



YOUTH HORIZONS | KIA PUĀWAI

2015

ANNUAL REPORT



OUR VALUES

Our four organisational values run deep within Youth Horizons/ Kāia Puāwai and underpin everything we do. Manaakitanga, Wairuatanga, Whanaungatanga and Aroha guide the way we work with rangatahi, whānau and together as a team.

MANAAKITANGA

In all facets of life, both worldly and spiritual, Manaakitanga is demonstrated through practical, spiritual and other means. It involves looking after people, always respecting them and being very careful about how you treat them. It is about supporting each other in order to achieve outcomes and balance.

Kia Tupu, Kia Hua, Kia Puāwai

To grow, to prosper, to flourish

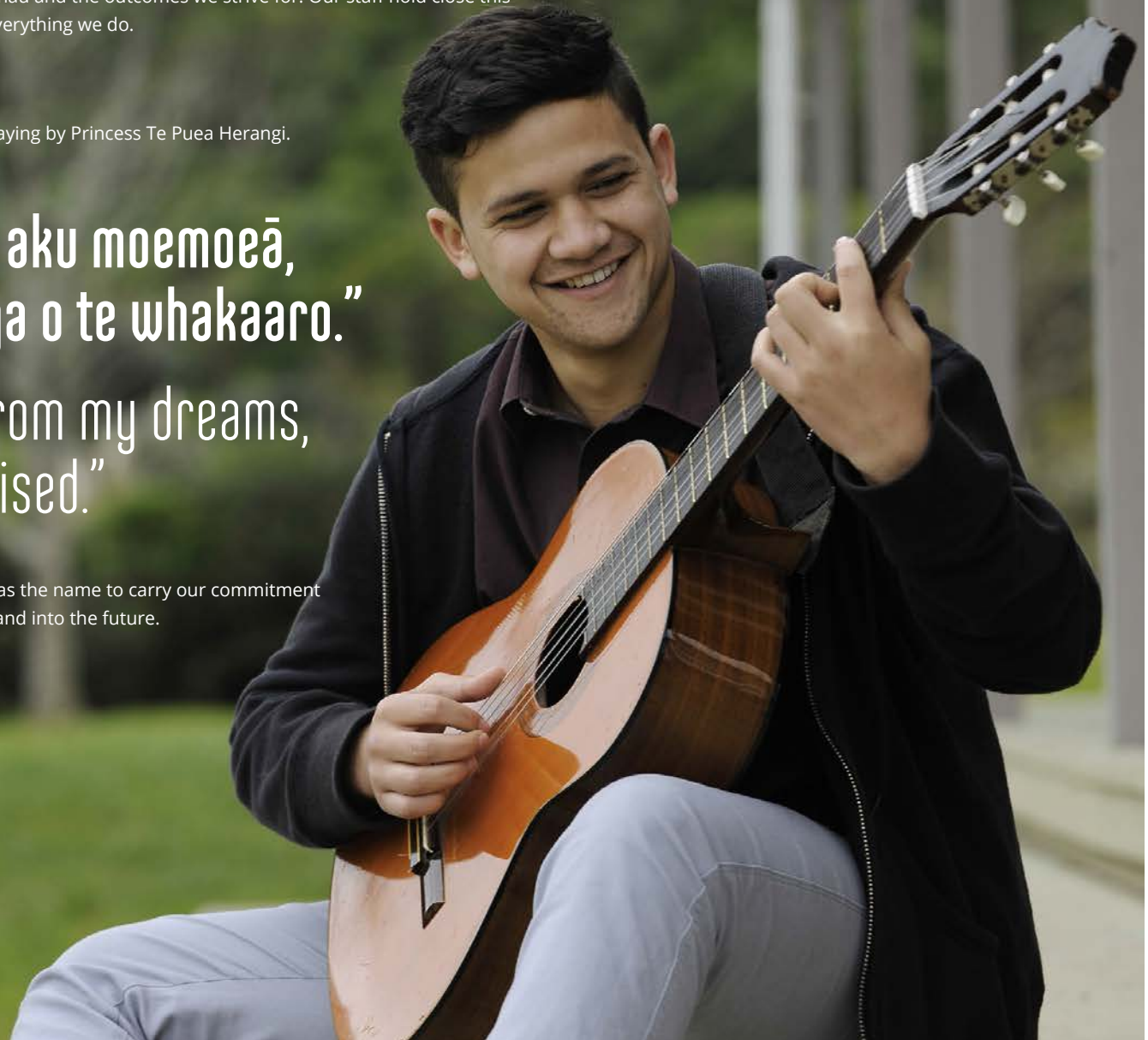
This whakatau-ā-kī is much more than a saying – it is a way of life. It runs through the way we work with young people and their families and whānau and the outcomes we strive for. Our staff hold close this ideal ‘to flourish’ and it carries through everything we do.

The name Kia Puāwai was taken from a saying by Princess Te Puea Herangi.

“I te ohonga ake I aku moemoeā,
ko te puawaitanga o te whakaaro.”

“When I awaken from my dreams,
they shall be realised.”

Kia Puāwai was gifted to Youth Horizons as the name to carry our commitment to young people and their whānau, now and into the future.





CHAIR AND CHIEF EXECUTIVE REPORT

Nearly 20 years ago, a group passionate about the future for young people with conduct problems gathered together and began a journey to create the organisation that is now Youth Horizons/Kia Puāwai.

I have shared this journey for some eight years, witnessing that energy and passion flourishing into what is a leading organisation in our sector, supporting at-risk and vulnerable young people and their families and whānau.

We operate in a sector that is undergoing significant change – the shift toward social investment, measuring outcomes and cost benefit is now clearly reflected in both policy and service delivery contracts from government. Alongside this sector change, Youth Horizons has continued to invest heavily in the delivery of evidence-based interventions. We are unique in terms of the breadth of evidence-based programmes we offer, and in several cases, are the only providers of such programmes in the southern hemisphere. Our belief and investment in these programmes continues to transform our culture and practice as we strive to find and implement the very best therapeutic interventions from around the world.

During the year, along with a number of partner organisations, we jointly ran a sector conference, He Tai Pari, to share best practice in evidence-based interventions and reporting on outcomes. Close to 200 sector practitioners, local and international speakers

and leaders from the sector came together in Wellington in July last year. The feedback was excellent and we are planning to make this a regular event.

