Enliven Pilot Project Evaluation: Final Report

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Enliven Pilot Project Evaluation.

Executive Summary

Background

Many National Disability Insurance Scheme (NDIS) participants have limited control over where they live, who they live with, who provides their support and how services are delivered. In addition, housing and support models have seen little innovation in recent years. In response, Enliven Housing developed Enliven Community, a shared support facilitation model that operates alongside Enliven Housing. The model includes facilitators who help residents coordinate their support and communicate with providers. Enliven Community piloted this model in four Enliven Housing sites and four shared supported living sites across Australia. The pilot involved nine meetings designed to build residents' capacity as consumers with choice and control over their housing and support. This independent evaluation explored residents' experiences with the Pilot Project and assessed its effectiveness in achieving positive outcomes.

Aim of the final report

The purpose of this final report is to present the participation outcomes, successes, and key areas for improvement in the Pilot Project. The report aims to provide a comprehensive understanding of residents' experiences and how these evolve over time. Specifically, it will identify:

- What worked well and what didn't
- Participants' recommendations for improving the model

The report summarises the findings of the evaluation and compares quantitative and qualitative data collected at four time points.

Evaluation method

A mixed method research design employing qualitative and quantitative methods was used to characterise the interim and final outcomes for the Pilot Project from the perspectives of residents, facilitators and co-facilitators. Residents were interviewed. Facilitators were surveyed, interviewed, and completed customised rating scales at four time points throughout the project. Co-facilitators were interviewed one month after the Pilot Project was completed. The evaluation involved a total of 28 residents, two facilitators and three co-facilitators.

Results

Mann-Whitney U statistical tests showed that residents' satisfaction with the Pilot Project increased significantly from time point two (TP2) to time point three (TP3) ($U = 12.5$, $p = .002$) and was maintained from TP3 to time point four (TP4) (TP 2-4: $U = 9$, $p = .005$, TP 3-4: $U = 21.5$, $p = .742$). While there were slight upward trends in mean scores for influence over housing and support, satisfaction with housing and support, consumer identity, and community connection, these changes were not statistically significant. Facilitators reported

a slight increase in confidence in residents' understanding of project expectation at TP3 (mean = 2.75), compared to time point one (TP1) (mean = 2.7) and TP2 (mean = 2.38). Both facilitators and co-facilitators expressed satisfaction with the usefulness of the Pilot Project in follow-up interviews. Additionally, 75% of residents wanted the Pilot Project to continue at TP3, and 83% wanted the Pilot Project to continue at TP4.

Qualitative analysis of interviews and surveys across four time points revealed five domains capturing the residents' experience of the Pilot Project:

- feeling listened to: at the start of the project, residents felt heard and understood but wanted clarity about the project goals.
- anticipating change: after the first few meetings, residents expected change from the Pilot Project, with some optimistic, others sceptical, with many seeing it as a chance to build community connections.
- growing and learning: as the project progressed, residents gained insights into their rights, and began identifying shared issues, which helped the groups set goals.
- emerging community: residents experienced both challenges and benefits of collaboration, fostering a sense of community that supported small, gradual housing and support improvements.
- a work in progress: at the project's conclusion, the Pilot showed progress with positive changes and some resident-led initiatives, but challenges in group dynamics and housing support persisted.

Overall, the Pilot Project fostered valuable learning and community-building, but residents viewed shared support facilitation as an ongoing effort requiring further development.

Key learnings

Key learnings from the Pilot Project highlight the importance of effective facilitation, aligned expectations, a comfortable space, and maintaining personal relevance.

- Facilitating effectively: Skilled, independent facilitators are essential for managing group dynamics, ensuring balanced participation, and keeping discussions focused.
- Aligning expectations: Clear communication of project goals, expectations, and decision-making processes fosters understanding, trust, and engagement.
- Fostering a comfortable space: An inclusive environment encourages participation, with accessible meetings, strong group rapport, and attention to logistical factors supporting continued engagement.
- Maintaining personal relevance: A flexible approach that adapts meeting content to residents' needs, knowledge levels, and lived experiences enhances engagement.

Conclusion

Qualitative and quantitative findings highlight increased satisfaction and a stronger experience of community in the mid-to-late stages of the project. While these findings are limited to residents who participated in the evaluation, they indicate the potential of ongoing facilitated group meetings to enable change and build connections among residents.

Background

Many individuals receiving NDIS housing and living support experience little or no control over where they live, who they live with, who supports them and how their support is delivered. There has been limited innovation in housing and support models, and NDIS participants are not sufficiently supported to explore the options that are available.

Responding to these issues, Enliven Housing, a for-profit Specialist Disability Accommodation (SDA) provider, developed Enliven Community, a shared support facilitation model, to operate alongside the apartments they build and lease. People who opt to lease an Enliven Housing apartment are required to join the Enliven Community and share a portion of their support with co-located tenants.

Key to the Enliven Community model is a facilitator who coordinates and communicates residents' directions to the housing and support providers they have engaged. Previously, Enliven Housing staff acted as the facilitator. Enliven Community was born out of Enliven Housing to create a support offering where facilitators are independent of both the housing and support providers. This approach is designed to uphold the integrity of the shared support facilitation model and avoid conflict of interest.

Enliven Community trialled the use of facilitators to coordinate group meetings in four Enliven Housing sites and four shared supported living sites run by other housing providers across Australia. The trial was called the Pilot Project. The Pilot Project involved nine meetings with the facilitator and a co-facilitator, three of which were one-to-one meetings with the facilitator and the other six were group meetings. Alongside supporting the residents to build community, the meetings involved capacity building activities aimed to improve the residents' understanding of themselves as consumers who have choice and control over their housing and supports.

This independent evaluation aimed to explore the experience of participating in the Pilot Project and the effectiveness of the project in achieving good outcomes for residents across eight sites in Australia. The evaluation provides insights into the experience of residents throughout the Pilot Project, and insights from residents and facilitators which can be utilised to improve the initiative in line with people's needs and preferences.

Project Evaluation

Aim of the Final Report

The purpose of this report is to present the participation outcomes, successes, and key areas for improvement in the Enliven Pilot Project. The report aims to provide a comprehensive understanding of residents' experiences and how these evolve over time. Specifically, it identifies:

- What worked well and what didn't
- Participants' recommendations for improving the model

The report summarises the findings of the evaluation and compares quantitative and qualitative data collected at four time points.

Method

Design

This project utilised a mixed method research design[1][2] incorporating qualitative and quantitative methods to obtain the perspectives of residents, facilitators and co-facilitators. Figure 1 provides an overview of the mixed-methods evaluation design. Residents of the Pilot Project were interviewed at three time points: after program meeting 2, after program meeting 6, after program meeting 9, and surveyed at one-month post program. Facilitators were surveyed at the first three time points about their experience at each site and interviewed at one-month post program about their overall experience. Co-facilitators were interviewed about their experiences at one-month post program. Figure 2 provides an overview of the Pilot Project meetings and evaluation time points.

Procedure

Interviews were conducted with residents who attended the group meetings about their experience of participating in the Pilot Project. At time point one (TP1), residents were asked open-ended questions about their ongoing experience with the Pilot Project, including questions about what they have enjoyed and what they have found challenging See appendix one for resident interview guides. Residents also completed nine items rating their influence over housing and support, on a 4-point scale. See appendix two for items. At time points two (TP2) and three (TP3), residents were asked open-ended questions about their ongoing experience with the Pilot Project and were asked to complete the nine items regarding their influence over housing and support, as well as 13 customised 4-point rating scales (1 = strongly disagree, 4 = strongly agree) about their satisfaction with the Pilot Project, satisfaction with their housing and support, as well as their perceived consumer identity and community connection. See appendix three for the customised rating scales.

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[1] Tashakkori, A. (2009). Are we there yet? The state of the mixed methods community. *Journal of mixed methods research*, *3*(4), 287-291.
[2] Tashakkori, A., & Teddlie, C. (2010). Putting the human back in "human research methodology": The researcher in mixed methods research. *Journal of mixed methods research*, *4*(4), 271-277.

At time point four (TP4) surveys replaced resident interviews. See appendix four for the TP4 follow-up survey.

