’s that. (Provider manager)

If they’re not MSD employees, they’re not allowed to drive our vehicles, and it’s so expensive to hire people to teach lessons. (Provider staff)

Provider physical locations were a factor in delivering the trial with implications for transport, group activities and youth engagement. Having accessible locations helped to localise the trial and reduce the burden on youth to get there, as well as feel comfortable in a local youth-friendly space.

In-house struggled to provide a safe and friendly space for working with young people, as the Work and Income service centre was not viewed as youth-friendly by either the young people or the staff. In response to this, in the later stages of the trial the In-house ran group sessions at a local youth development organisation (BGI).

4.4. Funding arrangements

The Ministry provided fixed-price funding for the trial rather than performance-based funding as for BAU YS:NEET. This gave KYS and Vibe certainty they had funding to employ staff for the trial. The funding also allowed the staff to concentrate predominantly on the trial. Providers had the confidence to employ the staff they wanted in the role (experienced youth coaches with strong connections to the community).

Trial funding differed from BAU funding in other ways which contributed to youth engagement and strengthened providers' work with participants:

- Higher levels of funding supported the lower caseloads
- Funding for group activities and learning opportunities.
- Discretionary funding available to youth coaches in Vibe and KYS to pay for other costs as they arose. The funding was available to the In-house youth coaches later in the trial. While there was initial confusion about its use and accessibility, the arrangements were later clarified. Clear expectations and examples of what the funds could be used for would have helped the providers.

We didn't have to take everything back to the boss to see if it was able to be done. We could just say, "yup we help with that, yup we can pay for that" on the spot which meant that I guess the confidence from family and other community organisations [could grow]. We don't have to worry, we don't have to wait, things can just get going. (Provider staff)

Youth coaches and young people reported that providing incentives with the discretionary funding helped to encourage young people to engage with the youth coaches. The most common incentive talked about was financial help to get drivers' licences (KYS also offered free driving training). Youth coaches used incentives like this to encourage the young people's involvement.

4.5. Lead-in time to develop the trial

The providers had approximately two months at the start of the trial contract period for planning and development. Even with the extra time, developing the trial was challenging.

I think one hard thing so far has been developing and running the programme at the same time. So, a lot of our time at the moment is spent trying to sort out the group sessions. (Provider staff)

The trial youth coaches at Vibe and KYS had time to focus on developing the programme before engaging young people. The In-house team had less dedicated time available for development work.

The Ministry of Social Development Youth Service Provider Best Practice evaluation⁷ highlighted the need for engagement with a wide range of community services. Lower caseloads and the preparation time meant providers could re-invest in relationships with schools and the community. All three providers reported building on existing relationships and strengthening them. They expected the benefits of improved relationships to extend beyond the trial.

The engagement within the community included government agencies. All three providers had existing close working arrangements with government services such as Oranga Tamariki Youth Justice and Police when needed.

Having [Youth Aid] here, our Youth Aid is awesome [Youth Aid is the local police officer]... And then we've got Justice as well... Oranga Tamariki work out of here as well. Heaps of connections. It's just amazing. Which is cool. (Provider staff)

4.6. Broader focus on outcomes

Contracted outcomes and performance measures for BAU:NEET youth support focused on meeting milestones for updating young people's individual 90-day plans and achieving educational enrolment.

The trial providers thought re-engagement with education was necessarily the best outcome for the high-risk NEET young people in the trial. However, they saw employment as an outcome that could be just as positive and more appropriate for some young people. In response to feedback during working group meetings with Ministry representatives, the trial changed to include employment as an outcome.

Many of the participants were not ready to re-engage with education or were more focused on finding employment. Being able to focus on what the young person wanted to achieve ensured youth coaches could be responsive to the young person's goals and that they respected the direction the young person wanted to go. Being able to support what the young person wanted helped to create buy-in as the young people appreciated they were getting help to achieve what they wanted rather than being pushed into education.

[Other things weren't working so] what they did was focused on him looking at work, they went and got him get some clothing for job interviews [with the discretionary funding]. (whānau)

In some young people's lives, education, employment or other positive goals were not the most pressing issues. Sometimes the youth needed to concentrate on other aspects of their lives such as accommodation, mental health or going through the

⁷ Steven, D. (2015). Youth Service: Provider Best Practice evaluation. Wellington, New Zealand: Insights MSD.

justice system. Not having funding tied to education outcomes meant the providers could see positive changes in participants' broader wellbeing as outcomes.

I could've ended up in juvie, jail. I could've been involved with a lot of gangs, and [youth coach] pulled me out of all that kind of stuff, pretty much. He helped me out with everything, really. (Young person)

Providers reported the focus on the plans in the BAU YS:NEET created a barrier for real engagement with young people and made some feel they were only seeing their youth coaches to 'tick the box'. The youth coaches still completed 90-day plans but found they did not fit the way the trial was working. It was hard because the youth coaches were seeing trial participants every week and making new goals and actioning plans continuously. They still felt the longer 90-day period was helpful for looking at longer-term goals.

I actually probably found it hard to do business-as-usual, to do the 90 days, even though I see them way more. Just because you will see them today and then its due next week but you come up with a plan today so we have to be, "let's do it" wham. (Provider staff)

4.7. Youth coaches

Vibe and KYS found it helpful to have two dedicated youth coaches which enabled peer support for the coaches, two points of contact for the young people and a choice of who fitted best with who. This did place a bigger burden on the youth coaches who effectively doubled their caseload.

I don't think much of [the other youth coach], because they were working with the other [young people]. I knew [the other youth coach], we talked before, but not like [my youth coach]. It's just different. (Young person)

Even though it's a smaller caseload, when we say we got 10 kids each, effectively we have got 20 kids because we are working with all of them, even though it might be our kids, we are still forming that relationship between me and (name) with all those kids in the group so yeah it is tiring but over all we have got to think we can't be too hard on ourselves because there has been a huge change for a lot of these kids even though sometimes it is slow going. (Provider staff)

A clear theme from talking with the young people and trial staff was that real and meaningful relationships were vital to making progress. This was consistent with the findings of the Youth Service evaluation which highlighted the relationship with the youth coach as a critical factor in the success of the service.

Young people needed to feel like they could talk to their youth coaches about the hardest parts of their lives. It could take months to build trust even with the higher intensity of the service.

They would make me feel comfortable talking to them. It's hard to find people like that. like it's their job but they actually care you know. They were working but they are actually

interested in us. Like I might see them on the street and they come up and say hi and stuff. (Young person)

[How did he help you out and kind of change your direction?] Just the connection, I think, because I didn't have anyone I could trust, so like, I put my trust in him, I trusted him to show me where else I could go [with my life], I guess it just all worked. (Young person)

It was really different to have someone care so much, you weren't family to them, it was different I never grew up with that, kinda made me really upset about it in a good way. (Young person)

Once the young people and youth coaches knew and trusted each other they could begin to understand the issues and make progress. Having a strong and trusting relationship helped guide the young people as they were more open to listening to what the youth coaches were saying. Although, even with a strong relationship some young people were reluctant to do things they were not interested in. Some young people were not open to working with clinicians (psychologists and counsellors). This resulted in a gap in some young people's support.

The lack of willingness to seek counselling, it's been huge. A lot of it is "I don't want to have to tell my story again", so again for us it's about, it's going to take us a little bit longer to get to a point where it's awesome that you're talking to us [the youth coaches] and telling us about it, for you to receive the right supports and the right help and that, you actually need to be talking with this person. The plan would be that we get them to a point where they are comfortable enough hearing this message, and then be comfortable enough to be meeting someone and us being there alongside them during this period. (Provider staff)

I hate those people (psychologists and counsellors) because they talk, and they don't do anything with you. You just sit in a room and you try and talk about your problems, and that's boring. I don't want to do that kind of shit... they're just white people. (Young person)

4.7.1. Relatable youth coaches who were positive role models

Young people were more likely to engage with the youth coaches if they found them relatable, non-judgemental and could trust they would help them in a positive way. Youth coaches all had to share their own experiences with the young people and make it a two-way relationship.

He's not judgemental. He doesn't judge by character, and he believes in me. That's what made me like him. (Young person)

I didn't trust them in the beginning, but a couple of my mates go with the group, and just hanging out with them and them telling me about [youth coach 1] and stuff made me trust them. (Young person)

[Why did you get on with your youth coach in the beginning?] I guess because we're like, the same religion in a way, so it's easier for us to understand each other in that kind of way. (Young person)

He told us stories about himself in the past, he didn't just make it about you, he would share his own experiences he has had in the past for any problem we had for us to think about. Which made me open up even more, cause I'm not like a type of person to open up to people straight away, but once I've made up my mind it was all good. So, I started to respect him. (Young person)

I love positive people, and there's something about [my youth coach] that's very different. Like, positive. She's like, a ball of sunshine. (Young person)

They're not just your mentor, they're like, your friend as well. (Young person)

4.7.2. Reliability

Many of the young people involved in the trial did not have a reliable adult in their lives. Youth coaches were able to take on that role through being available for organised formal support as well as crises as they arose and providing advocacy for the young people where needed. This was particularly important when dealing with educational providers, Oranga Tamariki or the justice system.

They're gangsta, bro. Gangsta... They [the youth coaches] support you well. You just don't need to worry because they're there. You can rely on them. (Young person)

To be reliable, youth coaches needed to respond to the different needs of the individual young person on any given day or week. Crisis situations could require continuous engagement over multiple days, as well as after hours contact.

[How often did you see your youth coach?] It was once a week at the start, but then it went up, so I would see [my youth coach] like twice a week, three times a week, because I needed more support. Just like, doctors, or he'll take me out to calm me down, or just be there as someone to talk to.... Yeah. They go out of their way to do shit for you. CYFS has never done that. They still don't. (Young person)

They were there when I thought the whole world was gonna end, it obviously didn't, but they were there for me, it was really good. I could tell them anything and I trusted them with what I said. (Young person)

4.7.3. Continuity

Having the same youth coaches throughout the trial gave young people a sense of continuity and helped to build strong relationships with the youth coaches.

[How long did it take for you to feel comfortable and confident to ask for help from the youth coach?] A couple of months. I had to figure him out. (Young person)

I think I was away for six or seven weeks, and I lost contact with a lot of the boys. I've been trying to get in contact with them. I think I missed a lot of big things in their lives. (Provider staff)

As the youth coaches had built up long-term relationships with the young people it was hard when the young person's main point of contact was not available or was leaving the organisation.

I know the team really tried, but I guess it's different when... You know, when you saw us doing what we're doing, and then they come in and they're like, "what's your name again? What did [your youth coach] usually do? Oh, did you usually go to the gym?" (Provider staff)

4.7.4. Responsive to young people's priorities

Responding to the young people's priorities often needed a flexible approach. It meant potentially working in weekends and evenings as this was when a crisis could occur.

I've got one who won't meet anyone unless Mum is home, which means we can't meet until 6:30 in the evening. (Provider staff)

Yeah. I still want to see [my youth coach] and talk to her about some things, because I'm starting to think about stupid things... Yeah. I really don't want to go back down that road. (Young person)

As noted in section 4.6, the focus on employment as well as education outcomes showed the youth coaches were prepared to be open to alternative pathways.