We have also seen a number of key appointments in our leadership and governance team this year. As Board Chair, I had the great pleasure of appointing our new Chief Executive, Marion Heeney, into our whānau in late 2014 and also at the same time a new board member, Tony Kake. It was encouraging for me to be part of these appointments – I received consistent feedback during the recruitment process on the profile of our organisation and the work we do. It is a privilege to be part of an organisation that is well known and regarded within Aotearoa.

We also farewelled our long standing Chief Financial and Funding Officer, and Board Secretary, John Rudd. John played an instrumental role in our organisation during his 8 ½ years and has been a steady hand through our period of significant growth. Following John's departure, we welcomed Fiona Guy into the leadership team to take up the role of CFFO and Board Secretary. Fiona has brought extensive financial leadership experience and a fresh perspective to our team which we value greatly.

As David has observed, it was the reputation of Youth Horizons that attracted me to the Chief Executive role.

Since joining I have been blown away by both the depth of capability within Youth Horizons and the opportunities we have to continue making a measurable difference for more young people and their families and whānau.

The past year has also been a year of consolidation. We have been working through an organisational change programme to better prepare ourselves for the future – with a focus on ensuring the success of our new Teaching Family Model services, along with our growth into new regions.

We are operating in a very constrained financial environment where funding to deliver services is limited. This is an ongoing discussion with government to ensure we can sustainably deliver on key priorities. We have been very focused on the recruitment and retention of caregivers in our organisation. These roles form a key part of our service delivery and contracts with government. This challenging area has seen significant investment during the year and while we are making progress, the need is ongoing.

An important area of focus for us has been to respond to recent changes in the way government contracts services. We are privileged to be part of the new pilot contract, the Specialist Behavioural Support Service, in the Midlands region. This aligns with our goal of being innovative and responsive in working to best meet the needs of young people.

Our Auckland-based Youth Service West team has continued to grow and innovate in the delivery of the Work and Income Youth Service contracts. The team has secured a number of pilot initiatives and has developed new tools and programmes to better support the young people it works with.

We are now in our second year of Te Kōrari, our project to further develop how we collect and report on evidence and outcomes for young people in our services. Through this process our knowledge base is growing and the results are impressive. We are well on our way to achieving our strategic goal of more strongly evidencing the difference we are making for young people, their families and whānau.

Finally, as Board Chair and Chief Executive, we would like to thank and acknowledge all the dedicated practitioners that we work with. Our staff should feel proud of all they have achieved and the challenges they've overcome – they are our greatest asset. Our partner organisations and funders are equally important and we thank them for their dedication and commitment to making a difference in the lives of young people.

We honour you all and celebrate together the impact we are making for New Zealand.



David Edwards
Board Chair



Marion Heeney
Chief Executive

“We are unique in terms of the breadth of evidence-based programmes we offer, and in several cases, are the only providers of such programmes in the southern hemisphere.”



WHO WE ARE AND WHO WE WORK WITH

Youth Horizons/Kia Puāwai began working with young people in 1997 with a specific mission to improve the lives of vulnerable and at-risk young people and their families and whānau. We now operate throughout New Zealand delivering a range of evidence-based and evidence-informed programmes.

We are specialists. Our focus is on delivering prevention and treatment programmes within the broad field of conduct problems. The term 'conduct problems' refers to the group of aggressive, antisocial, defiant and oppositional behaviours that when present in children and young people, predict a wide range of negative social, educational and health outcomes in later life. These behaviours are variously described as conduct disorder, oppositional defiant disorder, challenging behaviour or severe anti-social behaviour (Blisset et al., 2011)¹.

Estimates around the prevalence of clinically significant conduct problems in children and young people are in the region of 5-10% (Fergusson & Boden, 2011)². When looking at our New Zealand context and taking a conservative view of the 3-17 year old population, the

numbers suggest in excess of 40,000 may suffer from conduct problems. The scale of the problem is huge and the lifelong impact on this group devastating.

Our teams work with young people, both directly and alongside their family, whānau and wider communities, to help bring about positive change and improvements in behaviour. Our objective is to provide prevention and treatment programmes that make a lasting difference in the lives of these young people, their families and whānau. We partner with the Ministry of Social Development, District Health Boards, NZ Police, Iwi and other community groups to deliver services in regions across the North Island and in Otago and Southland.