At TP1, TP2 and TP3, facilitators were asked to complete a survey that included six open-ended questions regarding their experiences facilitating the Pilot Project across eight sites. These questions addressed what went well, the challenges faced, surprising elements, any suggested changes, and advice for others related to each site. Following the open-ended questions, facilitators rated their confidence in the residents' understanding of expectations, their engagement, and overall satisfaction with the Pilot Project using a 4-point rating scale. See appendix five for the facilitator survey. At TP4, facilitators discussed open-ended questions addressing the same topics as those in the surveys in an interview. The facilitators were then asked to rate their overall satisfaction with the Pilot Project and assess its usefulness for residents, using a 4-point rating scale. See appendix six for the facilitator interview guide.

At TP4, co-facilitators were asked open-ended questions about what went well, the challenges faced, surprising elements, any suggested changes, and advice for others setting up a similar project. Following the open-ended questions, co-facilitators rated their overall satisfaction with the Pilot Project and how useful they considered the Pilot Project had been for residents using a 4-point rating scale. See appendix seven for the co-facilitator interview guide.
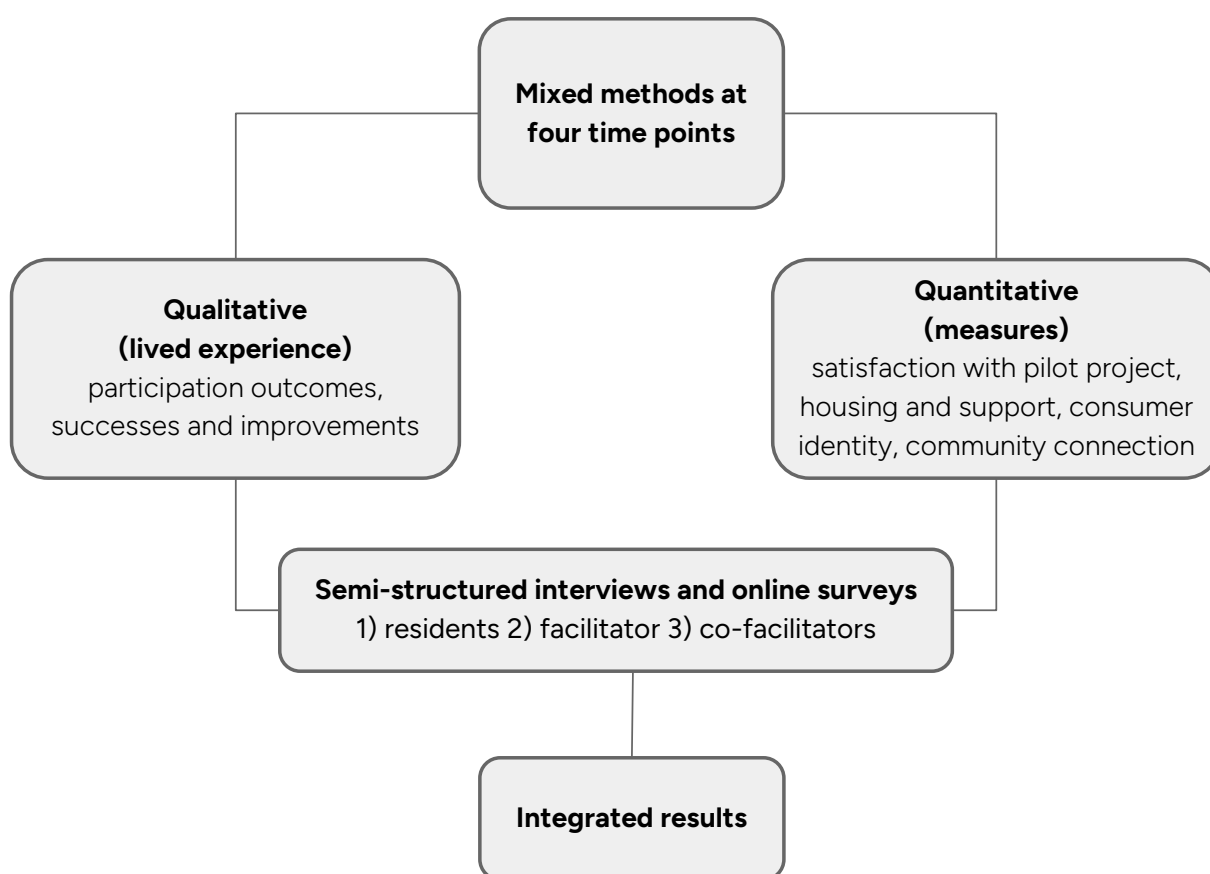
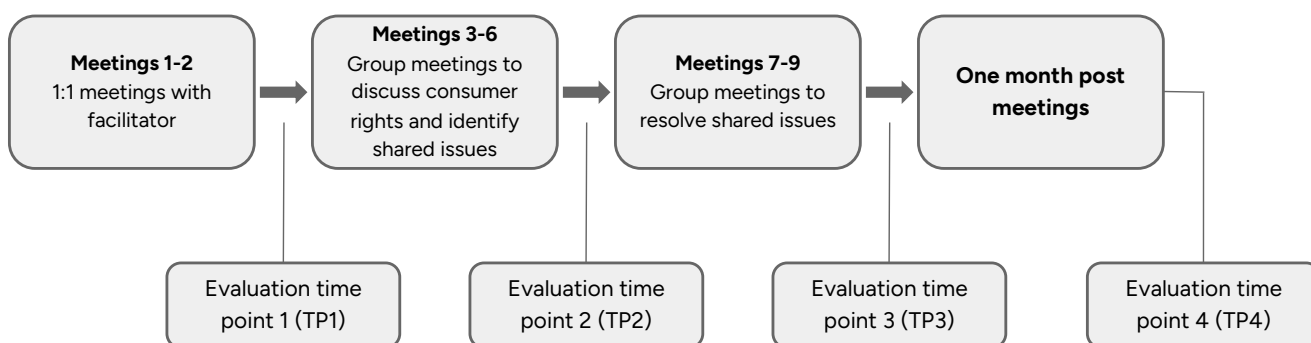Figure 1. Evaluation design using mixed methods.

Figure 2. Pilot Project meetings and evaluation time points.

Quantitative analysis

Descriptive statistics, including mean, mode, median, and standard deviation, were calculated for each scale used to evaluate residents' outcomes across multiple time points. The mean is the average score, the mode is the most common score, the median is the middle value when the scores are ordered lowest to highest, and the standard deviation shows how spread out the scores are from the mean. These descriptive statistics provide an overview of resident responses and initial insights into the distribution and central tendency of the data across the scales. Scores were calculated for each scale by summing the scores of the items within each scale, then averaging the totals across participants. Following this, normality tests were conducted for the total scores of each scale to assess whether the data met the assumptions required for parametric testing. The results indicated that the data did not meet normality assumptions, leading us to employ the non-parametric Mann-Whitney U test to examine change over time[3].

To assess change over time, comparisons were conducted between TP2 and TP3, TP2 and TP4. Comparisons were also made between TP3 and TP4 to assess whether any changes were sustained at follow-up. For the influence over housing and support scale which was collected at all time points, comparisons were also completed between TP1 and TP4.

Descriptive statistics (mean, minimum and maximum values) were calculated for the facilitators scale responses across multiple time points. Descriptive statistics (mean, minimum and maximum values) were also calculated for the co-facilitator scale responses. Due to the small facilitator and co-facilitator sample inferential analyses were not completed.

It should be noted that group home residents and the majority of those in clustered villas could not be included in the rating scale analysis due to signs of agreement bias. This bias was identified through either a lack of recognition of the group meeting content or facilitator, or a pattern of yea-saying that was inconsistent with their interview responses[4]. Therefore, the quantitative data is limited to responses primarily from residents in the

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[3] McKnight, P. E., & Najab, J. (2010). Mann-Whitney U Test. *The Corsini encyclopedia of psychology*, 1-1.

[4] Rossi, P. H., Wright, J. D., & Anderson, A. B. (Eds.). (2013). *Handbook of survey research*. Academic press.

apartment typology sites. At all time points, nearly all rating scale results reflect responses from apartment residents, with only one resident from clustered villas included in the quantitative analysis.