4.7.5. Emotionally challenging for the youth coaches

All youth coaches said they enjoyed working on the trial more than BAU. While the work was more satisfying it was also more emotionally draining. It was important for the youth coaches to set some boundaries for themselves.

[Our work is intense] for sure. There are a lot of disappointments in the work that we do, in terms of... Can't get a hold of them, can't bring them in. But in terms of intensive stuff, I really want to make that black and white. I'm hoping that the evaluation informs that process. (In-house manager)

Youth coach leaving party: Case story

After 12 months of working on the NEET Trial one of the youth coaches left Vibe for another role. Vibe put on a leaving party for staff and youth to celebrate the youth coach. There were seven young people from the trial who came to the celebration. They didn't have to come, but were invited to join in.

During the speeches the young people were initially hesitant to say anything, but after a few nudges among themselves they all took turns to stand up and speak. All of the youth spoke about how much of a positive impact the youth coach had been and how much they had learnt and grown because of the youth coach. Below are some quotes from the young people.

- *I love you.... I used to be real little shit when I first met you. But now I've got all my levels (NCEA level 1-3) and I actually went to class because of you.*
- *I'm so much happier because I met you, you made me a better person.*

- *You made me change. Like, I actually want to work now, I actually want to have a job and follow my dreams.*
- *I wasn't sure if I liked you at first 'cause you were too positive, but turns out I like you heaps.*
- *Without you I wouldn't have got my levels or gotten into course.*
- *If you didn't take us to like school of tourism, then we wouldn't be there right now. We had no idea about all the stuff you showed us. But 'cause you did, now we are doing all this stuff, all of us.*

4.8. Lower caseloads for youth coaches

The NGO trial providers had considerably lower caseloads (10-20 youth per youth coach) than is typical for such services. The lower caseloads enabled more time to be spent on activities outside the core BAU YS:NEET service. The providers saw the lower caseloads as the most important factor in enabling them to deliver trial services in a different way to BAU YS:NEET. Lower caseloads meant spending more time with each young person during identification, engagement and delivery of services, as well as having more time available to co-ordinate with other service providers and engage whānau.

4.8.1. Greater investment in initial engagement

Lower caseloads enabled youth coaches to invest more time in initial engagement with the young people they identified as a good fit for the trial. The extra persistence did not always work but it made the difference for a lot of the young people. Some young people said the only reason they took part was because they were actively pursued by the trial youth coaches.

Not to sound mean about it, but they kept on pestering me for a couple of weeks, and I just went stuff it and gave it a go, because they seem pretty keen that they wanted me to do it. I just joined up and yeah I liked it. (Young person)

The extra time allowed the providers to try different approaches. For example, one youth coach engaged with a young person by giving them guitar lessons to help build trust.

[I] build my trust up with him through guitar lessons and say maybe having those lessons at Vibe so that gets him out of the house, and I'll pick him up and then maybe he can catch the bus back. (Provider staff)

Although high intensity engagement strategies (“pestering”) eventually worked for some young people there were some who only took part intermittently and some did not engage. Not getting a return on the investment could be frustrating for the youth coaches.

The amount of times you're driving back [to a group session] with no one in the car... It just does your... head in. (Provider staff)

4.8.2. Spending more time with each young person

One of the goals of the trial was to support providers to work more intensely with young people. Lower caseloads meant youth coaches spent more time with each trial young person than they would have using the BAU approach. The extra contact in both group and individual settings strengthened engagement.

[Interviewer: Do you think you ever would have trusted him if you'd only seen him once a month?] Nah, because I usually cut people off, I usually cut people out when I first meet them. (Young person)

I wouldn't know him as well. Getting to see him every week is what keeps me sorted I reckon, and the group stuff. I learnt heaps it's been so good. (Young person)

The activity diaries completed by the provider staff showed there was a close match between BAU and NEET Trial staff activity at the level of the broad categories recorded. When comparing the four Vibe and KYS trial staff to four BAU staff there was not a significant difference in the total amount of time spent on each activity (In-house was not included as the youth coaches had a mixed caseload of BAU and NEET Trial young people). We have therefore reported all results together.

Youth coaches spent approximately one-third of their time either face-to-face with young people or contacting them. The other main areas were administrative tasks and research for young people (21%) and administrative tasks for the provider including meetings and all other non-trial related work (20%).

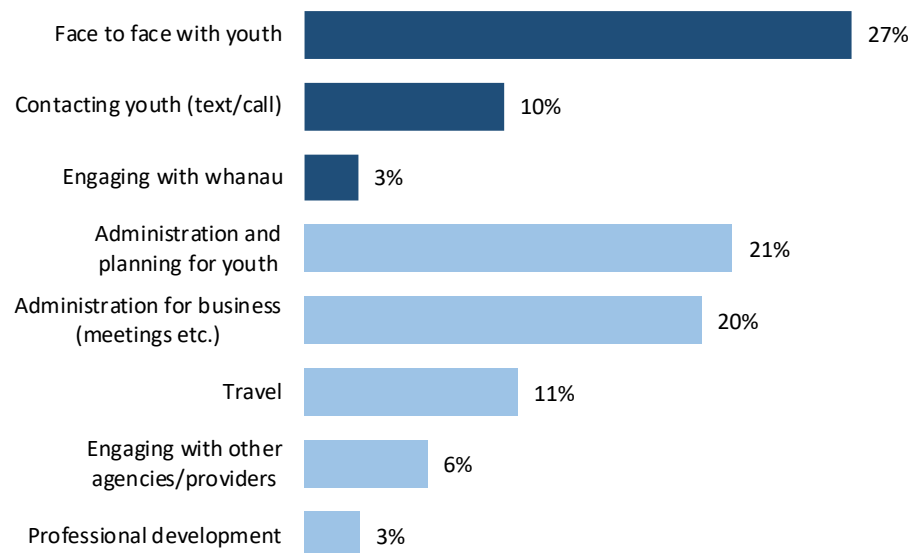


Figure 4. How BAU and NEET Trial youth coaches spent their time (BAU n = 4, NEET Trial n = 4, In-house mixed role n = 5)

Both BAU and trial staff reported spending around 15 hours per 40-hour week engaging with young people either face-to-face or via text, phone or Facebook. The activity diary was introduced relatively late in the trial, so earlier introduction may have shown more time was spent with young people. Table 6 shows the average amount of time for each young person under the trial and BAU approaches with different caseloads. Because caseloads were far lower for trial youth coaches, the same amount of time meant more time with each young person.

Table 6. Potential one-on-one time spent with young people⁸

	Example caseload	Potential individual time spent per young person per...		
		Week	Month	3-months
NEET trial	15	1:00 hour	4:00 hours	12:00 hours
BAU small caseload	35	0:26 hours	1:44 hours	5:12 hours
BAU large caseload	60	0:15 hours	1:00 hour	3:00 hours

Youth coaches at KYS and Vibe had weekly group sessions with their young people. Sessions often lasted between half and a full day, and there was at least one one-hour one-on-one session each week. This schedule would potentially result in spending eight or more hours with a young person per week (most of this time would be in a group setting). Most In-house staff were not able to increase the time spent per young person as they continued to work with a BAU caseload. One staff member was able to concentrate on a group of trial young people more than other staff but they still had a caseload of over 25. The rest of the trial youth were spread across the rest of the team.

We still have business-as-usual on us as well which was challenging. (Provider staff)

Despite lower caseloads and more time for each young person there were still challenges maintaining engagement (Table 7).

Table 7. Common challenges reaching high-risk young people

Challenge	Why is was an issue
Young people lead busy lives	Many of the young people led busy lives and found it hard to go to set appointments. Even if the young people had a lot of free time, their

⁸ This table was based on estimates calculated from activity diaries completed by trial and BAU staff which reported staff spent 38% of their time engaging with young people. This did include some group sessions, but these were much less than earlier in the trial.

<p>with different priorities</p>	<p>plans and priorities often changed at the last minute. One young person worked six hours a week and was not in any training but still found it hard to find a time to see their youth coach.</p> <p><i>I would like to see them if I could, every week yeah. [Interviewer: Are you too busy, or are the coaches too busy?] Yeah, I'm too busy. (Young person)</i></p> <p>It was important for the youth coaches to persist throughout the trial.</p>
<p>Change in the young people's lives – drop out or moving away</p>	<p>Young people moving away was a challenge for the trial as the youth coaches could no longer support them and struggled to hand over their support role to another organisation in a different region. Losing young people then impacted the rest of the group activities and reduced the group aspect of the programmes. This was a particular challenge for In-house.</p> <p><i>Yeah, I liked to go along [to the group sessions]. But with my work and then I was away, I never really went along after school ended, so that's why I didn't go to more of the things. (Young person)</i></p>
<p>Age of cohort</p>	<p>The age of young people impacted on the likelihood of them engaging. Some young people were about to turn 18 and leave school. As the young people were in a time of change they were not as interested in taking part in a long-term programme.</p> <p>Some of the providers also spoke about some potential clients being too young to work with because they were younger than 16. This was highlighted as an issue because sometimes these young people were willing to engage with the coaches but they had to wait a number of months before it was possible. As the engagement process is often the hardest part of working with young people this wastes an opportunity for responsive support.</p>

4.8.3. More time for whānau

Providers often identified that the whānau environment was part of what made the young peoples' lives challenging. Providers felt that if they could make things easier for the whānau then it would help the young person too. Lower caseloads enabled youth coaches to engage with the whānau of the young people they were working with.

I've found in particular, dealing with the whānau, in most cases, they are the issue, where it be drugs, alcohol, gangs, kicked the young person out of the home. (Provider staff)

Working with whānau included helping with:

- **Conflict between whānau members:** conflict within whānau sometimes led to the young people not being welcome in their home. Youth coaches worked hard help mediate such situations.
- **Behaviour management:** providers often spoke about parents struggling to get their children to do things. When appropriate, providers would talk through parenting strategies with the parents.

Sometimes it's the parents who are just the biggest hassle... They try and be their friend not their parent. (Provider staff)

It's been good to get some good [parenting] advice from them too on how to approach the teenage years with these boys. (Whānau)

- **Changing situations:** when whānau found themselves in tough situations providers would often help with advice or support. One example was where whānau were no longer able to stay in their accommodation so the youth coach helped the whānau find somewhere suitable to live in a short timeframe.
- **Formal whānau meetings:** providers often attended formal meetings like family group conferences, OT meetings and other meetings which involved the young person.

This work with whānau strengthened the trial support for young people by:

- **Increasing the push for young person to be involved:** some parents or caregivers did not like the idea of their young person receiving support. Others encouraged their children to be involved. Whānau encouragement made working with young people easier, especially compared to those whose whānau were not supportive. Often if the youth coaches could meet with parents, they were more likely to be positive about their young person receiving the extra support.

The ones that turn up and are like, "who the hell are you? My son doesn't need your help." I've had another mother who would actively update me on everything. I think it helps us big time having parents' support. (Provider staff)

Yeah. I've had one parent where when I rang his phone, she answered, and she said, "he doesn't need to see you any more." And I was like, "ok, cool, he doesn't have to see me." But he still sees me, cause he wants to, and he wants the support. (Provider staff)

- **Enabling providers to have a more accurate view** of how the young people were living and be more responsive if a crisis arose.