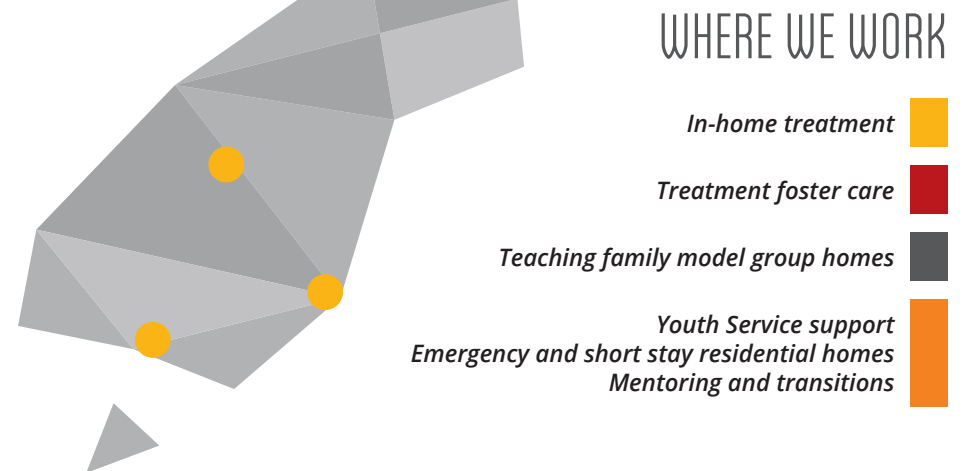
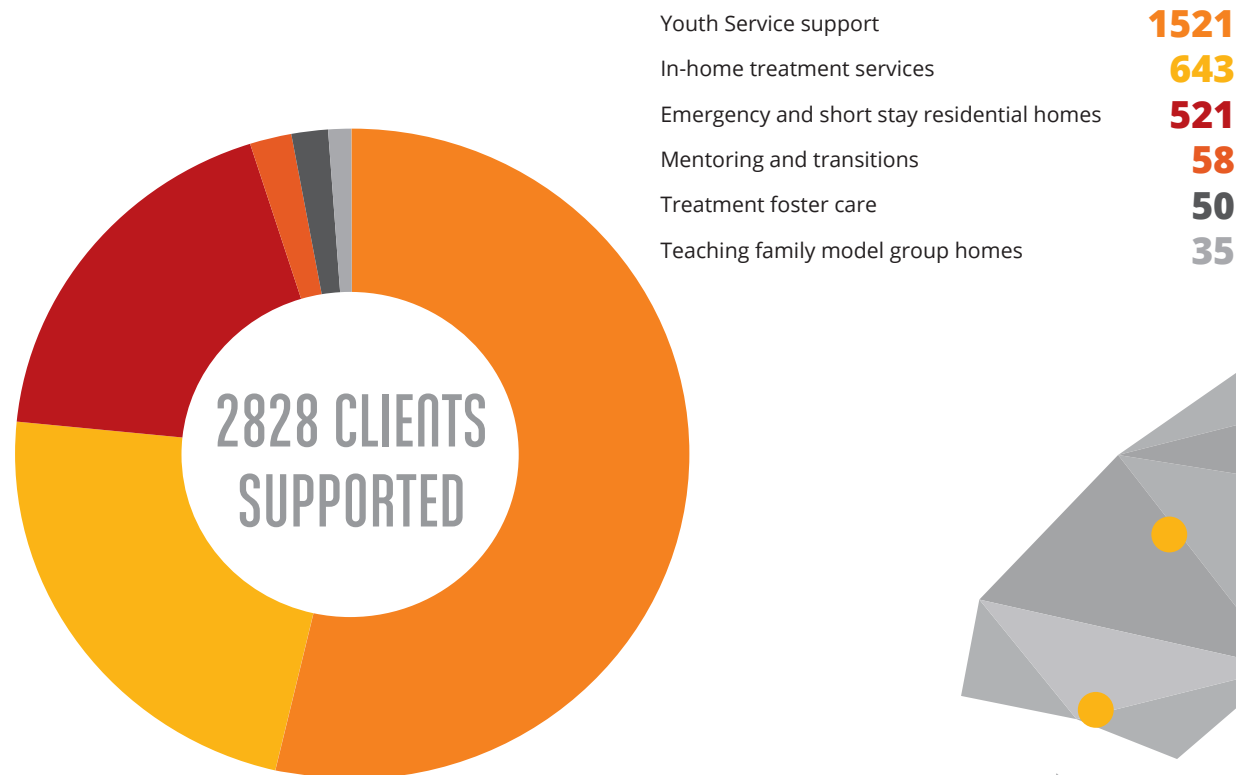
“There is no other commonly occurring childhood condition that has such far-reaching and pervasive consequences for later health, development and social adjustment.”

Professor David Fergusson, University of Otago

1. Blisset, W., Church, J., Fergusson, D., Lambie, J., Langley, J., Liberty, K. et al. (2011). Conduct Problems: Effective Services for 8-12 Year Olds. Report of the Advisory Group on Conduct Problems. Wellington, NZ: Ministry of Social Development. 2. Fergusson D, Boden J. Childhood Conduct Problems. In: P. Gluckman & H. Hayne (Eds.). Improving the Transition: Reducing Social and Psychological Morbidity During Adolescence. Office of the Prime Minister's Science Advisory Committee, 2011; 41-60.

TOTAL CLIENTS WE HAVE SUPPORTED — 2828

During the financial year (July 14 – June 15) we worked with over 2800 young people and their families and whānau, a significant increase from the previous year where we supported a total of 2097. We have seen significant growth in our Youth Service support services along with the opening of new treatment foster care and teaching family model group homes over the period.



OUR EVIDENCE-BASED APPROACH

Over the last two decades there have been significant advances in the development of effective programmes aimed at the prevention, treatment and management of conduct problems.

These advances have been made possible as a result of an increasing number of research studies that have examined treatments for conduct problems using randomised controlled trials (RCTs). Programmes known as 'evidence-based' are clearly defined interventions with an extensive history of clinical programme development, outcomes evaluation and research and successful support for implementation of the model in other settings.

Youth Horizons/Kia Puāwai has invested heavily in evidence-based programmes over the past 10 years.

We now deliver a combination of eight officially classified evidence-based programmes along with a number of evidence-informed services.

Our focus on evidence-based delivery is part of our wider strategy to demonstrate improvements in the lives of at-risk young people through our interventions. This strategy is strongly supported in the 2011 report by the Advisory Group on Conduct Problems³. The majority of programmes we deliver are specifically identified in the report as being on the 'blueprint' for prevention,

treatment and management of conduct problems in 8-12 year olds.

The use of evidence-based programmes allows us to deliver services throughout New Zealand with the confidence that we will achieve consistent and positive outcomes in the lives of at-risk young people – within a measurable cost. Achieving replicable outcomes is a critical part of ensuring we are delivering a cost efficient service for our funders.

"There is light at the end of the tunnel. I'm very grateful for all your help. It's been a battle but Jess [MST Therapist] has hung in there and given really good advice. Having her come to me at work during lunch was great and meant I've been able to talk with my colleagues about what's been happening which was great."

Mother receiving our MST service

Evidence-based models:

- ▼ Multisystemic Therapy (MST)
- ▼ Functional Family Therapy (FFT)
- ▼ Incredible Years, Triple P, Cognitive Behavioural Therapy (CBT) as used in our FirstCare programme
- ▼ Teaching Family Model (TFM)
- ▼ Treatment Foster Care Oregon (TFCO – formally MTFC)
- ▼ Fostering Changes

3. Blisset, W., Church, J., Fergusson, D., Lambie, J., Langley, J., Liberty, K. et al. (2011). Conduct Problems: Effective Services for 8-12 Year Olds. Report of the Advisory Group on Conduct Problems. Wellington, NZ: Ministry of Social Development.

OUR EVIDENCE-INFORMED PROGRAMMES

Our journey in researching, identifying and implementing evidence-based programmes in New Zealand has significantly changed the way we think and operate as an organisation. It influences the way we deliver services that fall outside of our evidence-based interventions which include our Work and Income Youth Service contracts, Transition from Care to Independence (TCI) service, BreakThru contract and our boys' Lighthouse and girls' Lighthouse in Auckland.