Qualitative analysis

Qualitative analysis followed a process of open and focused coding, identifying categories within the data, and exploring relationships between them through constant comparison to gain an in-depth understanding of the residents' experience of the Pilot Project [5]. Across the four time points, a total of 64 interview transcripts (59 resident or close other interviews, 2 facilitator interviews, and 3 co-facilitator interviews) and 29 qualitative survey responses (6 resident or close other surveys; 23 facilitator surveys) were analysed. Verbatim transcripts and survey responses were reviewed, with relevant excerpts coded. Each successive interview and survey were compared in an iterative process until distinct domains and categories were identified. These domains and categories were then cross-checked against the original transcripts and survey responses, as well as the interim analysis to ensure they reflected participants' voices and experiences. Since the aim of this evaluation was to explore the residents' experience, their responses guided the initial framework, which was subsequently triangulated with the facilitator and co-facilitator insights. To protect participants identity, participant names are replaced with pseudonyms with the time point code (e.g., time point one = TP1).

Participants

The evaluation involved a total of 28 residents, two facilitators and three co-facilitators. Table 1 provides an overview of the demographics of residents who participated in the evaluation at each of the time points.

Residents

The 28 residents were made up of 15 males, seven females and two non-binary individuals, who were aged between 20 and 77. Disability types included intellectual disability, cerebral palsy, multiple sclerosis, psychosocial disability, Friedreich's Ataxia, spinal cord injury, acquired brain injury and others. The residents were living in apartments, clustered villas, or group homes. Full demographics are provided in Table 1.

Facilitators

The two facilitators who participated in the evaluation were female, aged between 25 and 34 years, and had obtained post-secondary education. Both facilitators had extensive experience (9 - 16 years) in the disability sector in support roles working directly with people with disability, as well as management roles.

Co-facilitators

The three co-facilitators interviewed were living with a disability, including physical disability, spinal cord injury, and traumatic brain injury. Two were female and one was male. Two co-facilitators were aged between 55 and 64, and one was aged between 25 and 34. In terms of

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[5] Charmaz, K. (2017). Constructivist grounded theory. *The journal of positive psychology*, *12*(3), 299-300.

education, two had post-secondary or tertiary qualifications, and one had completed high school.

Table 1. Demographics of residents who participated in the evaluation at each time point.

Time point	TP1 (n = 24)	TP2 (n = 22)	TP3 (n = 13)	TP4 (n = 6)
Age*	47 (20 – 77)	51 (21 – 77)	50 (21 – 77)	51 (25 – 64)
Gender	n (%)	n (%)	n (%)	n (%)
Male	15 (62.5%)	12 (54.5%)	7 (53.8%)	3 (50%)
Female	7 (29.2%)	8 (36.4%)	4 (30.8%)	1 (16.7%)
Non-binary	2 (8.3%)	2 (9.1%)	2 (15.4%)	2 (33.3%)
Housing type				
Apartments	17 (70.8%)	14 (63.6%)	8 (61.5%)	6 (100%)
Clustered villas	4 (16.7%)	3 (13.6%)	2 (15.4%)	0 (0%)
Group Homes	3 (12.5%)	5 (27.7%)	3 (23.1%)	0 (0%)
Disability Type				
Acquired Brain Injury	1 (4.2%)	1 (4.5%)	1 (7.7%)	0 (0%)
Autism	1 (4.2%)	0 (0%)	0 (0%)	0 (0%)
Cerebral Palsy	3 (12.5%)	2 (9.1%)	1 (7.7%)	0 (0%)
Friedreich's Ataxia	2 (8.3%)	1 (4.5%)	1 (7.7%)	1 (16.7%)
Intellectual Disability	4 (16.7%)	4 (18.2%)	4 (30.8%)	1 (16.7%)
Multiple Sclerosis	3 (12.5%)	3 (13.6%)	3 (23.1%)	2 (33.3%)
Psychosocial Disability	3 (12.5%)	4 (18.2%)	0 (0%)	0 (0%)
Spinal Cord Injury	2 (8.3%)	2 (9.1%)	1 (7.7%)	1 (16.7%)
Stroke	2 (8.3%)	1 (4.5%)	0 (0%)	0 (0%)
Other	2 (8.3%)	2 (9.1%)	2 (15.4%)	0 (0%)
Other Physical	1 (4.2%)	2 (9.1%)	0 (0%)	0 (0%)
Unknown	0 (0%)	0 (0%)	0 (0%)	1 (16.7%)

*Age values are presented as the mean (minimum–maximum)

Quantitative Results

Residents

Descriptive statistics (mean, mode, median, standard deviation) for the rating scales across the four evaluation points are presented in Table 2. For satisfaction with the Pilot Project, mean, median, and mode scores increased at TP3 and were maintained at TP4, suggesting an overall improvement in satisfaction. Mann-Whitney U tests supported these findings, showing a significant increase in satisfaction with the Pilot Project from TP2 to both TP3 and TP4 (TP 2-4: $U = 9$, $p = .005$, TP 3-4: $U = 21.5$, $p = .742$). No significant difference was observed between TP3 and TP4, indicating that the increased satisfaction levels were maintained at follow-up. Table 3 provides the Mann-Whitney U test results across time points for each of the scales.

To gain deeper insights into residents' satisfaction with the Pilot Project, mean item ratings were examined. Figure 3 illustrates the mean item ratings. The ratings indicate that residents reported increased enjoyment of the Pilot Project at TP3, which continued at TP4. Additionally, there was a consistent upward trend in residents' ratings of the Pilot Project's usefulness across all time points. Although there was a notable increase in ratings for gaining new knowledge at TP3, this improvement does not appear to be sustained at TP4.

Mean scores for influence over housing and support, satisfaction with housing and support, consumer identity, and community connection displayed a slight upward trend over time. However, the standard deviation, median, and mode scores did not consistently align with this trend, highlighting variability in participant responses and changes in dispersion and central tendency. Indeed, Mann-Whitney U tests found no significant changes over time for these scales.

When asked if the group meetings should continue, 75% of residents (6 out of 8) reported agreement at TP3 while 83% (5 out of 6) reported agreement at TP4. Specifically, at TP3, five residents strongly agreed, one agreed, one remained neutral, and one disagreed that the group meetings should continue. At TP4, five residents strongly agreed and one disagreed that the group meetings should continue. These findings indicate a preference among residents for the continuation of the facilitated group meetings.

Facilitators

Descriptive statistics (mean, minimum and maximum values) for the rating scales across the four evaluation points are presented in Table 4. At TP1, facilitators rated their confidence in residents' understanding of expectations as moderate and indicated lower levels of confidence for shared living sites. At TP2, this confidence decreased, reflecting some uncertainty regarding residents' comprehension across all sites. However, at TP3, facilitators' confidence increased, suggesting an improvement in residents' understanding after program meeting 9. Overall, these findings show a trajectory of increasing confidence and satisfaction among facilitators, aligning with the positive trends observed in resident ratings after nine program meetings. As can be seen in Table 5, in the follow-up interviews, both facilitators and co-facilitators were satisfied with the Pilot Project and thought it was moderately useful.

Table 2. Descriptive statistics for resident rating scale responses at each evaluation time point.

Scale	TP1 (n = 15)				TP2 (n = 14)				TP3 (n = 8)				TP4 (n = 6)			
	Mean	Mode	Median	SD	Mean	Mode	Median	SD	Mean	Mode	Median	SD	Mean	Mode	Median	SD
Influence over housing and support	27.1	29	29	5.91	27.2	31	27	4.88	26.6	31	27.5	5.4	27. 6	31	28.5	4.17
Satisfaction with Pilot Project	n/a				8.7	11	10	2.98	9.9	14	14	2.18	10	15	14.5	2.5
Satisfaction with housing and support	n/a				11.5	14	12	3.34	12. 2	14	13	2.42	12.5	13	13	2.17
Consumer identity	n/a				6	6	6	1.91	6.3	5	6	1.07	6.6	6	6	0.82
Community connection	n/a				8.3	10	9	2.7	9.5	12	9.5	2.8	9.7	9	9.5	1.75

Table 3. Mann-Whitney U test results.