[The youth coach] Pops in from time to time to see how he's going. I have quite a few phone conferences with him if I have any concerns about how [my child] is going. (whānau)

I think we're at home, we're doing our best to be supportive of her. But quite often outside help is offered that doesn't bring us into that, into any of those

arrangements. Since it is a gap in other people's knowledge of her family. And there is a gap for us with what's happening for her outside. (whānau)

- **Normalised interactions between young person and the provider:** having regular interactions with caregivers helps to create a more familiar relationship between the young people and the youth coaches.

4.8.4. More time for relationships with other services

The way the trial was set up enabled the youth coaches to spend more time engaging with community organisations and services in the lead-in period and throughout the trial. These connections were beneficial in that they gave access to more potential participants and created opportunities for activities and employment. The providers expected the benefits of work with the community through the trial to extend to other aspects of their work with young people.

In-house engaged with the Police who donated unclaimed bikes for young people to fix up as a group project.

KYS also set up a bike restoration programme. They reached out to a local bike store, which offered to help train any young people that were interested in working on bikes as well as donating and reducing the price on the tools and parts needed. Participation in the bike restoration programme is now offered to BAU YS:NEET clients as well. This was a successful arrangement for both KYS and the bike store as it provided experience and discounts to KYS and positive promotion for the bike store.

We had the manager of [a local bike store] come over here to see these boys working on the bikes, and we talked about the NEET Trial... and he goes "Anytime that I've got three people working at work, I can take an hour out if you guys have got some guys working on bikes, and give you a hand. I'm happy to take on a couple for work experience." (Provider staff)

All providers engaged with multiple employers including recruitment/temp agencies, fast food chains and other local employers. This resulted in many young people finding their first job. For example, KYS invited a major Kāpiti-based earthmoving contractor to speak with both of their streams of young people. This gave the young people clear expectations of what was required to be employed and one young person ended up getting a full-time job and another was working in a temporary role.

All the providers used the trial as an opportunity to build their connections with schools and other education providers including mainstream schools, private training establishments, polytechnics, trade schools and adult learning centres. Improving the relationships between the providers and schools helped to identify the young people at risk of becoming NEET thereby reducing the chance of them being asked to leave school. Having a good working relationship with educators and being able to

provide intensive support to the young people convinced education providers to keep some young people enrolled. Once the education providers understood the situations of the young people they were often more flexible.

You have got to do a lot of work with those [higher risk young people] so they are the ones that we need to basically suck up to their training providers, so when we say, "please don't kick them out" they will listen. (Provider staff)

The In-house group at Rongotai spent some of their group sessions cleaning and doing up the run-down school canteen to show their appreciation for the school and to give back to their community. This also helped create goodwill between the school, the trial participants and the youth coaches.

Vibe had an ongoing relationship with a local hairdressing trainer. The hands-on approach from the youth coaches solidified their relationship and the trainer is now even more interested in working with Vibe and its clients in the future.

We were just there [at Vibe] to support [the young person] and also just to let others [staff] know our relationship with Vibe. We've had a good relationship with [the youth coaches], and we've had quite a few students come through Vibe. (Stakeholder)

Trial staff felt it was important to have good relationships with all the organisations and services involved in the young people's lives. Government services which were often relevant were Police, Oranga Tamariki and the Ministry of Justice.

And because of the NEET Trial, we've formed a bit of a relationship with them [Oranga Tamariki and Police] as well, which is sort of more positive. Like we'll get [Youth Aid] in, and he'll come in and have a joke, hang out. (Provider staff)

The best thing that I got out of [my youth coach] was... You know how Work and Income and CYFS, they don't really work together? So, working with [my youth coach] kind of helps with helping those two, CYFS and Work and Income work together a bit more with my situation and trying to sort some shit out... That's probably the biggest thing that's happened... It's made things a lot easier [so] in the long run, things will actually pan out a lot easier. (Young person)

4.9. Group activities and workshops

All providers delivered group sessions and reported it was a good way for them to work. Running group sessions allowed the youth coaches to see the young people in a more natural setting which helped to inform discussions in one-on-one sessions.

Working in groups was a new approach for all providers. Each provider delivered their group sessions in different ways. The groups tended to be filled with similar young people with similar backgrounds and challenges in their lives. The more similar the young people the easier it was to create a group both personality-wise and logistically.

KYS: Weekly, structured session/trip (based at KYS or starting there), expectation that all young people in the stream come.

KYS stream one was a group with a lot of drug and alcohol use, while stream two was all males and had more of a range in the personalities and backgrounds of the young people.

KYS had a range of speakers and presentation and activity types that helped keep the group work interesting. Examples included trips to the Museum of New Zealand Te Papa Tongarewa, Kāpiti Island, adrenaline forest, education sessions (about sexual health, Mates and Dates, drug and alcohol, and looking after their mental health).

It was actually so cool to be a part of a group, and we were always happy doing trips and especially when we went to Kāpiti Island, that was cool. Never been there before and new experience and white water rafting was really cool. Everything was really amazing, all the trips, they were always so funny and nice and making sure we were okay. It was just amazing experience. (Young person)

Vibe: Weekly sessions/trip (based at Vibe or starting there). Young people were encouraged to attend but sessions were promoted as voluntary and to come along if it was something that the young person wanted to do.

Vibe had a core group of females who all came from the same secondary school and all knew each other through family or friend connections. The other young people in the trial outside of this core group were less inclined to participate in group sessions although some did.

In-house: The young people in the In-house stream from Rongotai College all attended the school, were friends and knew each other well.

I reckon the best thing was like being around the bros, like without them it wouldn't be fun. If it was people I didn't know I would feel like I'm being forced to do this but because it was with people I already know and they were mates to me before I got into the groups. (Young person)

All young people were expected to attend weekly sessions although attendance decreased as the trial progressed. In later stages of the trial In-house set up a drop-in afternoon once every one or two weeks from 3:00-6:00pm for all participants but attendance was low.

Youth coaches talked about how doing activities with groups was more fun, it made trips more appealing, safer and more achievable when everyone knew each other. They said the groups made it easier to engage with young people.

I found it much easier to connect when I knew that we had a little bit of a carrot to dangle because previously we were just trying to enrol NEETs on our wining personalities and beyond that there was nothing else. (Provider staff)

Groups also opened up the potential for different activities which would not be suitable for a one-on-one session.

All youth coaches found group work an advantage because groups:

- **Were efficient:** The youth coaches had more time with the young people because they could see more young people at once.

I think something we have noticed as well, the Rongotai group has been a really big eye opener for us because working in a group I think has been more successful in terms of regular engagement with all of them all at once 'cause catching up with say seven others that say are super high, it is a lot of time. (Provider staff)

- **Provided a positive peer group:** A lot of the young people described themselves as hanging out with the wrong people. The trial provided them with a group of peers where it was normal to do positive things like make goals for the future.

Having it as group work made me feel less isolated, it was nice having people like me and seeing them do well too. 'Cause we could see them doing stuff like getting jobs or signing up for stuff. It made it feel more normal for whatever you did. (Young person)

- **Improved interpersonal skills:** Creating a safe place for the groups to interact was a goal of all the providers. This allowed the youth coaches to set expectations and model how to behave in group situations. Helping the young people to work together as a group forced them into situations which many of the young people were not familiar with and helped them develop interpersonal skills.

You can do a fun activity where you all have fun, and then you come closer together. You get more of a bond, and so then when you have that one-on-one, that bond is still there. (Young person)

- **Helped young people learn new life skills** as some group sessions had a learning focus. All providers worked on getting the young people ready to apply for jobs by doing workshops on how to format and write CVs and cover letters and how to go about applying. Other examples of learning workshops were: alcohol and drug, healthy eating, cooking, mental health, sexual health, budgeting and preparation for getting a learner's driver license.

I feel a lot more comfortable, its good not having a stranger for the lessons like I know them... [I would not have been able to get my license without the trial] Like they took us down to do it as a group they helped us get ready for it. They made me confident that I could do it. I don't think I would have even started doing it without them, its scary stuff you know. I've never done anything like that before. (Young person)

There were some interpersonal challenges with group members due to some youth being from opposing groups. This made it more challenging but did not stop it being a positive experience for anyone.

They're all good. It's just, as long as you don't run into someone you know you don't like, or you're beefing with, it's all good. [It was all good] because I just kept my distance from one of the other guys. (Young person)

4.10. Accessibility and transport

It was important to make it as easy as possible for young people to access the youth coaches and trial activities. Vibe and KYS provided transport to all young people to the group sessions.

- Vibe hired a van when they wanted to pick up the young people
- KYS used a car to pick up and drop off young people, but also had to hire a van to go on full group outings.

Transport to various activities for the individual young people made it more likely they would come. Badgering the young people to be involved worked for some young people and showing up at their house was a direct way to do this. Providing transport also resulted in:

- More time with the young people
- Casual contact with whānau
- Increased ability to run errands and make sure youth were getting to where they needed to be (health, justice, family etc).

[What did you do when your youth coach picked you up?] Going to my family group conferences, and going to my CYFS stuff, and then just taking me to doctors for my medication and stuff. (Young person)

[Would you have gone to these things if they didn't pick you up?] No [it makes it easier]... especially because he picks us up from our houses or if we're at someone else's house or at school. (Young person)

Although providers tried hard to address transport barriers, arranging and providing transport was an administrative and time burden for the youth coaches.

In-house was not able to provide regular transport for young people due to operational procedures.

5. Outcomes for trial participants

The outcomes each young person achieved varied with their needs, personal circumstances and goals. This section provides examples of the outcomes achieved across the young people. The qualitative feedback in this section is supported by TOMM results where available, and vice versa. A summary table of the TOMM results by domain is included in Appendix Four.

5.1. Education and employment

Education and or employment were recognised outcomes for young people in the trial. Youth coaches encouraged young people to follow the path which best suited their life. Of the young people who took part in the trial from Vibe and KYS, more than half (60%) had either enrolled in a new course/training programme or continued with their education. One-third had found new employment while one-quarter were not in any education or employment (Figure 5).