We refer to our methodologies for these services as 'evidence-informed'. We take the best available

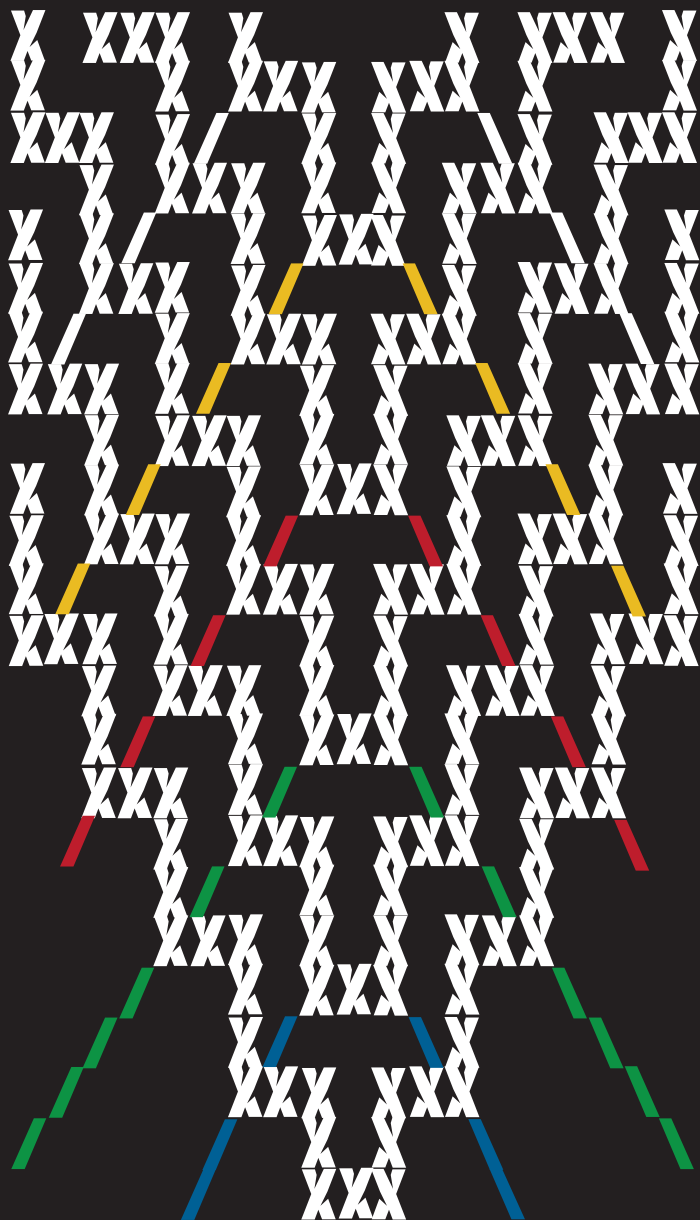
information and evidence on what works along with our clinical expertise and our outcome data to develop and monitor specific models of practice.

Examples of this can be seen in how we incorporate behavioural management tools such as the 'points and levels' systems in our Lighthouses. This is also seen in the innovative learning workshops our Youth Service West teams (Youth Service, TCI and BreakThru contracts) have developed to improve the financial literacy and parenting skills of young people.

"Evidence-based models give our teams both a proven operational framework and an effective structure to measure, compare and see the outcomes they are achieving. I've been able to see the Teaching Family Model in practice in Canada and it was impressive. We're on our journey towards this and that's exciting."

Adele Saunders, Psychologist, Youth Horizons





WAIRUATANGA

Wairuatanga describes spirituality being actively practiced in our everyday lives. All things living and since departed have an essence of life or purpose. Wairuatanga is the embodiment of this principle and therefore allows us to bring this essence to life into the present.

THE OUTCOMES WE'VE ACHIEVED FOR MĀORI

Across our in-home treatment, treatment foster care, teaching family model group home, mentoring and transitions services, young people who identify as Māori make up **45%** of total clients⁴.

Ensuring equitable outcomes for Māori is a key focus in the health, education, justice and social services sectors. Our results for this year show that we continue to **achieve equitable outcomes for Māori**, as

compared to non-Māori, across our four key outcome areas – treatment completion, placement at discharge, educational engagement and overall progress. This is a huge achievement for which we are very proud.

“I believe our services give whānau back their mana — the evidence-based programmes we use safeguard and build their mana and the mahi of our staff is strongly focused on this. Rather than being stripped of control over their lives, whānau regain it. Young people and parents learn new skills, they use these taonga to help them overcome challenges and bring more harmony into their lives. By growing their mana, we are helping them to be uplifted and their whole wellbeing benefits. The power of mana could well be the reason for some of our great results.”

Pita Te Ngaru, Kaumātua, Youth Horizons

⁴ Ethnicity data is not collected in our Youth Service support programme or emergency and short stay homes.





OUR RESEARCH FUNCTIONAL FAMILY THERAPY (FFT) PILOT STUDY

We commenced a pilot study in 2011 in consultation with Professor David Fergusson of the Christchurch Health and Development Study (commissioned by Christchurch School of Medicine). The project researched our FFT programme in New Zealand to ascertain what we were achieving and if we were achieving the same results as the model claims internationally.

Participant snapshot

- ▼ 59 Families
- ▼ 45% identified as Māori
- ▼ 13 years and 7 months – average age of young people at entry
- ▼ 50% sole parent families
- ▼ 60% families on a benefit
- ▼ 34% primary caregivers had experienced depression within the last two months
- ▼ 40% of families identified at least one other family member who had experienced an issue with police, drugs, depression, anxiety or suicide attempt within the past month.

The study was conducted over the period of January 2011 – November 2013, with the final report released in late 2014. The study focused on the results achieved by our FFT team based in Auckland – our first FFT team that was set up in 2009.

Study design


Participants were interviewed, observed and assessed during the intervention and then a follow up assessment was completed six months following discharge.

Findings

1. Clear evidence that FFT effectively reduces conduct problems and these benefits were largely maintained at six-month follow up.
2. Treatment effectiveness was largely the same for Māori as for non-Māori.
3. Very few young people transitioned to more secure settings such as group homes or CYF secure residences – livings situations generally remained stable.
4. Our team achieved similar results to other FFT teams internationally.

“We have made the positive decisions and progress towards a better future since having you [FFT therapist] in our lives for only 3 months – the changes and move forward have been totally rewarding.”

Mother of family receiving our FFT service



“We were particularly pleased to see the findings around placement stability, with very few young people being moved to more secure placements. This comes in contrast to the profile of young people at treatment referral — all were all at serious risk of a placement breakdown, a very poor outcome for the young person, their community and government agencies.”