Scale	TP1 – 4	TP2 – 3	TP3 – 4	TP2 – 4
Influence over housing and support	U = 44, p = .937	U = 55, p = .745	U = 23.5, p = .948	U = 41.5, p = .784
Satisfaction with Pilot Project		U = 12.5, p = .002*	U = 21.5, p = .742	U = 9, p = .005*
Satisfaction with housing and support		U = 56, p = .793	U = 22.5, p = .843	U = 39, p = .637
Consumer identity		U = 57, p = .843	U = 16.5, p = .315	U = 36.5, p = .492
Community connection		U = 48.5, p = .456	U = 23, p = .896	U = 34, p = .367

Values presented are Mann-Whitney U test statistic and p-value. *Indicates significant difference (p < .05)
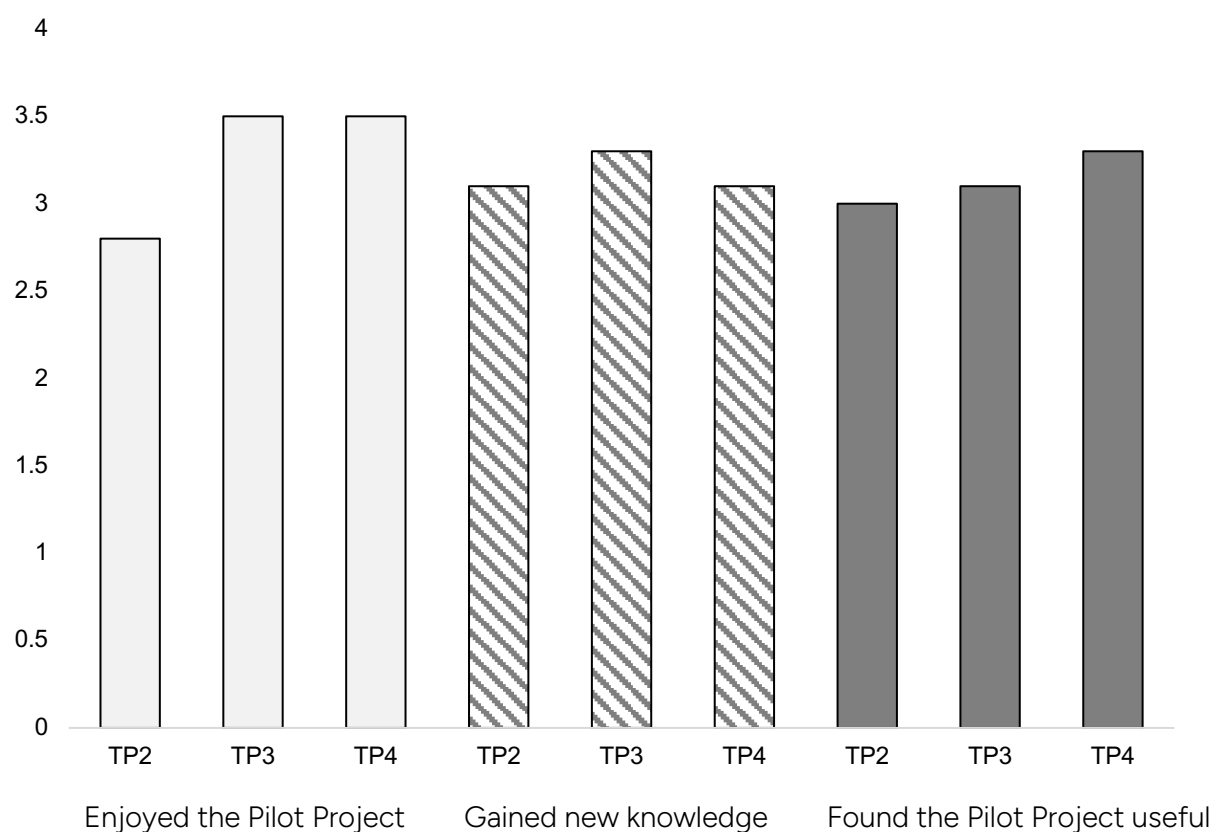
Figure 3. Mean item ratings for residents' satisfaction with the Pilot Project.

Table 4. Descriptive statistics for facilitator rating scales at each evaluation time point.

Scale	TP1 (n = 2)	TP2 (n = 2)	TP3 (n = 2)
Confidence	2.71 (2 - 4)	2.38 (1 - 4)	2.75 (2 - 4)
Apartment typology	3.25 (3 - 4)	3 (2 - 4)	3.25 (2 - 4)
Shared living	2 (all rated 2)	1.75 (1 - 2)	2.25 (2 - 3)
Satisfaction with Pilot Project	3.14 (3 - 4)	2.88 (2 - 4)	2.88 (2 - 4)
Apartment typology	3.25 (3-4)	3 (3 - 3)	3 (2 - 4)
Shared living	3 (all rated 3)	2.75 (2 - 3)	2.75 (2 - 3)

Values presented are mean (minimum – maximum).

Table 5. Time point four rating scales for facilitators and co-facilitators.

Scale	Facilitators (n = 2)	Co-facilitators (n = 3)
Satisfaction with Pilot Project	3 (all rated 3)	3.8 (3-4)
Usefulness	3 (all rated 3)	3.6 (3-4)

Values presented are mean (minimum – maximum).

Qualitative Findings

Residents experience of the Pilot Project

Thematic analysis of interviews and surveys across the four time points revealed that the residents' experience with the Pilot Project was clustered within five domains: 1) feeling listened to 2) anticipating change, 3) growing and learning and 4) emerging community and 5) a work in progress. Within each domain, categories were identified that capture specific aspects of residents' experiences, reflecting both the positive developments and ongoing challenges encountered by residents in the Pilot Project. Figure 4 provides a temporal depiction of the residents' experience of their participation in the Pilot Project as they described it during the interviews and surveys across the four time points.
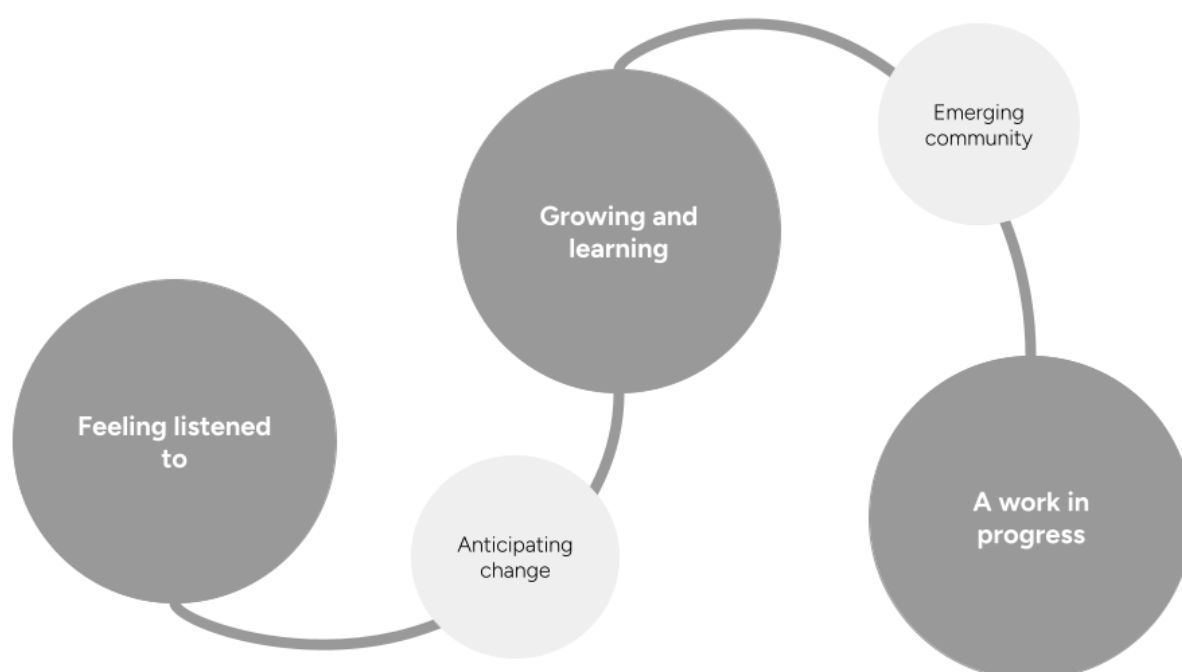
Figure 4. Temporal depiction of residents' experience in the Pilot Project.