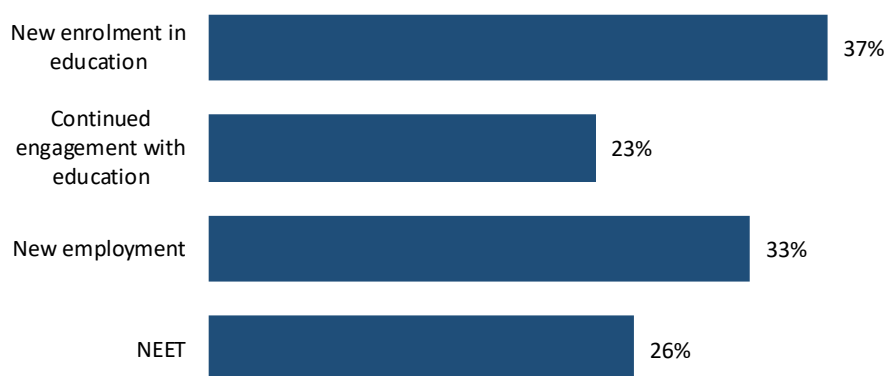


Figure 5. Outcomes for KYS and Vibe young people after 12-months in trial (n = 43)

The TOMM ratings for participation (Overall, Education, training and/or employment) also show a large increase in young people's scores indicating more engagement with education/training and employment (Figure 6). The proportion of the young people rated as 'at risk' or 'seriously at risk' dropped from 78% at the lowest point to 30% in the most recent assessments

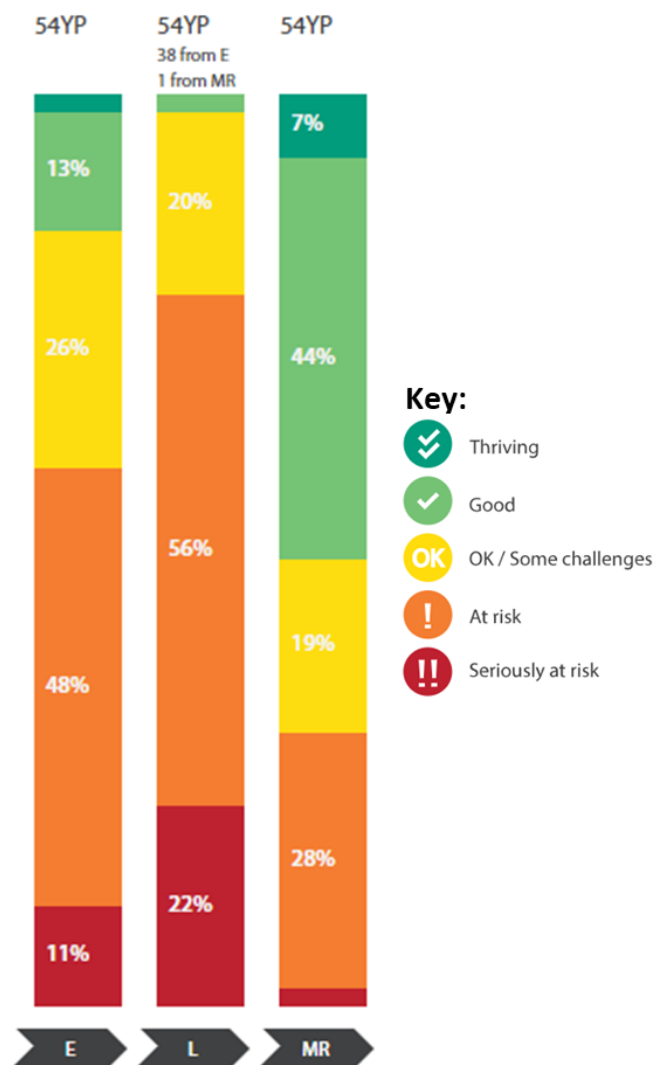


Figure 6. TOMM Overall, Education, training and/or employment rating (Vibe n = 21 and KYS n = 33) (E = entry, L = lowest rating, MR = most recent)

The providers included a focus on work-readiness for young people who intended to enter employment. They did so through group activities such as CV development and interview practice as well as one-on-one support searching for and applying for jobs.

We wrote my CV and he's tried to get me a couple of jobs, which was cool. So, now I'm ready to get a job. (Young person)

He helped me get through [the work ready course] and all this stuff. (Young person)

Completing learner, restricted and full driver licence testing was an important step related to employment that had wider benefits. Gaining a driving licence enabled young people to access jobs with a driving component, but it also made it easier to travel to work or education opportunities.

Before I had got my licence, I was already driving without one, [they said] “you may not have the funds to get it, but we do. You are part of the NEET Trial, we can get it done and sorted and study”. If it wasn’t for him motivating me to get it and saying that the trial has funding for it then I probably would’ve not gotten it. (Young person)

5.1.1. Educational enrolment and achievement

Some young people said they had remained at their education provider longer and made more of an effort because of their youth coaches.

They made sure I went into school and stuff, and went to class. We caught up maybe once or twice a week... [Interviewer: would you have gotten level three without them?]. Not with level three, no. (Young person)

Yeah, he helped majorly, when I would be at home not wanting to go to course, or at course not wanting to do work, he would show up and encourage me. Because I didn’t want to turn out like my parents did. I could talk to him and confide in him about how I was feeling, and he said “do you want to be the person I know you can be, or the person you don’t want to be”. And it motivated me so much that I got where I am today (Completed NCEA level 2 and has a part time job). (Young person)

A large part of what the youth coaches did was show the young people what their options were and what they would mean for the future. Many of the young people were not aware of what was on offer, what courses they could get into, how they could pay for courses and what they would get out of doing them. Youth coaches went on trips to show them different education and vocational training providers to give everyone a sense of what it was like and what was on offer. Some young people had signed up or were enrolled in further study that they had never thought about doing

I had already had a big think about it that I wanted to leave [college] before we did the group, ‘cause I thought the things I was doing wasn’t helping. I was just sitting in class bored waiting for the end of class to come for every class. [My youth coach] showed me all the options and showed me why I need to stay at school for a bit more. (Young person)

Hard to find appropriate education options for some

One young person had left their mainstream secondary school and was not able to attend the local private training establishment. The young person had tried the private training establishment but as their learning needs were too high the training establishment said they could not meet their intensive needs (the trial provider usually used this training establishment to help their clients gain NCEA levels when mainstream school was not working).

The sad thing is, he was kicked out of [the private training establishment] not because of his behaviour, he was there every day, never got into trouble. It’s just that his needs were too great. (Provider staff)

The provider found an adult learning centre which was able to provide the young person a one-on-one tutor for one day a week to help him work towards NCEA level one.

They've sorted a tutor for him, and he's real upfront. [The youth coach] asked him how he was going, and he was like, "Well it's school, isn't it? So, I don't like it, but it's there for a purpose." He doesn't have to enjoy it, but he knows he's there for a purpose. (Provider staff)

The young person is now working at NCEA level one and has a long-term goal.

I'm doing another literacy and numeracy course at the moment, that's adult literacy numeracy. I want to achieve level 1 ... (Young person)

5.1.2. Employment

The increased time available for youth coaches and the addition of employment to the trial outcomes meant all providers used their connections within the community to help arrange jobs for the young people where possible. The youth coaches engaged local employers to do presentations to the young people to talk about potential employment options and what kind of person they were looking for. Other employers were approached to explore the potential for employing trial young people. Examples of this were work placement agencies, local fast food restaurants, petrol stations, engineering firms and a range of other local employers. To help the process all providers helped the young people to write CVs and cover letters. Some of the young people were accompanied to drop off CVs.

[Was getting that job because of the trial?] Yeah definitely, that was definitely down to the program. [How did the trial help?] Just the motivation of actually getting up and doing something I guess, having them support me, and help me find jobs and all the research that went behind it, all that sort of behind the scenes stuff, just little things that motivated me to quite frankly get up off my ass and do something with my life. (Young person)

5.2. Broader wellbeing outcomes

After the initial trial period not all young people were enrolled in education or in employment. Providers talked about broader wellbeing issues in the young people's lives which were barriers to education and employment. These barriers were the same issues which made them 'high-risk' at the start of the trial, including mental health and challenging home situations. The nature of the high-risk NEET group meant young people could make considerable progress in addressing these broader wellbeing issues but still not yet be ready to engage with employment and education.

To be honest with you, I wish he was doing a bit more. A course or something. It's been okay. He's done pretty well on it [the trial] ... He's been more involved in the community

and that. I think [the trial is] more structured on their sort of personal wellbeing, maybe, which is all very good, but he's still sort of doing nothing. It has had an impact on his wellbeing though. (Whānau)

[What has changed in your life?] Meeting up with the group and stuff... Like, boosting my confidence because I'm really shy and it's pretty helpful, like I'm more happy, I guess. (Young person)

5.2.1. Improved physical health and basic needs

TOMM data showed that both physical health and basic needs ratings improved for many trial young people. The data indicated a change in physical health from 'at risk' to 'OK' for around one-third of young people (Figure 7. TOMM physical health and basic needs rating (physical health Vibe N = 34 and KYS N = 14) (Basic needs Vibe N = 32 and KYS N = 20) (E = entry, L = lowest rating, MR = most recent) 'At risk' physical health relates to the young people having a physical health issue that is impacting on their overall health and wellbeing that is not being addressed, whereas 'OK' indicates that the health issue is being addressed. This is in line with interviews with trial staff and young people who talked about engaging with doctors or nurses to help with their health.

At their lowest rating, under half (46%) of trial young people had their basic needs met (such as having a safe place to sleep, enough food, clothing and financial resources). This increased to 85% at the most recent rating (Figure 7). The improvements for young people were predominantly from 'mostly met' to 'being met'.

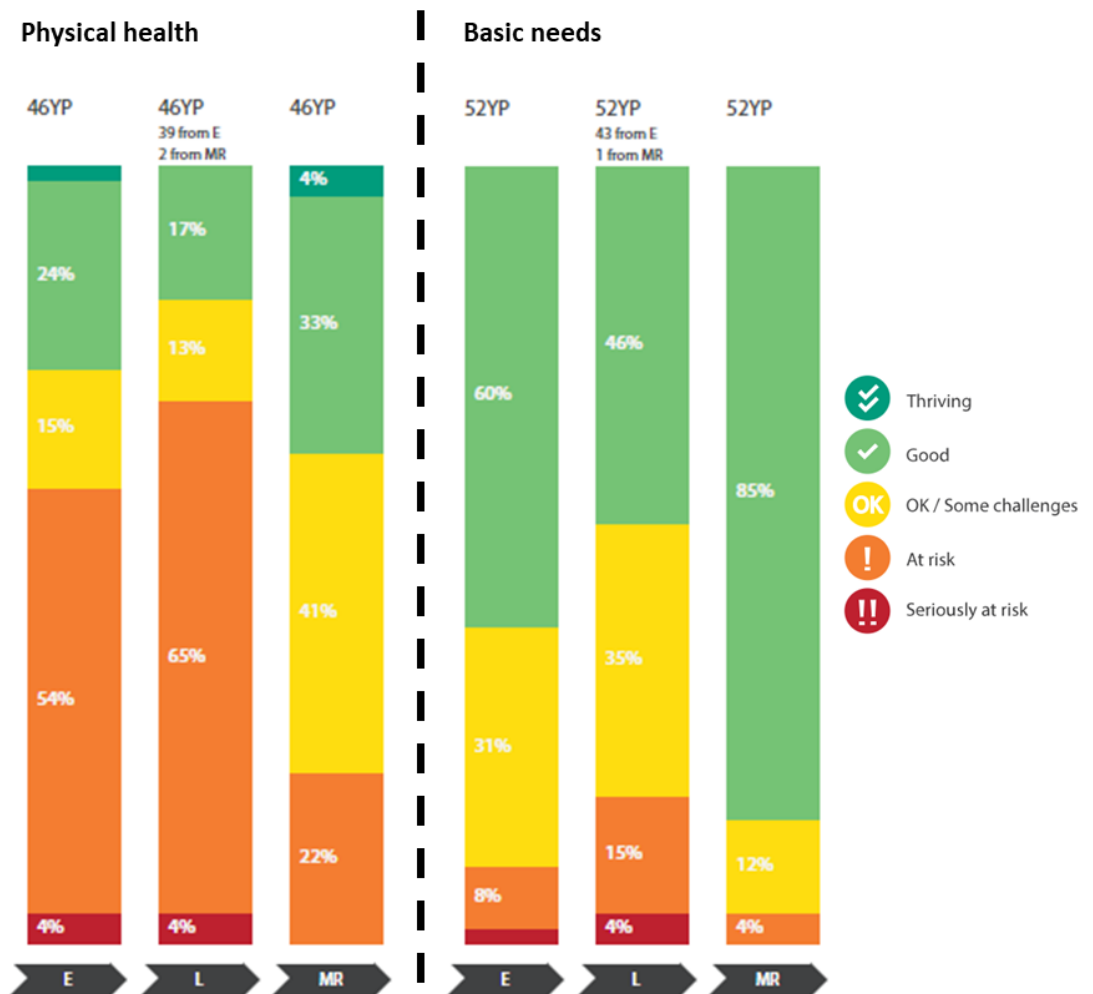


Figure 7. TOMM physical health and basic needs rating (physical health Vibe N = 34 and KYS N = 14) (Basic needs Vibe N = 32 and KYS N = 20) (E = entry, L = lowest rating, MR = most recent)

5.2.2. Improved mental health

Providers and young people described improvements in mental health including reductions in anxiety and depression. Improvement was closely tied with increased confidence and motivation.