Marion Heeney, Chief Executive, Youth Horizons

IN-HOME TREATMENT SERVICES

Our evidence-based interventions for in-home services include Functional Family Therapy (FFT), Multisystemic Therapy (MST) and our FirstCare service (Cognitive Behavioural Therapy, Triple P and Incredible Years). We have a long history delivering evidence-based interventions in New Zealand with our first MST team starting in 2004, FFT in 2009 and FirstCare in 2012.

In early 2015 we began a new way of contracting FFT and our FirstCare programmes in the Midlands region of the North Island. The trial Specialist Behaviour Support Service contract has a focus on the delivery of agreed outcomes for young people and their families and is a new approach for the Ministry of Social Development. The trial also enables us to deliver earlier interventions by allowing client referral pathways to come directly from CYF social workers, where they have identified children and young people who are at risk of coming into care. This innovative method of contracting brings a welcome focus on client outcomes and we are privileged to be a lead provider in trialling this new form of contracting.

Our FFT teams have grown significantly with over 300 young people supported during the year – up from 212 the previous year. With four teams operating throughout the North Island and one team in the Lower South Island, we are particularly proud to see equitable outcomes and completion rates across Māori and non-Māori clients.

Our MST service based in Auckland continues to build on previous success with high model fidelity scores.

The service leads comparative outcome data for clients in Australasia. The severity of conduct problems in referred clients continues to be high and the behaviours very challenging. The commitment of our therapists is frequently demonstrated and the team motto of 'whatever it takes' is fitting.

We have FirstCare therapists now covering 11 District Health Board regions. The service expanded during the year to include the Lakes, Taranaki and Waikato DHB regions as part of the Midlands Specialist Behaviour Support Service contract. FirstCare is our preventative service. The teams work with families and whānau that have infants or young children in their care – many of whom are at the early stages of developing significant emotional and behavioural difficulties. The parenting interventions we provide equip the parents with skills to prevent or reduce the emergence of conduct problems and other risks to a child's wellbeing. Our FirstCare services provided over 280 interventions of which nearly 60% were Māori whānau.

"As an FFT Therapist from the US, coming to New Zealand last year and working in this team was a powerful reminder of how the model can be so effective for families as it adapts to different cultures. The results we see here are very good, particularly for Māori families, which is something we are very proud of."

Erin Wertheimer, FFT Practice Leader, Youth Horizons

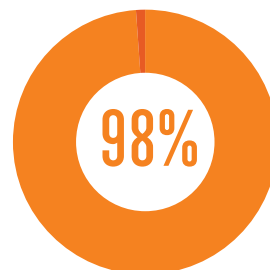
OUTCOMES SNAPSHOT

During the year (July 14 – June 15) we worked with 643 young people and their families and whānau. Our outcomes are based on completed cases – we saw an average of 73% treatment completion across our in-home treatment services.

PLACEMENT AT DISCHARGE

At referral all clients are at risk of placement breakdown from family/whānau or caregiver.

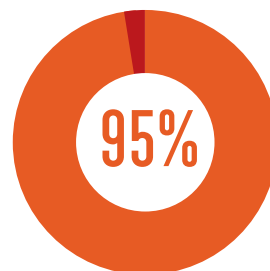
98% of clients maintained or moved to less restrictive placement at discharge.



EMPLOYMENT OR EDUCATIONAL ENGAGEMENT

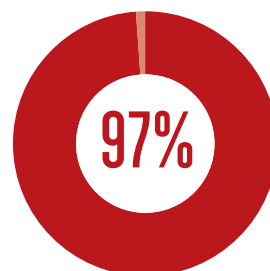
At referral all clients are either disengaged or at significant risk of educational failure through truancy, disengagement or exclusion from school. 95% of clients were in education, training or employment at discharge.

45 clients were disengaged at entry – 31 of these clients were re-engaged into education at discharge.



PROGRESS ACHIEVED

97% of clients made positive progress through treatment as rated by the therapist at discharge.



TREATMENT FOSTER CARE

Treatment foster care programmes for young people with conduct problems continue to be a key focus for our organisation. We provide care for young people, as an alternative to more restrictive residential care, where out-of-home placement has become necessary. Our interventions have a treatment focus to support young people back to family or a less restrictive setting. Our evidence-based models of practice include the Teaching Family Model (TFM), Treatment Foster Care Oregon (TFCO, formally MTFC) and Fostering Changes.

During the year we commenced a new treatment foster care service with five 1:1 placements in the Hawkes Bay. This service operates under the TFM and comes as part of our recent growth into the region. A key objective of this service is to provide a local foster care treatment programme that can retain and support young people who would otherwise be placed outside of the region.

The international certification of our Auckland-based nine bed TFCO service was again achieved during the year, which is a significant accomplishment. This milestone affirms the good work of the team and their model adherence since being established in 2009.

Building on the success of this team, we were invited to establish a new five placement TFCO service based in Hamilton, which began operating in late 2014. This new team will apply for accreditation in two years' time.

We have two treatment foster care contracts in the Waikato (DHB and CYF funded) which use the Fostering Changes model.

This takes our total number of treatment foster care teams to eight operating across the mid to upper North Island, supported by over 80 full-time and respite foster carers.

"It's good working with people who see how hard it can be and who understand.
I never felt judged."

Exert from letter sent to our Triple P therapist by a young mother

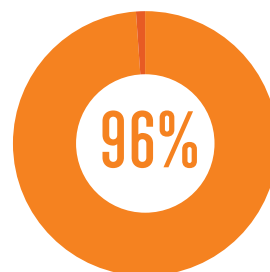
OUTCOMES SNAPSHOT

During the year (July 14 – June 15) we supported 50 young people through our treatment foster care teams. Young people referred have multiple and complex needs that cannot be met within the normal foster care system. Our programmes provide intensive input to assist young people in moving to a lower level of care. 51% of young people referred to our services completed treatment. The outcome figures are based on young people who successfully completed treatment.

PLACEMENT AT DISCHARGE

The intervention is focused on helping all clients with multiple complex needs move to a lower level of care.

96% of clients moved to a less restrictive placement at discharge.

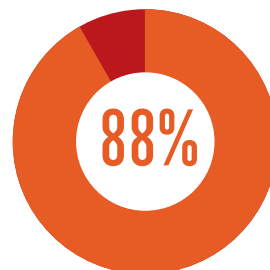


EMPLOYMENT OR EDUCATIONAL ENGAGEMENT

All clients referred are either disengaged or at significant risk of educational failure through truancy, disengagement or exclusion from school.