The process began with residents *feeling listened to* by the facilitator in the first two one-to-one meetings. As part of this, residents' felt heard and understood by the facilitator but were also wanting more clarity about what to expect in the Pilot Project. Following the first two meetings, residents were *anticipating change* with some residents feeling hopeful for community connection and improvements to housing and support, whilst other residents were more sceptical about the level of impact the Pilot Project would have. The experience of the group meetings began with *growing and learning* about their rights and what's possible and identifying shared issues with the other residents. Around the middle stage of the project, residents started reporting on the *emerging community* between the residents, facilitators and the support providers in some cases. As the sense of community was building, residents were navigating working together and beginning to consider the Pilot Project an avenue for change. Following the final meetings of the Pilot Project, residents considered this facilitation model a *work in progress,* in which they saw opportunities to take

the lead themselves, whilst managing changing group dynamics and acknowledging the ongoing issues they faced with housing and support. Although this analysis reveals a temporal depiction of the residents' experience of the Pilot Project, it is important to note that individuals reached these stages at varying paces and in particular, the residents' living in shared arrangements had a slower journey to making changes and feeling the sense of community. The following sections describe the domains and categories in detail. Table 6 provides an overview of the domains, categories and illustrative quotes.

Feeling listened to

During the first two one-to-one meetings, residents reflected positively about their interactions with the facilitators reporting that they were listened to and felt heard and understood. In reference to the Pilot Project goals, some residents wanted more clarity about what to expect going forward.

Being heard and understood

Residents considered the first couple of meetings a good opportunity to share about themselves and voice their concerns around housing and support to the facilitator. Overwhelmingly, residents reported that the facilitators were friendly and approachable, and they appreciated that the facilitator listened to and understood the issues they were raising.

Wanting clarity

In the early stages of the project, residents sought clarity about the goals of the Pilot Project and what to expect in future meetings. Although some residents expressed that they had received sufficient information in the first two meetings, most felt they still lacked a clear understanding of the project goals and the structure of the upcoming meetings, particularly regarding what was expected of them

Anticipating change

After the first couple of meetings with the facilitators, residents were generally expecting change to occur as a result of the Pilot Project. Some residents were optimistic that the project would provide an avenue for support and housing improvements, whilst other residents were sceptical about the potential of the project to enable change. Most residents considered the Pilot Project as an opportunity to build community with the other residents living in their housing.

Balancing optimism and scepticism

In the early stages of the project, residents expressed mixed feelings about what they hoped the Pilot Project would achieve. Several residents were optimistic that the Pilot Project would lead to meaningful changes in their shared support or living environment. Some residents believed that collective decision making could increase their choice and control, ultimately improving their quality of life. However, there was also scepticism among residents across different living arrangements. A few residents were uncertain about whether the Pilot Project would result in tangible improvements to support, housing or social engagements. Some residents voiced concerns about the challenges of making shared

group decisions, recognising the diverse needs and preferences within the group could complicate the process.

Seeing an opportunity to build community

Most residents living in the apartment typology sites viewed the Pilot Project as an opportunity to meet fellow residents and build community connections. For many residents, building community meant forming friendships with other residents, expanding their social circles beyond their fellow residents, sharing experiences and knowledge, and engaging in social activities. The residents generally expressed a strong desire to make social connections and learn from one another, seeing the Pilot Project as a platform to initiate these relationships.

Growing and learning

In the next phase of the project, after participating in four group meetings, residents reported learning about their rights and what's possible with their funding, as well as working as a group to identify shared issues and formulate ideas for potential solutions.

Learning what's possible

Residents valued the facilitated activities designed to enhance their understanding in the group meetings. They discussed their learnings around their rights, the NDIS, funding options, consumer identity and restrictive practice. Learning about their power as a collective was also seen as a valuable outcome of the group meetings, helping residents to better grasp their influence over housing and support, and what they have a right to request.

Identifying shared issues

Residents appreciated the opportunity to engage in in-depth conversations about their housing and support, and to brainstorm ideas for changes they wanted to see. As a result, residents identified issues they shared, such as issues with support providers or individual support workers, as well as housing related challenges, such as limited parking. Identifying these issues enabled the residents to set group goals and focus on solutions, which facilitators found useful for building group investment.

Emerging community

During the middle phases of the Pilot Project, the residents began discussing the formation of an emerging community within the group, and in some sites, also with the support providers. Navigating working together brought both positive and negative experiences for residents. This growing sense of community helped create avenues for change in housing and support with residents beginning to notice small, gradual improvements.

Navigating working together

As the sense of community was growing, residents' experiences of navigating working together varied. Many appreciated the supportive environment, where they felt heard and comfortable to share their problems. However, some residents desired a stronger sense of community that extended beyond the group meetings. In the apartment typology sites, residents expressed a wish for more social interaction and organised activities. Across housing types, residents faced challenges with group dynamics and differing communication

needs. These challenges sometimes hindered collaboration, even with a skilled facilitator. A significant obstacle throughout the Pilot Project was resident engagement, with some residents not participating or contributing meaningfully, leading to unproductive meetings and difficulties in prioritising issues and making decisions.

Creating avenues for change

At this middle stage in the project, residents reported small but slow changes being implemented as a result of the Pilot Project. These changes included establishing meeting rules and decision-making systems, support providers sending clearer rosters, and preparing to vote on extending or changing the support provider's contract. For some sites, the Pilot Project established direct communication pathways with housing and support providers. These communication pathways were appreciated by residents who considered this a valuable avenue for implementing changes. However, while some residents viewed the meetings as productive and solutions focused, others expressed frustration and a loss of interest due to the slow pace of progress. Thus, avenues for change were recognised but some residents were eager for quicker results.

A work in progress

At the conclusion of the Pilot Project, it was generally viewed as a work in progress. While many positive changes had been implemented and residents reported valuable learning outcomes, there was also noticeable improvement in group collaboration and rapport across all sites. In some sites, residents were taking the lead in generating ideas to enhance their living and support. However, challenges remained at each site, including shifts in group dynamics and the persistence of housing and support issues that still needed attention.

Taking the lead

Several residents reflected that facilitators encouraged the group to identify their own solutions rather than imposing them, with one noting, "It was all still our ideas." This approach empowered residents, particularly in the apartment typology sites, to take the lead in problem-solving and providing feedback to support providers. Some residents felt more confident to navigate housing and support issues more independently due to their increased knowledge of rights and responsibilities, as well as a better understanding of acceptable, unacceptable, and discriminatory practices. Consistently, while most residents across all housing typologies expressed a desire for group meetings to continue, some apartment typology residents hoped a cohesive "everyday community" would evolve from the group meetings.

Changing group dynamics

During the final phase of the Pilot Project, residents experienced shifts in group dynamics. Some residents noted improved rapport in the later meetings, which made them feel more comfortable contributing. However, challenges persisted, particularly in the apartment typology sites, where some residents felt overpowered or dismissed by more vocal members. This imbalance led to frustration and reduced contributions from others, impacting group cohesion and decision-making. A few residents also expressed frustration with irrelevant conversations that detracted from the meeting's focus. Facilitators reflected that

some of the group dynamic changes were due to some residents moving out or new residents moving in. Some residents felt that more informal interactions outside of the structured meetings would help strengthen the community.

Ongoing issues with housing and support

Although residents in the apartment typology sites acknowledged that the Pilot Project helped address certain onsite support issues and concerns relating to building management, most residents recognised that ongoing challenges will always exist. Consistently, many residents reported unresolved issues that they hope will be resolved in future but acknowledged that some issues are beyond the scope of the group meetings to resolve. Despite this, several residents considered meeting other residents to be an achievement itself, as it reduced feelings of isolation and provided a platform to share concerns, even when immediate solutions were not feasible.