Examples of positive changes included:

- Improvements in overall mental wellbeing

I think for her, it has helped her with her psychological problems. It's helped her to come to terms with her life, and really to think clearly about taking some steps for herself. (Whānau)

- Increased confidence particularly in interacting with other people and managing social situations

I feel more confident because of him, to be around other people, I don't know, because before then, when I didn't know people I wouldn't really be comfortable around them. I wouldn't be positive, but now I'm positive to be around people and I can talk to them and stuff. (Young person)

- Increased motivation from being part of the trial and particularly group activities.

He's learned, I guess, because I've probably kept pounding it into him that the more he sits at home, the worse he's going to feel, and being a part of something makes him feel better, so now he's going out on his own to find something to do. (Provider staff)

I'm just more out there rather than just staying at home being a couch potato. (Young person)

Some young people were also connected with further support from the mental health services provided by Vibe and KYS where youth coaches thought they needed extra support.

TOMM data showed that the emotional and social wellbeing ratings improved from both entry and the young people's lowest points to their most recent rating. At their most recent assessment, nearly half (49%) of trial participants had a mental health rating indicating that the young person was 'experiencing good mental health'. A further 37% were rated as having 'OK' mental health (experiencing good mental health most of the time). This was a large change from the entry and low point where around half of young people were 'At risk' or 'Seriously at risk'. 'At risk' indicates that a young person had a suspected mental health issue that was causing them problems and was not being managed. The 'Hope' rating also followed a similar pattern (Figure 8).

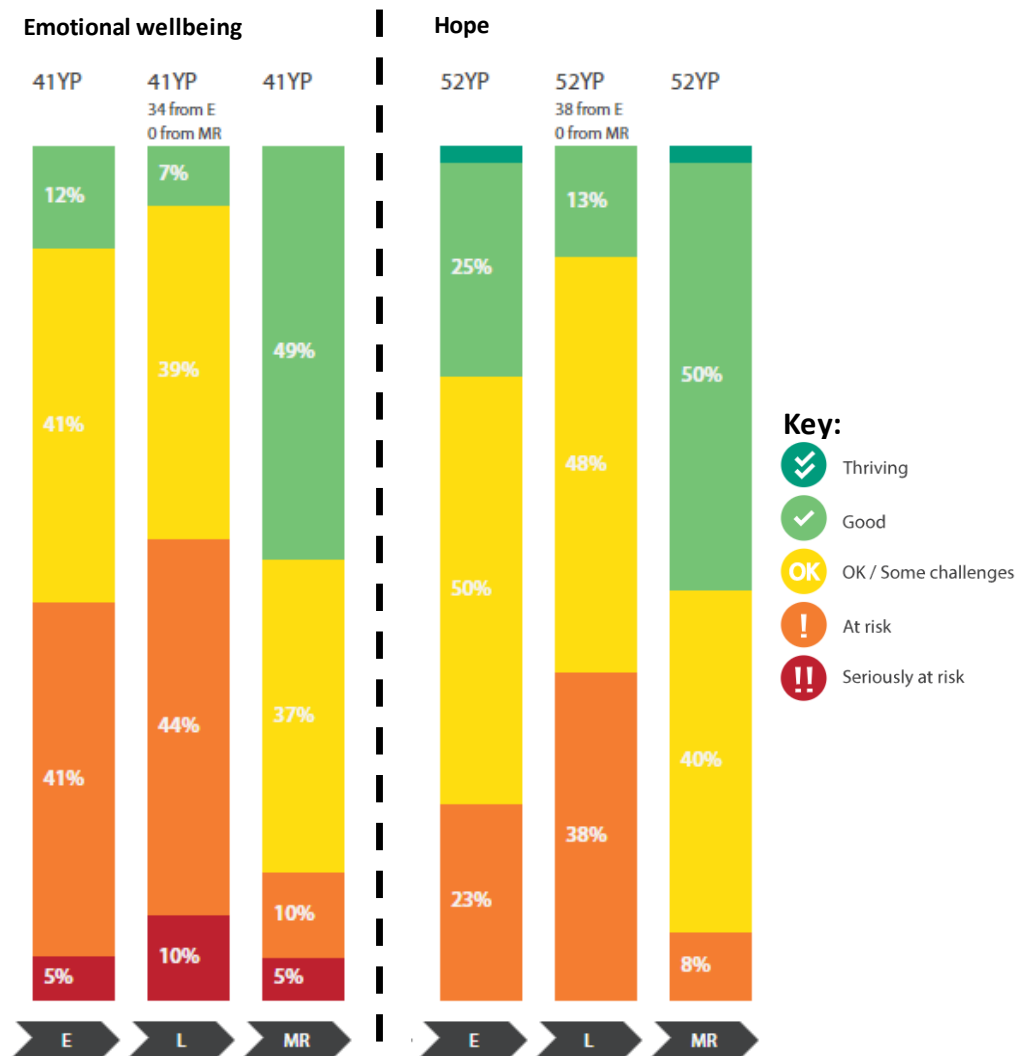


Figure 8. TOMM Overall emotional and social wellbeing rating and Hope (Wellbeing: Vibe N = 21 and KYS N = 20) (Hope: Vibe N = 32 and KYS N = 20) (E = entry, L = lowest rating, MR = most recent)

5.2.3. Improved interpersonal relationships and increase in ability to create relationships

Many participants described improvements in their interpersonal skills through participation in the trial. They were often connected to increased confidence and motivation and led to better relationships with the people in their lives. The most common example young people provided of a change was getting on better with caregivers and feeling more able to interact with other people.

They [the youth coaches] have helped me communicate more with my parents more. I feel more confident communicating with them now. They helped me push myself to communicate. It makes it easier with my parents. (Young person)

There was a lot of negativity towards his father and somehow in that timeframe he was engaging with [the youth coach] he has picked up the relationship with his father, which is

great, yeah, I have definitely seen a different side of him, yeah, from him doing this course. (Whānau)

Changes for the young people led some to change their social groups because they wanted a more positive environment. For some, that meant reconnecting with family from a position of pride.

I wanted to change my life around and once I started changing my life around. A lot of friends stopped talking to me because they thought they were too good for me. I really saw the true colours of people... Family members, after they realised how well I was doing on the trial and the dramatic changes of my attitude and my attitude towards everything I was doing, they were so proud of me and so grateful to the coaches for what they had done.... (Young person)

Some of the young people described seeing reductions in anger and violence in themselves and in other trial participants.

[We worked on] my anger issues. When I got angry, I started throwing stuff around, or I start to beat up people at random... Yeah. It's completely stopped now. (Young person)

TOMM data showed that young people's ratings for whānau relationships and peer relationships improved over the course of the trial (Figure 9). The greatest change was in whānau relationships with the proportion rated 'good' improving from 11% at the lowest point to 59% in the most recent assessments.



Figure 9. TOMM whānau and peer relationship ratings (Whānau relationships: Vibe N = 33 and KYS N = 21) (Peer relationships Vibe N = 16 and KYS N = 17) (E = entry, L = lowest rating, MR = most recent)

5.2.4. Reduction in alcohol and drug use

All providers delivered alcohol and drug education as a group activity within the trial. It could be a long journey for young people to change their use as they had often been using for long periods of time and it was ingrained in their social groups. However, some of the young people said they had reduced or stopped their use of alcohol and drugs.

I was pretty hardcore with all that stuff. Like, whenever I could get anything you know. They were really good helping me get through it. They showed me that I didn't need any of that to get through stuff or to have fun and I don't need to use them to keep going, like I was in a pretty dark place. (Young person)

I was one of those drugged teenagers and everything. And one of [the youth coaches] was actually telling me, because he's actually a drug and alcohol counsellor. And he actually talked to me, probably the last three-months I've stopped taking drugs ... I guess he told me like, even jobs, I can't get a job if you test positive for drugs or something like that, and I really want a job. (Young person)

TOMM data showed that alcohol and drug ratings improved for a small number of trial young people, but over half were still at risk (Figure 10).

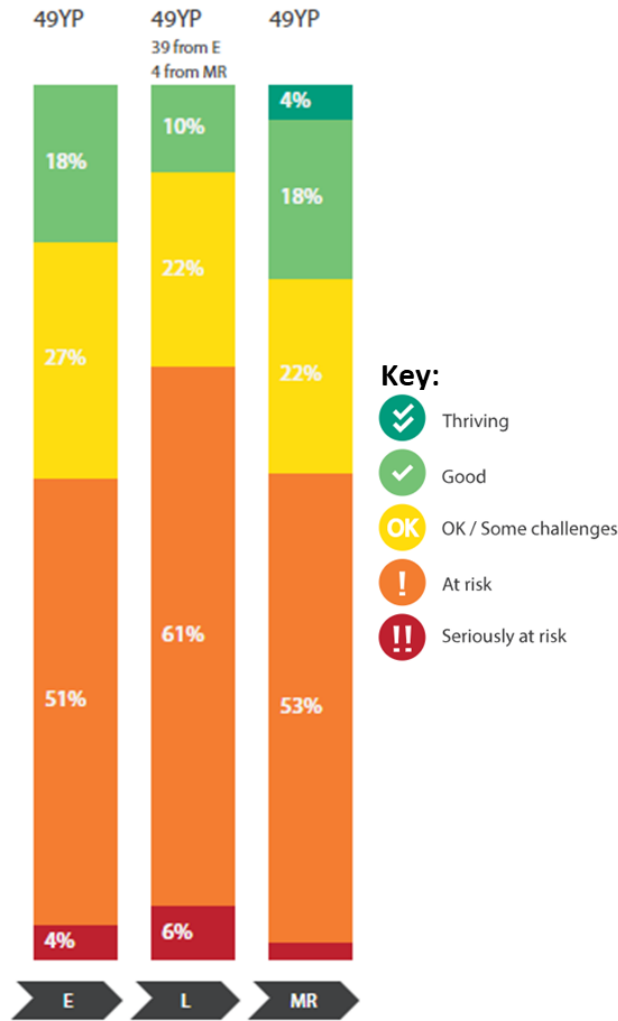


Figure 10. TOMM alcohol and drug use ratings (Vibe N = 28 and KYS N = 21) (E = entry, L = lowest rating, MR = most recent)

5.2.5. Increased independence, life skills and safe behaviours

Young people often talked about feeling more mature and being ready to be independent. They saw the changes in themselves and reported friends and family had noticed differences as well.