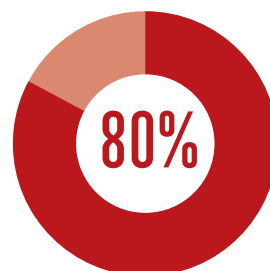
88% of clients were in education, training or employment at discharge.

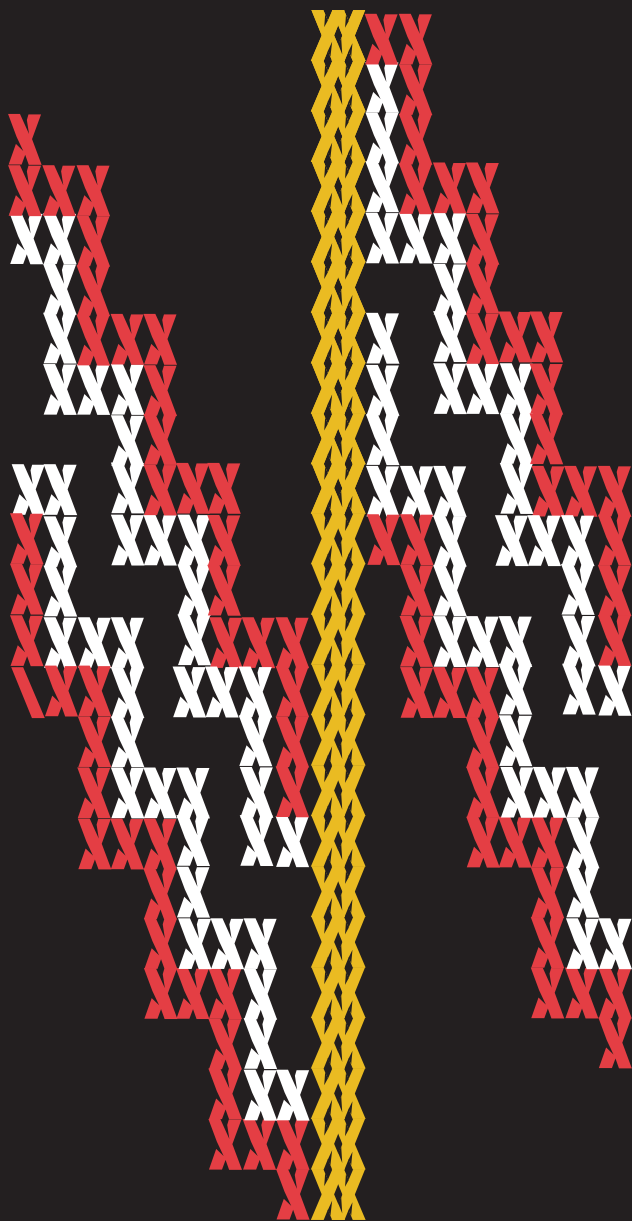
Of 11 clients who were disengaged at entry – 9 clients were reengaged with education by discharge.



PROGRESS ACHIEVED

80% of clients made positive progress through treatment as rated by the therapist at discharge.





WHANAUNGATANGA

Whanaungatanga is about making connections between people.

As a process it includes telling who you are and where you are from in order to establish links and make connections between places, faces, actions, events, treasures, myths and legends – both structurally and historically. These things are all considered components of what makes a whole person.

EMERGENCY & SHORT STAY RESIDENTIAL HOMES

“Knowing that you’ve been able to provide support to a young person who is in a desperate place is hugely satisfying. Sometimes the tragic stories of the young people we provide care for are heart breaking — however, providing some light in that dark place is what motivates our team to do what we do.”

Sam Tava, Lighthouse Practice Leader, Youth Horizons

Youth Horizons has two Lighthouse youth homes in Auckland, one for young men and one for young women. These five-bed homes provide crucial support to Child Youth and Family and Police when emergency placements are needed. The service is designed to provide temporary unplanned or crisis care for 1-5 days. Young people referred to the Lighthouse range in age from 11 to 17 years. They have been either in an unsafe environment, have committed offences or are exhibiting significant behavioural problems resulting in sudden placement breakdown.

The girls’ Lighthouse team took part in a quality improvement project during the year which resulted in process changes and the creation of a points and levels incentive programme. The new approach to engaging young people brought about a number of benefits including improved interactions and more consistent responses to both their positive and challenging behaviours. The changes were also welcomed by young people involved in the service and the learnings extended to the boys Lighthouse.

During the year we closed Te Pai Taiohi, our short-term emergency placement option for young males with often complex behaviours and offending histories. The service had been running since 2011 providing critical support to hundreds of young males. In late 2014 we reviewed our operations and the feasibility of delivering this level of support under the house parent model implemented in our other non-crisis residences. The outcome of the review showed that a fully-staffed model was needed to provide the more intensive level of support required for clients. This change necessitated an increase in the level of funding, which was not able to be supported, resulting in the closure of Te Pai Taiohi in April 2015.

OUTCOMES SNAPSHOT

During the year (July 14 – June 15) we supported 521 young people with emergency and short stay accommodation. A key outcome of this service is providing safe care for young people, avoiding the need to spend the night in police cells or other restrictive settings.

Safe emergency placement admissions

Boys’ Lighthouse	166
Girls’ Lighthouse	272
Te Pai Taiohi	83

TEACHING FAMILY MODEL GROUP HOMES

Setting up and implementing new Teaching Family Model group homes this year has been a major focus for our organisation. We opened a total of three new homes across Tauranga, Whangarei and Napier. To assist these new services we, also set up regional offices in both Whangarei and Napier to provide increased support for staff and clients and to enhance relationships and communication with local CYF sites.

The growth in our group homes has increased our ability to support at-risk young people and we now have up to 30 placements for boys, girls and young mothers in 5 cities covering Whangarei, Auckland, Hamilton, Tauranga and Napier.

Our journey toward becoming accredited in TFM continues with the formal year-long process beginning in late 2015. We are particularly focused on ensuring this evidence-based model is a sound fit for New Zealand and for Māori rangatahi. As part of our development and

preparation for accreditation, we have been supported by a dedicated development manager from the United States who is experienced in the model, along with a Pou Whakataki to ensure cultural appropriateness and support. We have presented at national conferences, regional events and to key stakeholders throughout New Zealand as we work to shift prevalent thinking from institutional care to family style living and therapy in a home-like residential setting. This concept is a key pillar of the TFM philosophy.