Table 6. Domains, subthemes and illustrative quotes.

Domain	Category	Quote
Feeling listened to	*Being heard and understood*	"It was just the fact of being heard really and feeling that it's being heard and it's going to be actioned." Alex (TP1), close other of apartment resident.
	Wanting clarity	"I mean… they've just in fluxed us with a lot of info and then sort of haven't broken it down as well." Jordan (TP1), apartment resident.
Anticipating change	*Balancing optimism and scepticism*	"The companies will basically do as they wish. They don't like being told what to do….and it's because they don't often hear the word no… I've never been in a program that ends up making a lot of change." Casey (TP2), clustered villa resident.
	Seeing an opportunity to build community	"I guess it's just to build the community and become closer with each other, you know – so that we don't feel so isolated in this giant apartment building… It would just be nice to also get to know people generally, who are sort of similar – have similar experiences to you, but also are very different people." Riley (TP1), apartment resident.
Growing and learning	*Learning what's possible*	"I know a lot more about what the rights and responsibilities of support workers in that sort of environment are. I know a lot more on a practical level about what I can request. What is my right to demand. And what is sort of something that you expect because it's just one of the drawbacks of that structure." Morgan (TP3), apartment resident.
	Identifying shared issues	"And I think in the first meeting what we found was a lot of the feelings we were having about the support provided here was fairly common themes, rather than us feeling a little isolated or if we were the only ones having any issues or having good experiences or not." Taylor (TP2), apartment resident.
Emerging community	*Navigating working together*	"But I'm still disappointed, because a lot of the residents don't come. There's only about 50 percent participation rate, which disappoints me, because, I mean, we're supposed to be a co-op. We're supposed to cooperate. Some people don't want to come to the meeting, and we have no feedback from them, about any good things that have happened, bad things that have happened, things that could be improved. So, it's not working as it should, I don't think." Jamie (TP3), apartment resident.
	Creating avenues for change	"She's receptive to these comments, or seems to be receptive, and is doing something about it. Very slowly because, you know, changes – in a situation like this it goes slowly, but you can see the difference." Alex (TP2), close other of apartment resident.
A work in progress	*Taking the lead*	"[The facilitator] wasn't the one who made any of those solutions, but when asked about it, she would have answers about what other groups had done and whether or not that had worked. She was facilitating and… like troubleshooting rather than taking over. It was all still our ideas." Morgan (TP3), apartment resident.
	Changing group dynamics	"There was a couple of people that have left and … for one reason or another, he's been disappointed not having them around. So he knew who they were and that they weren't around, but he just doesn't recognise them around. So he was – he felt part of the group." Alex (TP3), close other of apartment resident.
	Ongoing issues with housing and support	"There always will be [issues to solve] because the support worker content, the people, they change. They come and go. Some don't – haven't been before. They need to be acclimated and made familiar with the things that we've already improved things about, that sort of thing." Jamie (TP3), apartment resident.

Instrumental Case Studies

Two instrumental case studies were developed from the interview data to capture the insights and experiences of residents with disability across two different housing typologies: the apartment typology and clustered villas typology.

Case Study 1: Apartment Typology

Context: This Pilot Project group involved residents with a range of disabilities, including acquired brain injury, spinal cord injury, multiple sclerosis, and psychosocial disabilities. Residents lived in the 10+1 model of housing and support. This model integrates accessible apartments within larger apartment complexes, with one additional unit for 24-hour onsite shared support. Residents' levels of engagement with the Pilot Project varied, with some eager to participate in social activities while others focused primarily on housing and support concerns.

Identification of shared problem: During initial group meetings, residents voiced frustration over the lack of transparency regarding onsite support staff. They were not informed about who was rostered to provide support and had no input in selecting the staff entering their homes. This lack of control contributed to feelings of disempowerment and dissatisfaction with the service. Additionally, residents were uncertain about the process for making changes to their shared onsite support arrangements.

Solution and impact: Although residents initially sought to replace the support provider due to trust issues, group discussions led to a more constructive approach. A provisional six-month contract extension with the onsite support provider was agreed upon to trial process improvements. Facilitated meetings between residents and the onsite support provider resulted in positive changes, such as residents receiving staff rosters in advance and having input into the hiring of new onsite support workers. These changes improved transparency, increased residents' sense of control over their shared support, and contributed to more positive experiences with the onsite support service.

Case Study 2: Clustered Villas Typology

Context: This Pilot Project group comprised residents with complex disabilities, including psychosocial, cognitive, and acquired brain injury. Residents lived in self-contained one bedroom villas and shared living spaces, including a kitchen, outdoor area, lounge and staff office. On-site staff provided support within a similar structure to a group home model. Initially, engagement with the project and among residents was minimal. Previous disagreements between residents led many residents to prefer individual meetings with the facilitator rather than participating in group sessions.

Identification of shared problem: Through a tailored and flexible approach involving one-to-one meetings, shared goal-setting, and structured peer interactions, the facilitator gradually built trust and encouraged group participation. As trust grew, residents identified a significant shared issue: they did not have keys to their own villas. This restricted their ability to come and go freely, forced them to leave their doors unlocked during the day, and required them to be home at specific times for staff to secure their villas. This situation limited residents' independence and created feelings of insecurity and a lack of privacy.

Solution and impact: The facilitator raised this issue with the site team, explaining why the existing practice was inappropriate. As a result, residents were provided with keys to their villas, enabling them to lock and unlock their doors as needed. This change fostered greater autonomy and privacy, allowing residents to come and go freely, live more independently, and no longer rely on staff for basic access to their homes.

Integrated Results

This evaluation identified a significant increase in resident satisfaction with the Pilot Project at TP3, which coincided with the completion of program meeting nine. This quantitative improvement is supported by qualitative findings which indicate that the latter group meetings (program meetings 7-9) fostered an emerging sense of community and avenues for change. During the earlier group meetings (program meetings 3-6), residents focused on learning and identifying shared concerns but had not yet begun to implement changes. Many residents expressed scepticism regarding the Pilot Project's potential for enabling change during these initial meetings. Additionally, residents reported challenges in group dynamics including dominant voices and meetings that just felt like 'venting'. However, at TP3, there was a notable shift in sentiment, with residents expressing optimism about the actions taken and the positive changes resulting from group discussions. This shift is reflected in the increased mean scores for the items 'enjoying the Pilot Project' and 'finding the Pilot Project useful' indicating that residents found greater enjoyment in the group meetings as conversations became more focused and tangible outcomes started to occur. The sustained satisfaction observed at follow up (TP4) aligns with qualitative insights, suggesting that numerous positive changes had been implemented throughout the Pilot Project. Facilitators also reported an increase in their confidence in residents' understanding of the Pilot Program's expectations, as well as an increase in overall satisfaction with the Pilot Project after TP3. The alignment between the positive trends in resident and facilitator satisfaction further highlights the value of the later program meetings.

It is worth noting, however, that there were no observed changes in the remaining scales (influence over housing and support, satisfaction with housing and support, consumer identity, community connection) likely due to several factors. Residents had varied expectations for the Pilot Project. While many residents hoped for a strong social component, the group meetings often focused on housing and support issues, which some residents felt did not foster community connection. Additionally, although positive changes were reported, many issues concerning housing and support remain. Some residents also noted that the issues most important to them were not prioritised during group meetings. Moreover, while some residents reported appreciating learning about their rights, housing and support, others viewed the educational meeting content as not directly relevant to their individual needs. Nonetheless, many residents expressed a desire for the group meetings to continue, with qualitative insights indicating that residents hope they will facilitate further progress.

Although there is limited quantitative data from the residents at the shared living sites, facilitator insights indicate slow, but substantial, progress at these sites. Qualitative insights from facilitators highlight the importance of close others and support staff for effective

scaffolding at these sites, suggesting that progress may have been more efficient if engagement had occurred earlier in the program. Additionally, qualitative insights from the shared living residents indicate a preference not to prioritise 'building community' within the program, as residents already spent significant time together due to their living arrangements. Facilitators saw value in continuing the group meetings at shared living sites due to the positive outcomes achieved, such as residents receiving keys to their own units.