I've definitely matured since I first walked in through those doors. And a lot of people have said that. And I do see a few things differently now than I used to. (Young person)

TOMM data showed an increase in safe non-violent behaviours. TOMM 'OK' ratings indicate that the young person is usually safe but may very occasionally participate in unsafe risky behaviours. This indicates that three-quarters (76%) of young people in their most recent TOMM rating were usually acting in a safe way compared to 41% at the lowest point.

[Have you noticed any changes in any of the other guys?] Yeah, my bro [another trial youth] he's not smashing people anymore, so it must be good... The bro's less angry now, but he's more sad now.... Because of all that shit he's gone through, and he's still going through it. (Young person)

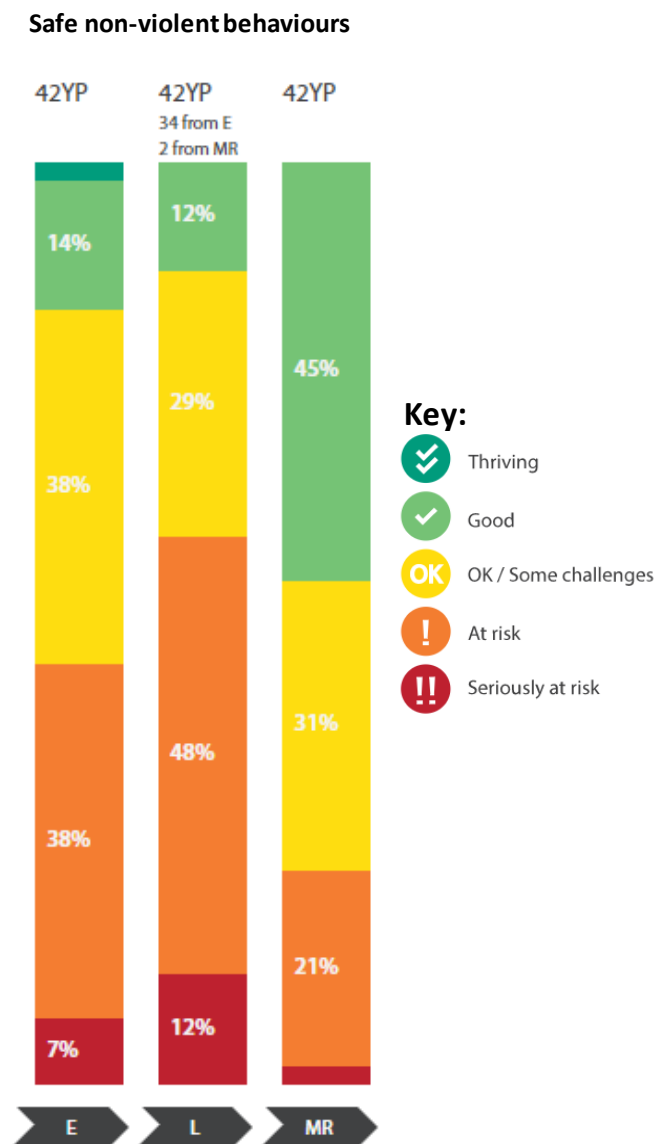


Figure 11. TOMM safe non-violent behaviour ratings (Vibe N = 25 and KYS N = 17) (E = entry, L = lowest rating, MR = most recent)

5.2.6. Raised goals and expectations

Many of the young people said they always had goals and dreams of where they wanted to end up, but the trial gave them a clear plan with steps they could achieve along the way. Some young people had never considered a life outside of getting the benefit, but over the course of the trial they became more aware and more motivated to seek out a different future they felt they would actually enjoy.

It sounds really bad, but I was just gonna go on the benefit and not do much really. They made me realise I can do something I love and that my life can be more interesting. (Young person) (Is now attending a full-time course)

All providers helped the young people to think about the future they want and the experiences they offered helped show the young people what was on offer.

The trips make me wanna start doing stuff. The Police college was good, I might become a police officer, I haven't really decided yet, I need to talk to my parents about it. [Interviewer: Would you ever have thought of being a cop before this?] Nah. (Young person)

I actually feel quite positive about the future for [my son] now, whereas when he first came on the thing [Trial], I was a wreck. (whānau)

5.2.7. Increased community participation

TOMM data showed that community participation improved for around three-quarters of young people (Figure 12). This indicates an improvement in being connected and making a contribution to their community, hapū or marae. This is in line with the various activities involved in the trial including visiting some marae and taking part in community activities to help give back.

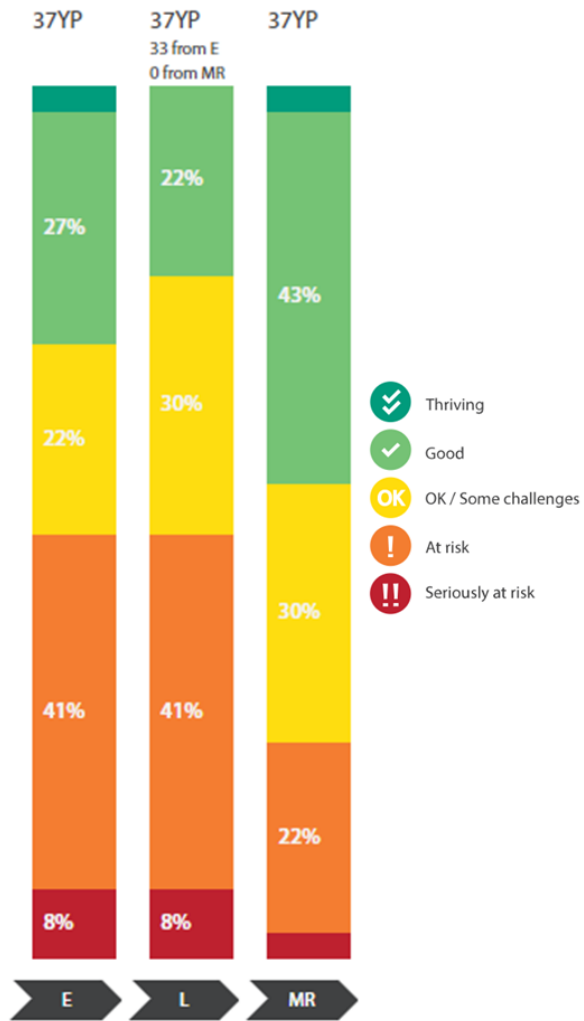


Figure 12. TOMM participation in community, activities and sport (Vibe N = 18 and KYS N = 19) (E = entry, L = lowest rating, MR = most recent)

6. Overview

The NEET Trial gave three providers the opportunity to test new approaches to working intensively with NEET young people at high risk. The objective was to enable young people to transition successfully to adulthood.

The trial supported providers to address challenges in working with high-risk young people through different approaches to implementation, lower caseloads, use of group activities and strengthening the relationships between young people and their youth coaches.

The changes contributed to strong relationships between participants and their youth coaches, which underpinned engagement in:

- Education: New enrolments in education (37% of Vibe and KYS participants) and continued engagement/re-engagement with education (23%)
- Employment: Entering new employment (33%).

Not all participants achieved education and employment outcomes. Around one-quarter (26%) of the KYS and Vibe participants were still NEET. But for some young people there was considerable progress in broader wellbeing outcomes which are steps towards the transition out of NEET.

TOMM data showed that many young people in the trial had improved overall ratings. At their lowest point, no young people were rated as 'good' or 'thriving' and over 80% were rated as 'at risk' or 'seriously at risk'. In their most recent ratings only 35% were rated overall as 'at risk' or 'seriously at risk' (Figure 13).

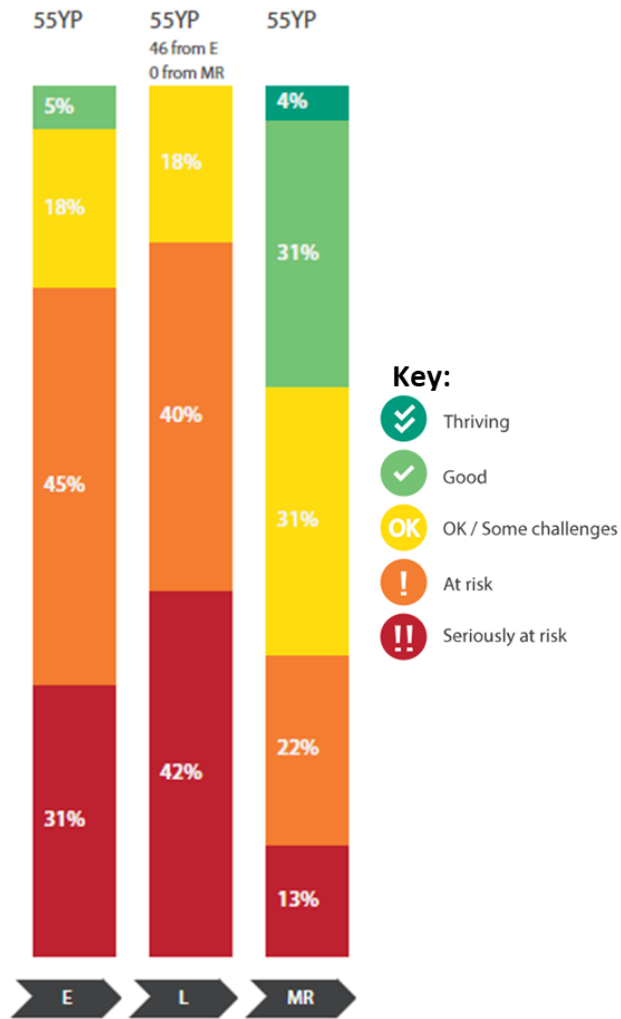


Figure 13. TOMM overall ratings (Vibe N = 34 and KYS N = 21) (E = entry, L = lowest rating, MR = most recent)

7. Final words from the young people and whānau

Some of the young people and their whānau wanted to pass on their thanks to their youth coaches and their support for the trial. A selection of their comments is included below.