“Both of us have worked in care and coaching roles for many years but what attracted us to this new adventure with Youth Horizons was the focus on an evidence-based model and a full support system that was just so different from what we’d seen elsewhere. The difference this makes is huge. The model we use is proven to work and because we also get involved with the families of the young people, we see the results first-hand.”

Sandy and Mac Mcphee, Teaching Parents at Te Kainga, Youth Horizons

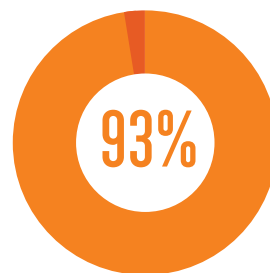
OUTCOMES SNAPSHOT

During the year (July 14 – June 15) we worked with 35 young people in our group homes. Young people referred to these services are among the most challenging, and sometimes cannot be retained in a non-secure setting due to absconding or serious offending. We continue to work closely with CYF to maintain engagement and complete treatment with young people who have very complex needs. During the year, 50% of young people successfully completed the treatment programme. The outcome figures are based on young people who successfully completed treatment.

PLACEMENT AT DISCHARGE

The intervention focuses on helping all clients develop skills that will assist them to move to a lower level of care.

93% of clients moved to a less restrictive placement at discharge.



EMPLOYMENT OR EDUCATIONAL ENGAGEMENT

All clients referred are either disengaged or at significant risk of educational failure through truancy, disengagement or exclusion from school.

100% of clients were in education, training or employment at discharge.

Of 9 clients who were disengaged at entry, all re-engaged with education by discharge.



PROGRESS ACHIEVED

100% of clients made positive progress through treatment as rated by the therapist at discharge.



YOUTH SERVICE SUPPORT

Throughout the year our two Youth Service contracts have developed significantly to grow the number of young people worked with and to develop new initiatives to support client success.

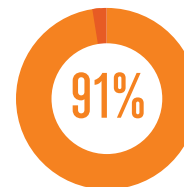
Our Not in Employment or Education (NEET) team has worked with over 1000 rangatahi from West Auckland during the year. We have supported these young people to access courses, prepare for work, gain employment, and achieve milestones in school (for example NCEA levels). The team has also worked hard to build relationships with key providers, iwi groups and organisations in the local community which has been a critical part of ensuring our young people are connected into the most suitable pathways.

We have also been successful in reducing the numbers of young people on Work and Income benefits through our Young Person and Young Parent Payment team. New initiatives have included developing in house trained facilitators in budgeting skills, the Toolbox Parenting Course and a Youth Employment Service. These initiatives have enabled our team to deliver customised support and training to nearly 500 young people who are receiving benefit payments and help pathway them to training, tertiary education, employment, or financial independence.

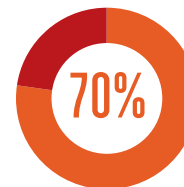
OUTCOMES SNAPSHOT

During the year (July 14 – June 15) our Youth Service teams worked with 1521 young people.

CLIENTS ACTIVELY
PARTICIPATING



EDUCATIONAL
ENGAGEMENT



ACHIEVEMENT SUCCESS

*Young people achieving NCEA
or moving off a benefit.*

326

"I used to wag school a lot, I didn't really care about my future. I didn't get much support from my family and I spent a lot of time drinking. Through working with Sandra [Personal Advisor] and the team, I started to make changes in my life and get the support I really needed. Now I have goals and hope for my future, something I never had before. After I complete my NCEA, I want to go to uni next year and study sport and recreation. Ultimately I want to teach."

19-year-old Yasmine, mother of 17-month-old Melody

TE PAE ARONGA TAITAMARIKI

The joint venture partnership Te Pae Aronga Taitamariki brings together Youth Horizons, Otangarei Trust and Ngāpuhi Iwi Social Services. The partnership has been central to our growth and development in Te Tai Tokerau supporting young people and their families and whānau. Over the past year the partnerships focus has been on ensuring the successful implementation of the Kaikohe Social Sector Trial and associated Action Plan.

Early in 2015 we welcomed a new project manager into the Kaikohe Social Sector Trial. Rosie Nathan joined us on secondment from the Ministry of Social Development and has extensive experience in the social sector. Rosie is also of Ngāpuhi descent and has helped develop important links with the local community. A significant achievement for the team has been the additional one-year extension of our contract beyond the original, ensuring we can continue the significant transformation underway in Kaikohe.



TE PAE ARONGA
taitamariki



“Through the past year we’ve really progressed into a new phase with the Kaikohe Social Sector Trial. A number of key projects have taken off and it’s clear that the community is responding. Collaboration has been a big part of our mahi and I’ve seen this flourish even further as the positive community outcomes continue to develop.”

Eru Lyndon, Regional Commissioner for Social Development, Northland/Te Tai Tokerau and Advisory Group Chair

MENTORING AND TRANSITIONS

Based in our Youth Service West office, our Ka Awatea and Breakthru teams deliver focused mentoring and transition support to young people.

During the year Ka Awatea celebrated ten years in operation. The programme is focused on supporting young people who are transitioning from Child Youth and Family care to independence (TCI). It provides a critical step in ensuring at-risk young people are supported to achieve positive outcomes as they transition out of state care into young adulthood and independent living. The team works with up to 90 young people at any one time who are aged between 15 to 19 years old. The programme can support young people over several years and our personal advisors deliver coaching, model pro social behaviours and empower participants to make informed decisions around employment, accommodation and prosocial living. The team is part of the wider TCI programme, run in conjunction with Dingwall Trust in

Auckland and is one of only two in New Zealand. The Ka Awatea team has also had the privilege of presenting our programme and model of practice at two national conferences around the country.

BreakThru is a programme that provides case coordination and support to young people involved in or at risk of involvement in youth gangs, in a holistic whanau setting. We are one of seven organisations who deliver BreakThru in Auckland, and operate specifically in the Avondale, New Lynn and Kelston areas. In recent reviews by the Ministry of Social Development, our team has been identified as a 'model service' in terms of reporting and evidencing efficacy of programme – a welcome acknowledgement of the team's focus and energy.

"I'd be confident to say I wouldn't be where I am today if it wasn't for Joe [Personal Advisor]. He's been part of my journey for a long time and has seen me through quite a few tough bits. I've now got a job and my own place which is pretty awesome."