Key Learnings

The key learnings from the project, drawn from the analysis of resident, facilitator, and co-facilitator data over time, highlight several critical factors. The following section provides an overview of these insights, with a summary in Figure 5.

Facilitating effectively

- Facilitators and co-facilitators play a vital role in the success of the meetings. Engaging skilled and independent facilitators who can navigate group complexities and maintain neutrality is key to ensuring effective facilitation and resident satisfaction.
- Facilitators should be adept at managing group dynamics by balancing participation among more vocal and quieter members to ensure that all voices are heard and valued. Maintaining focus by guiding conversations and keeping the group on track is crucial to productive outcomes.
- Facilitators should be proactive in setting the agenda and outcomes of each meeting, including encouraging the group to take ownership of actions and follow-up tasks.
- Co-facilitators provide additional value by helping build rapport and trust. Co-facilitators should be skilled in mediating conflicts and managing group meetings with people who have varying cognitive and communication needs.

Aligning expectations

- Clarity of goals and expectations, including clear communication around the project's objectives, is essential to ensure residents understand the purpose of the meetings and what they are working toward.
- Setting clear expectations regarding the level and type of participation in the meetings is required to prevent misunderstandings, frustration or hesitation from residents.
- Transparency around prioritisation strategies and information sharing is important to maintain trust and foster a sense of inclusion in the decision-making process.

Fostering a comfortable space

- Creating a comfortable and inclusive environment is essential for promoting resident engagement and participation.
- Building a sense of community and rapport within the group enables residents to share their ideas and experiences openly, though this can be a gradual process, especially with changing group dynamics.
- Ensuring that the meetings are accessible to all residents, including considering physical, sensory, cognitive, and communication needs, helps to foster inclusivity. It

is important to actively engage members who are unable to attend meetings to ensure their feedback is captured.

- Practical aspects such as logistics, scheduling and meeting time-commitments contribute to feasibility, continued engagement, and creating a comfortable environment.
- Facilitators and co-facilitators are central to fostering a comfortable space. It is essential that their roles remain clear and consistent throughout the meetings to support a stable and supportive environment.

Maintaining personal relevance

- A flexible approach that includes adapting the structure and content of meetings to accommodate varying cognitive and communication needs is essential for resident engagement.
- Careful consideration of individual and group knowledge bases is important to ensure content is relevant.
- Activities and discussions need to be tailored to residents' circumstances to maintain interest and engagement.
- Involving staff and informal supporters who understand communication needs and preferences is valuable to enable participation and ensure relevance of content. This is particularly important in shared living environments.
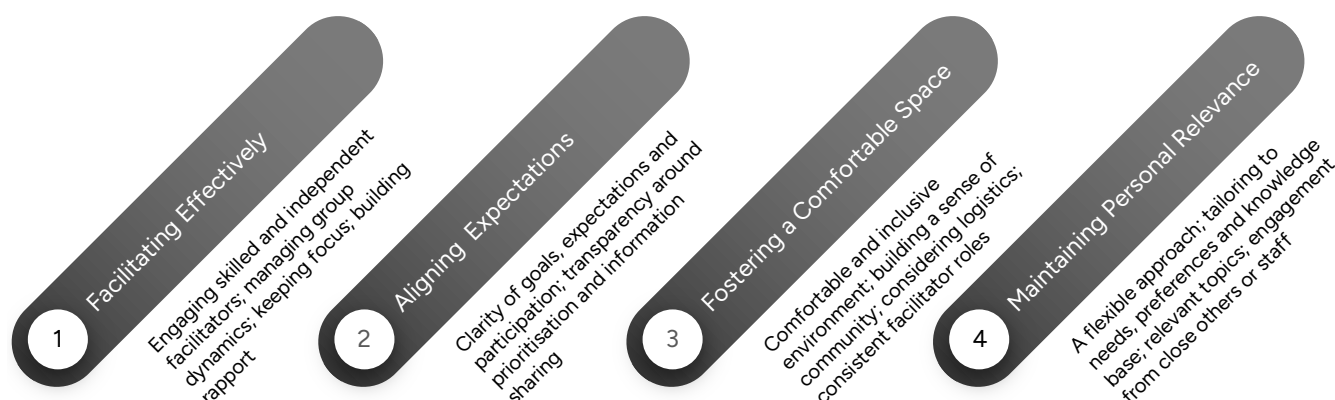
Figure 5. Summary of key learnings.

Limitations

This evaluation has several limitations that should be considered when interpreting the findings. It is important to note that the results reflect only the experiences and feedback of residents who participated in the evaluation of the Pilot Project. The findings do not represent the perspectives of all residents living in Enliven Housing or those who attended the group meetings without taking part in the evaluation. Additionally, the sample size was relatively small, particularly at TP3 and TP4, which may limit the generalisability of these findings. There were also challenges in accessing some group home sites, resulting in reduced data collection from these locations, which may have impacted the overall dataset and insights gathered.

Discussion

The aim of the evaluation was to explore residents' experiences with the Enliven Community Pilot Project and assess its effectiveness in achieving positive outcomes. This mixed-methods evaluation examined what worked well, areas for improvement, and participants' recommendations for enhancing the model. The findings provide valuable insights into the residents' experiences, illustrating a temporal journey throughout the Pilot Project. Initially, residents felt listened to, followed by an anticipation of change. This anticipation included both optimism and scepticism regarding community connection and improvements to housing and support. As the group meetings progressed, a sense of community emerged and residents worked collaboratively with the facilitator, and at times took the lead, to implement changes. As a result of implementing changes, residents reported gradual improvements in housing and support. In some instances, these improvements fostered a greater sense of control over their housing and support arrangements. However, residents highlighted that ongoing work is required to continue to address challenges with housing and support. Residents reported increased satisfaction with the program over time, particularly in the enjoyment and usefulness of the group meetings during the mid-to-late stages of the project. However, varying levels of engagement and group dynamics presented ongoing challenges, highlighting the importance of effective facilitation, aligned expectations, and personal relevance in shared support facilitation models. It was also evident from the qualitative findings that some residents wanted more social contact, suggesting a clear need for more targeted interventions to support NDIS participants to explore opportunities for belonging and connection in their local community[6,7].

A key learning from the evaluation was the critical importance of skilled facilitation in the shared support model. The recent NDIS review recommended the development of a Shared Support Facilitator role as a form of specialist 'navigator' to work with NDIS participants sharing housing and living supports and ensure everyone has a say in how their support is organised and delivered[8]. In the past, support providers, housing providers or support workers have been expected to take on facilitation responsibilities. However, the development of the Shared Support Facilitator role recognises that independence from housing or support providers is important for fostering trust and enabling residents to genuinely influence their living arrangements. The findings of this evaluation showed that skilled facilitators play a pivotal role in navigating group complexities, balancing participation among members, and maintaining neutrality to ensure all voices are heard. Their ability to set clear agendas, guide conversations, and encourage shared ownership of actions directly influences the success of the facilitation process. Effective communication is particularly important when working with people with varying disability types, as facilitators must adapt their approach to accommodate diverse cognitive, physical, and communication needs. Findings from the current evaluation highlight the value of investing in Shared Support Facilitators with strong interpersonal, mediation, and organisational skills to support residents

[6] Leeson, R., Collins, M., & Douglas, J. (2021). *Finding goal focus with people with severe traumatic brain injury in a person-centered multi-component community connection program (M-ComConnect).* Frontiers in Rehabilitation Sciences, 2, 786445. https://doi.org/10.3389/fresc.2021.786445

[7] McKnight, J. L. (1995). *The careless society: Community and its counterfeits.* Basic Books.

[8] NDIS Review. (2023). *Fact sheet 3: Finding your way around with help from a navigator.* National Disability Insurance Scheme. https://www.ndisreview.gov.au/sites/default/files/resource/download/navigator.pdf

to have a say in their shared living arrangements. This role has potential to explore shared support opportunities and promote scheme sustainability by considering alternatives to 1:1 service models.