I just want to say that the coaches were absolutely amazing and helped my life out a lot, and I'm so thankful to have this opportunity that they've given me. I'm just grateful for everything that they've done. (Young person)

They've done pretty well with me. (Young person)

[my youth coach] is a really good man, he's just a good guy to be around and shows you the right path... It's just been really fun doing it, like he always said there would be food, but I didn't even think about the food. I thought about what are we gonna do, where is the next workshop gonna be that kind of thing, so, it wasn't even about the food. It was just really fun. (Young person)

Just, hopefully they keep the programme running so they can help other people too. (Young person)

I'd just like to tell them how I've changed since I've been with Vibe. (Young person)

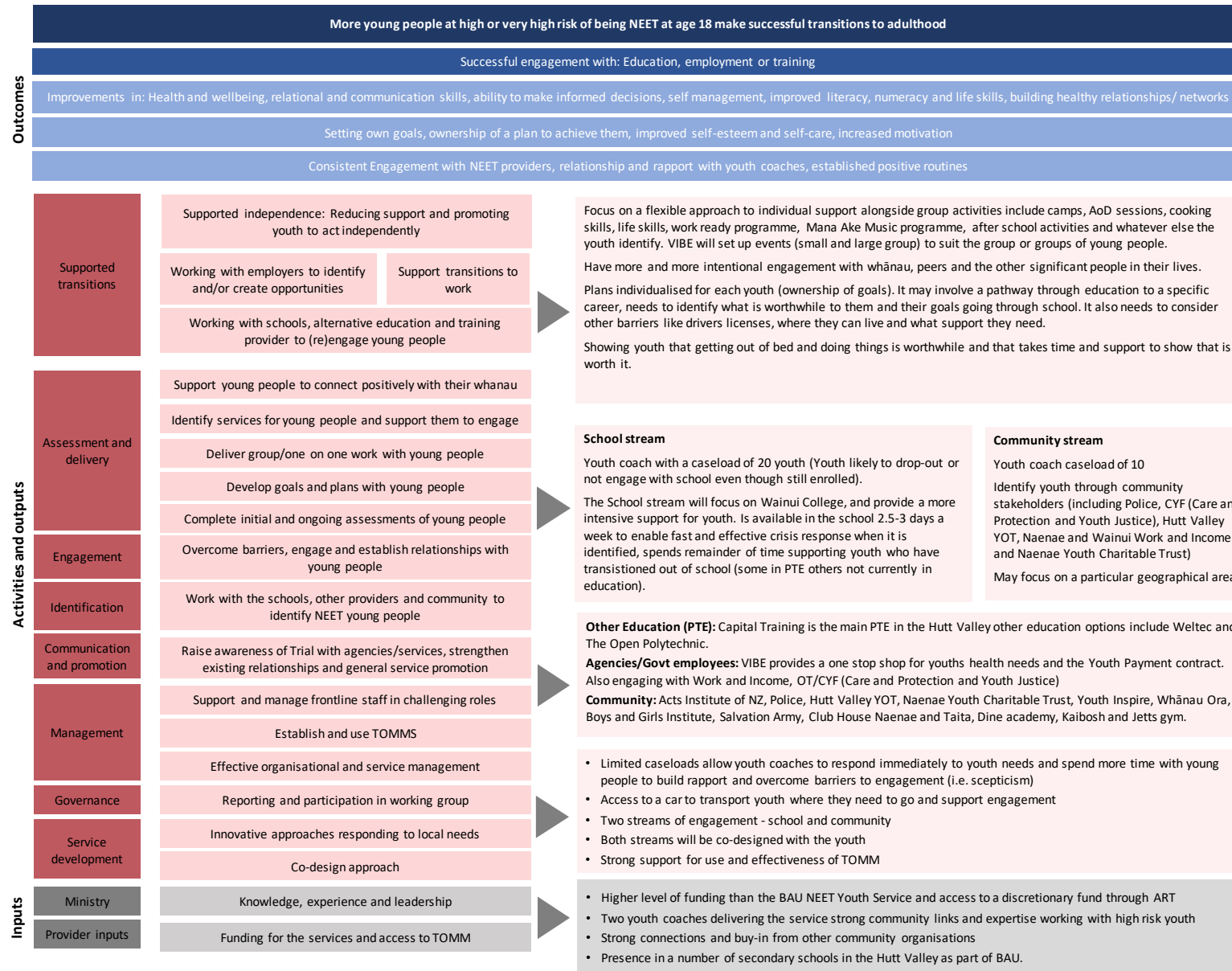
Yeah, I think it's great. I think that these courses should be available for the youth. Definitely should be kept going. As far as suggestions go, I don't really know what they could do more. I think they did a lot for them... I would consider him [the youth coach] part of the family, he probably wouldn't look at it that way, but that's how I feel. (whānau)

[I'm] very thankful that the coaches were there for her in the whole process. Helps her out heaps and I'm just thankful. (whānau)

I think I'd like to say that investment at this level in helping people that have got difficulties, identified difficulties is a good investment. Because if you leave it until you're picking up the pieces later on down the track. It'll cost a lot more. (whānau)

Appendix One: Provider logic models

Ministry of Social Development NEET trial services (2017-18): VIBE



Other notes

- Although hard outcomes for the trial are education and training, there is large variation in what can realistically be achieved for individual youth.
- Other softer outcomes include confidence, social skills and practical changes their routine (TOMM is more flexible in measuring these changes)
- A young person having a plan and knowing what they want to do is "success".

- Getting the right risk rating has been challenging.
- Some youth are on the edge of high-risk and even though they show signs they are sitting outside the rating as they haven't been caught committing a crime yet.

- Before engagement can happen there needs to be a relationship of trust between the youth and VIBE staff - Needs to be built over time with multiple supportive engagements

- Finding suitable youth has been time consuming along with building up relationships

- Challenges with high/very high criteria

- There is a lot of scepticism from youth at first, often comes from previous engagement with other services like CYFS, schools which hasn't worked out.

Ministry of Social Development NEET trial services (2017-18): In-house



Other notes



- Although hard outcomes for the trial are education and training, there is large variation in what can realistically be achieved for individual youth.
- Other softer outcomes include confidence, social skills and practical changes in hygiene (TOMM is more flexible in measuring these changes)

- Being a part of MSD makes information sharing within MSD easier

- A number of the High-risk youth know each other so wider engagement can increase buy in across the board

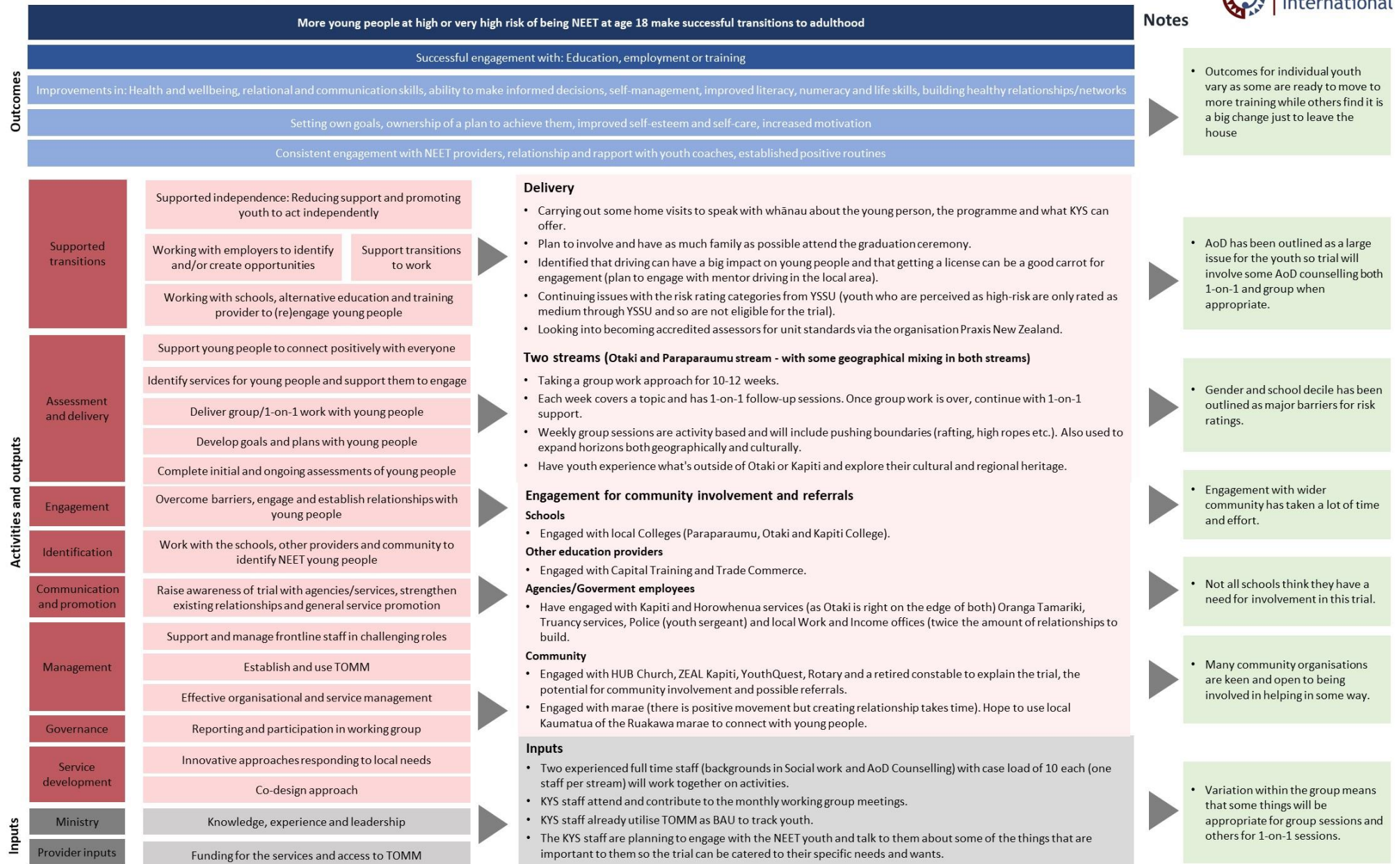
- Engagement with wider community has taken a lot of time and effort.
- There have been some negative associations around being "Work and Income"

- School engagement has taken a long time. East's was open from the start but other schools have been harder. partially from challenges in relationship building and not having key pastoral care staff at the school

- Many community organisations are keen and open to being involved in helping in some way

- Although In-house has found a range of eligible youth for the programme, it has been decided the trial would not suit all of them and some of them are doing well with the BAU approach so will not take part in trial activities.
- The trial is being used for the youth who are thought would get the most out of it.

Ministry of Social Development NEET trial services (2017-18): KYS



Appendix Two: Locality context

Differences in the secondary school decile ratings highlighted the variation in the populations within and between localities (Figure 14).⁹ School decile ratings were used to provide a measure of community socioeconomic status. Decile 1 schools are the 10% of schools with the highest proportion of students from low socio-economic communities. Decile 10 schools are the 10% of schools with the lowest proportion of students from low socio-economic communities.