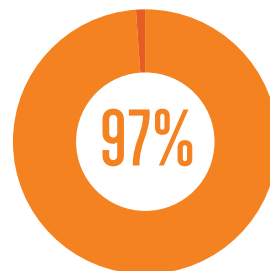
Client graduating from our Transition from Care to Independence programme

OUTCOMES SNAPSHOT

During the year (July 14 – June 15) we discharged 58 young people from our mentoring and transitions services. 53% of these young people successfully completed treatment. The outcome figures are based on young people who successfully completed treatment.

PLACEMENT AT DISCHARGE

97% of clients maintained or moved to less restrictive placement at discharge.

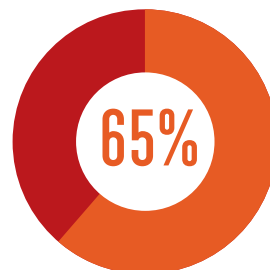


EMPLOYMENT OR EDUCATIONAL ENGAGEMENT

All clients referred are either disengaged or at significant risk of educational failure through truancy or exclusion from school.

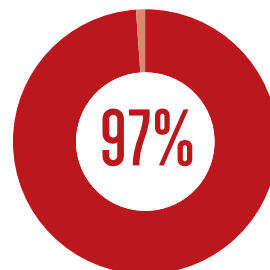
65% of clients were in education, training or employment at discharge.

Of 7 clients who were disengaged at entry, 3 clients were re-engaged with education by discharge.



PROGRESS ACHIEVED

97% of clients made positive progress through treatment as rated by the therapist at discharge.



FINANCIAL RESULTS

During the year we significantly increased our capacity to work with young people and their families and whānau in need. We also undertook an organisational change programme to better align our operating structure to our regional service provision ensuring we were appropriately supporting our new services.

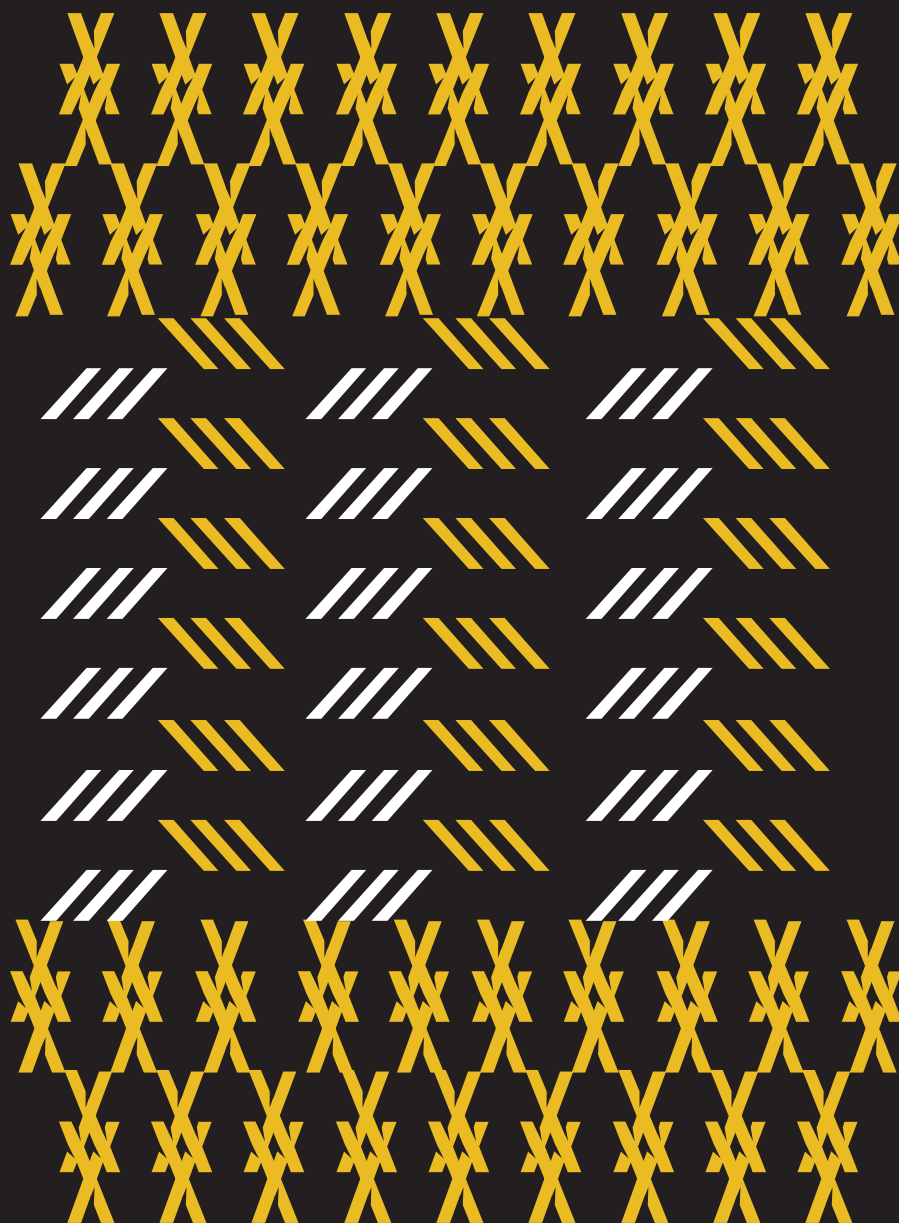
The sector we work in is undergoing a great deal of change. Our contracts are evolving and the focus on 'investment in outcomes' is now being seen in the way our agreements with funders are being designed. We welcome this innovation and, while the year has been a challenging one, we are well positioned for the future.

STATEMENT OF FINANCIAL PERFORMANCE 1 July 2014 – 30 June 2015

	2015 (nz\$000)	2014 (nz\$000)
Contracted Revenue	17,695	15,151
Other Income	251	239
Total Income	17,946	15,390
Less Expenses	17,619	15,046
Net Surplus	327	344

STATEMENT OF MOVEMENTS IN EQUITY

	2015 (nz\$000)	2014 (nz\$000)
Equity at Start of Year	4,397	4,053
Net Surplus for the Year	327	344
Equity at End of Year	4,724	4,397



AROHA

Aroha can be described as 'good intention' or 'good intent'. It encompasses the energy of goodwill, compassion, caring, humanitarianism and emotional closeness that exists in the space between people, within people and around people. Aroha is about having a oneness of energy with another. Aroha also encompasses sympathising with another person, being or concept.

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