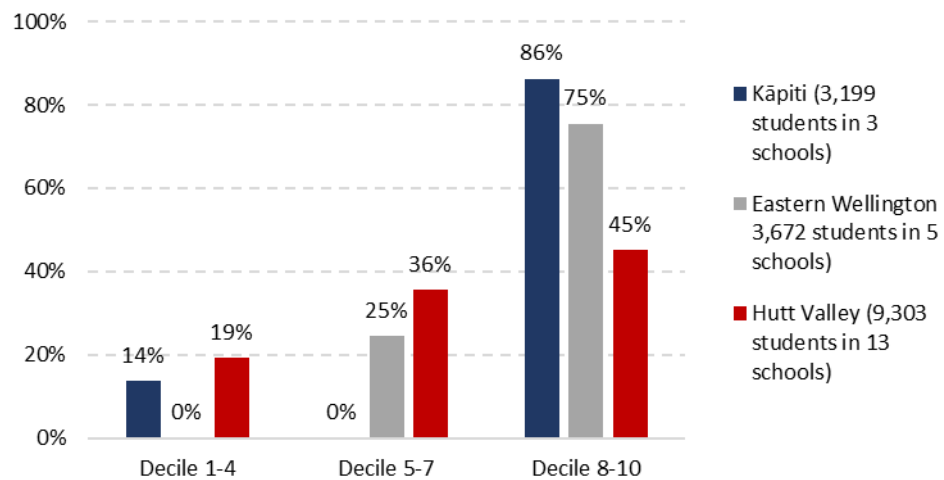


Figure 14. Proportions of the secondary school students in each area attending low, mid and high decile schools.

Census data highlighted differences in population statistics.

⁹ The Government announced in 2017 that the school decile system will be replaced by a new Risk Index.

Table 8. Regional statistics¹⁰

2013 Census data area statistics	Kāpiti Coast	Lower Hutt	Wellington City	NZ total
Age				
0 to 14	19%	21%	17%	20%
15 to 24	9%	13%	18%	14%
25 to 44	19%	27%	32%	26%
45 to 64	27%	26%	24%	26%
65 plus	25%	13%	10%	14%
Ethnicity				
European	85%	67%	73%	70%
Māori	13%	16%	8%	14%
Pacific Peoples	3%	10%	5%	7%
Asian	3%	11%	15%	11%
Other ethnic groups	2%	3%	4%	3%
Family income				
Median	\$69,100	\$80,000	\$103,600	\$72,700
Communications				
Access to internet	76%	73%	83%	73%
Employment				
Employed full-time	39%	48%	53%	46%
Employed part-time	14%	13%	14%	14%
Unemployed	4%	5%	5%	5%
Education¹¹				
Level 1 or less	34%	33%	16%	34%
Level 2 or 3	19%	21%	23%	20%
Level 4, 5 and 6	22%	19%	15%	19%
Bachelor's degree	12%	14%	25%	14%
Post-graduate qualification	7%	7%	16%	6%
Overseas secondary school	6%	6%	6%	7%

¹⁰ Based on the 2013 Census, areas are based on the NZ territorial authority/area unit.

http://www.stats.govt.nz/tools_and_services/nzdotstat/tables-by-subject/2013-census-tables.aspx

¹¹ Of total people stated

Appendix Three: Evaluation framework

Evaluation questions	Sub-questions and measures	Data sources
Overarching questions		
How did provider characteristics (other services delivered, locations, relationships, etc) influence the Trial services?	<ul style="list-style-type: none"> • Description of provider characteristics • What provider characteristics were necessary for or strengthened the Trial services? 	Document review, interviews with provider managers and staff
How did the Trial services differ from business-as-usual YS:NEET?	<ul style="list-style-type: none"> • Identification of differences between Trial services and BAU • Were the differences connected to positive feedback from youth or indications of positive outcomes? • Usefulness of youth plans for Trial services compared to BAU 	All data sources
Resourcing and supporting the Trials		
How did the co-design approach with providers strengthen the services?	<ul style="list-style-type: none"> • Description of influence of the group on service development • Participation in the working group and provider feedback on its value 	Interviews with provider managers and staff, other stakeholder interviews
How did the funding for the Trial differ from BAU youth service funding and was it adequate to support the Trial services?	<ul style="list-style-type: none"> • Match between resources provided and the intended increase in intensity • Any limitations/challenges resulting from resourcing 	Manager interviews
Governance and management		
How do providers support and manage frontline staff?	<ul style="list-style-type: none"> • Frontline staff feedback on their roles • Frontline staff are supported and their capacities developed over time • Caseloads are managed to support the higher intensity Trial services 	Provider interviews (manager and staff)

How did the Trial services develop over time?	<ul style="list-style-type: none"> • Trial services adapt and innovate in response to experience, feedback from participating youth and evaluation 	Provider manager interviews
Reaching and engaging young people		
How were young people identified and reached by the Trial services?	<ul style="list-style-type: none"> • Descriptions of school/community outreach activities • Incoming referral sources and number of self-referrals 	Provider and youth interviews
To what extent did the services reach and engage the high and very high-risk groups?	<ul style="list-style-type: none"> • Volume of young people successfully engaged by the services • Match of referred/engaged young people with the target group based on MSD NEET assessment criteria and TOMM initial assessments 	Initial TOMM assessments Risk analysis results for participating youth Provider staff and youth interviews
How did the services establish rapport and relationships with youth? What were the barriers/facilitators?	<ul style="list-style-type: none"> • Staff/youth feedback on engagement process • Staff/youth feedback on strength of relationships between staff and participating youth • Barriers/facilitators for engagement 	Provider and youth interviews
In what ways were whānau involved in the Trial services?	<ul style="list-style-type: none"> • Staff/youth feedback on whānau engagement 	Provider, youth and whānau interviews
The services delivered		
What services were delivered to young people? How did they vary within and between services?	<ul style="list-style-type: none"> • Description of services delivered and comparison between sites 	Provider interviews and analysis of provider updates
How did the services differ from BAU for high-risk NEET clients?	<ul style="list-style-type: none"> • Comparison of services delivered to BAU for the Youth Service: NEET • Description of what increased intensity represented for the Trial services 	Provider interviews and analysis of provider updates
How were young people supported to set goals and plans?	<ul style="list-style-type: none"> • Description of goal setting and planning approach 	Provider and youth interviews

	<ul style="list-style-type: none"> Usefulness of plans for Trial services Analysis of goals and how they changed over time for youth 	
What were the barriers and facilitators for engaging young people with employment/ education/training opportunities?	<ul style="list-style-type: none"> Support provided to youth to engage with opportunities Provider/youth/stakeholder views on what made it easier/harder to engage with NEET 	Provider and youth interviews, stakeholder interviews
What service elements were most supported by staff/young people?	<ul style="list-style-type: none"> Young people and staff identify the most useful aspects of the services 	Provider and youth interviews
How do young people exit the service (planned and unplanned)?	<ul style="list-style-type: none"> Number of internal and external referrals to employment/education/training or other services and number of successful engagements 	TOMM, provider interviews
Working with employers, education providers and other services		
How did the Trial services establish new relationships?	<ul style="list-style-type: none"> Description of work with employers, services and education/training providers including number of outgoing referrals and referral process 	Provider interviews
To what extent did Trial services depend on existing relationships?	<ul style="list-style-type: none"> Staff/stakeholder views on importance of existing relationships 	Provider interviews
What were the barriers/facilitators?	<ul style="list-style-type: none"> Youth descriptions of what made services youth friendly 	Provider interviews
What were the most important relationships for young people?	<ul style="list-style-type: none"> Youth descriptions of the services they use, how they use them and how it changes over time 	Provider and youth interviews
How many young people were referred to education/ employment/	<ul style="list-style-type: none"> Number of referrals and number of referrals which result in a successful engagement between youth and service 	Admin data/ TOMM

training opportunities?		
Outcomes from the services		
What outcomes did young people achieve as a result of the Trials?	<ul style="list-style-type: none"> • Numbers/proportions who achieve employment or are engaged in education/training • TOMM pre/post assessment results supported by qualitative feedback from interviews with young people, staff, whānau, stakeholders • Young people with goals set and achieved 	Provider and youth interviews, TOMM
What elements of the services were most closely connected with positive outcomes?	<ul style="list-style-type: none"> • TOMM pre/post assessment results supported by qualitative feedback from interviews with young people, staff, whānau, stakeholders 	Provider and youth interviews, TOMM
How did the outcomes of the service differ from BAU outcomes?	<ul style="list-style-type: none"> • Comparison of outcomes received to those of high/very high-risk NEET historically/with other providers • Young people consistently attending, reduced DNAs 	Limited comparison to outcomes for BAU YS:NEET for Trial providers and all other providers
To what extent does TOMM provide data to evidence outcomes for participants?	<ul style="list-style-type: none"> • TOMM pre/post assessment results supported by qualitative feedback from interviews with young people, staff, whānau, stakeholders 	TOMM
How have other young people (for example, low-medium NEET young people) been affected by the Trials?	<ul style="list-style-type: none"> • Changes to BAU service delivery as a result of the implementation of the Trial services 	Provider interviews

Appendix Four: TOMM sub-domain mean scores

(E=Entry, H=Highest, L=Lowest, MR=Most recent) (1=Thriving, 5=seriously at risk) (Parenting and pregnancy data removed due to small n value)

NEET Trial group

Sub-domain	E		H		L		MR		Differential (L - MR)
Hope	2.94	(54 YP)	2.31	(54 YP)	3.26	(54 YP)	2.57	(54 YP)	+0.69
Values, beliefs & faith	2.79	(19 YP)	2.47	(19 YP)	2.89	(19 YP)	2.53	(19 YP)	+0.37
Cultural identity	2.77	(22 YP)	2.36	(22 YP)	2.91	(22 YP)	2.55	(22 YP)	+0.36
Sex, sexual orientation/gender identity	2.00	(14 YP)	2.00	(14 YP)	2.14	(14 YP)	2.14	(14 YP)	0
Mental health	3.15	(13 YP)	2.62	(13 YP)	3.31	(13 YP)	2.77	(13 YP)	+0.54
Emotional & social well-being	3.39	(44 YP)	2.45	(44 YP)	3.55	(44 YP)	2.70	(44 YP)	+0.84
Alcohol & drug (AOD) use	3.38	(53 YP)	2.85	(53 YP)	3.64	(53 YP)	3.30	(53 YP)	+0.34
Safe, non-violent behaviours	3.29	(49 YP)	2.53	(49 YP)	3.53	(49 YP)	2.92	(49 YP)	+0.61
Sexual health	3.07	(15 YP)	2.67	(15 YP)	3.27	(15 YP)	2.87	(15 YP)	+0.40
Pregnancy									
Physical health	3.35	(46 YP)	2.57	(46 YP)	3.59	(46 YP)	2.85	(46 YP)	+0.74
Basic needs	2.50	(54 YP)	2.11	(54 YP)	2.78	(54 YP)	2.17	(54 YP)	+0.61
Education, training &/or employment	3.51	(55 YP)	2.22	(55 YP)	3.95	(55 YP)	2.71	(55 YP)	+1.24
Community, activities, sport	3.24	(41 YP)	2.49	(41 YP)	3.34	(41 YP)	2.76	(41 YP)	+0.59
Family, extended family, Whanau	3.07	(55 YP)	2.27	(55 YP)	3.36	(55 YP)	2.51	(55 YP)	+0.85
Partner	2.57	(21 YP)	2.33	(21 YP)	2.86	(21 YP)	2.48	(21 YP)	+0.38
Parenting									
Friends, peers	3.28	(39 YP)	2.69	(39 YP)	3.38	(39 YP)	2.92	(39 YP)	+0.46