The evaluation also highlighted important considerations for the scalability of the shared support facilitation mode. Skilled facilitators are essential to ensuring the success of the model, but this can be resource intensive, which may limit the model's broader application. To avoid inefficiencies and improve scalability potential, it is essential to align expectations about the purpose of the group meetings and the role of facilitator when residents join the program. Moreover, workshops that were more focused on problem-solving, rather than knowledge-building, saw improved satisfaction. These findings suggest that a shift towards a more solution-oriented approach in the group meetings would enhance the model's effectiveness and reduce resource demands. However, it is still essential to ensure NDIS participants have the opportunity to learn about their housing rights and responsibility. To support scalability, incorporating existing resources designed to build the capacity of people with disability living in supported accommodation is recommended[9,10]. These refinements could support more efficient and sustainable facilitation as the model scales.

Conclusion

The evaluation of the Enliven Community Pilot Project has demonstrated the potential of the shared support facilitation model to improve resident satisfaction and foster a stronger sense of community. The evaluation underscored the crucial role of skilled facilitators in ensuring that all voices are heard and supporting participants in navigating the complexities of shared living arrangements. This type of navigator role, an impartial party without financial stakes in the group's decisions, has significant potential to provide residents with greater influence over their living situations. While the facilitator role is resource-intensive, refinements to meeting structures and a shift toward more solution-focused approaches could enhance scalability and make the model more sustainable.

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[9] Housing Hub. (n.d.). *Resources for housing seekers*. Summer Foundation. https://www.housinghub.org.au/housing-seekers/level1

[10] VALID. (n.d.). *Resources*. Victorian Advocacy League for Individuals with Disability. https://valid.org.au/resources-and-media/resources/

Appendices

Appendix 1: Resident interview guides

Time Point 1

Your experience with the Enliven Pilot Project.

1. Can you tell me a little about the Enliven Pilot Project?
2. How did you get involved with the Pilot Project?
3. What have you done in the first two meetings?
4. What did you like about it?
5. What would you change?

Aims of the Pilot Project.

6. What do you hope the Pilot Project will achieve?
7. Do you think you know enough about what you are expected to do?
8. Is there anything you'd like to know more about?

Time point 1 rating scales

● My Influence scale

Time Point 2

About the Pilot Project.

1. Tell us about your experience with the Pilot Project so far
2. Have the group meetings met your expectations?
3. What have you liked about the group meetings?
4. What would you change?
5. What does the group hope to achieve through the Pilot Project?
6. What do you personally hope to achieve through the Pilot Project?
7. Do you talk to/meet with people in the Pilot Project outside of the scheduled meetings? Do you want to?
8. How do you feel about the upcoming meetings?
9. Is there anything you'd like to know more about?

Time point 2 rating scales

● My Influence scale; Satisfaction with Pilot Project; Community connection; Consumer identity; Housing and support

Time Point 3

1. Tell us about the last of your meetings with the Pilot Project. What did you do?
2. Have you attended all the meetings? Why/why not?
3. What have you liked about the group meetings?
4. How was the facilitation of the group meetings?
5. What was it like working as a group?
6. What would you change? Do you have any suggestions for improvement?
7. What has been achieved from the group meetings?
8. Overall, how do you feel about the Pilot Project looking back?
9. What are your hopes for the future of the community cooperative?
10. What advice would you give to others setting a program like the Pilot Project / a community cooperative?
11. Anything else you would like to share?

Time point 3 rating scales

- My Influence scale; Satisfaction with Pilot Project; Community connection; Consumer identity; Housing and support

Appendix 2: My Influence Scale items

My Influence Scale (min = 6; max = 24)

1. I can influence decisions that affect my life

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

2. I am satisfied with the amount of control I have over decisions that affect my life

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

3. I am satisfied with the amount of support I have with making decisions that affect my life

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

4. I make decisions about what I do with my time

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

5. I make decisions about when I do activities

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

6. I make decisions about how I spend my money

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

Experiences of how you influence decisions about your housing and support (min = 3; max = 12)

7. I am satisfied with the amount of control I have over decisions about sharing a portion of my supports with co-located tenants

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

8. I am satisfied with the amount of support I have with making decisions that affect my housing and support

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

9. I am satisfied with the amount of support I have communicating with the housing and support providers where I live

1	2	3	4
Never or rarely	Sometimes	Often	Usually or always

Appendix 3: Resident rating scales

Satisfaction with participation in the Pilot Project (min = 4; max = 16)

1. I enjoyed participating in the Pilot Project

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

2. I gained new knowledge from the Pilot Project

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

3. I found the Pilot Project useful

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

4. I would like the Pilot Project / facilitated group meetings to continue

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

Community connection with Community Cooperative group members (min = 3; max = 12)

5. I felt my voice was heard when discussing issues with the community cooperative

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

6. I enjoyed meeting with the community cooperative to discuss issues with housing and support

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

7. I feel a strong sense of belonging within the community cooperative

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

Consumer identity (min = 2; max = 8)

8. I am confident to discuss issues with the community cooperative in the future

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

9. I am confident the community cooperative will enable change or provide opportunities for change

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

Housing and support (min = 4; max = 16)

10. I am satisfied with the support I share with other residents

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

11. I am satisfied with my housing arrangement

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

12. I know who I can talk to about issues with my shared support

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

13. I know who I can talk to about issues with my housing

1	2	3	4
Strongly disagree	Disagree	Agree	Strongly agree

Appendix 4: Resident TP4 survey

This survey aims to collect your final feedback on the Pilot Project. This will be the last survey in the evaluation of the Pilot Project.

The survey starts with five open-ended questions about how the Pilot Project went and your hopes for the future of the community cooperative. The survey ends with rating scales about your experiences with the Pilot Project and community cooperative.

1. What went well in the Pilot Project?
2. What would you change about the Pilot Project?
3. Overall, how do you feel about the Pilot Project looking back?
4. What are your hopes for the future of the community cooperative?
5. Is there anything else you would like to share?

Rating scales
- My Influence scale; Satisfaction with Pilot Project; Community connection; Consumer identity; Housing and support

Appendix 5: Site-by-site facilitator surveys

1. Please specify Pilot Project site

2. What went well in the [insert relevant meeting numbers] Pilot Project meetings?

3. What did you find challenging about the [insert relevant meeting numbers] Pilot Project meetings?

4. What surprised you about the [insert relevant meeting numbers] Pilot Project meetings?

5. What would you change about the [insert relevant meeting numbers] Pilot Project meetings?

6. What would you keep the same about the [insert relevant meeting numbers] Pilot Project meetings?

7. What advice would you give to another facilitator conducting meetings [insert relevant meeting numbers] of the Pilot Project?

8. How confident are you that the Pilot Project participants at this site know what they were expected to do in the project?

1	2	3	4
Not confident at all	Somewhat confident	Moderately confident	Extremely confident

9. How engaged were the participants with the Pilot Project at this site?

1	2	3	4
Not engaged at all	Somewhat engaged	Moderately engaged	Extremely engaged

10. Please rate your overall satisfaction with the [insert relevant meeting numbers] meetings of the Pilot Project at this site

1	2	3	4
Very dissatisfied	Dissatisfied	Satisfied	Very satisfied

11. Please provide any further comments about the [insert relevant meeting numbers] meetings of the Pilot Project at this site

Appendix 6: Facilitator TP4 interview guide

1. What went well in the Pilot Project?
2. What did you find challenging about the Pilot Project?
3. What would you change about the Pilot Project?
4. What surprised you about the Pilot Project?
5. How demanding was the Pilot Project for you as a facilitator?
6. From your experience, was the impact of the Pilot Project different in different housing typologies?
7. What advice would you give to another facilitator facilitating the Pilot Project (or similar)?
8. Overall, how do you feel about the Pilot Project looking back?
9. What are your hopes for the future of the community cooperative?
10. Is there anything else you would like to share?

Rating scales

1. Please rate your overall satisfaction with the Pilot Project

1	2	3	4
Very dissatisfied	Dissatisfied	Satisfied	Very satisfied

2. Please rate how useful you think the Pilot Project was to participants

1	2	3	4
Not useful	Slightly useful	Moderately useful	Very useful

Appendix 7: Co-Facilitator TP4 interview guide

1. Please tell us about your involvement in the Pilot Project
2. What went well in the Pilot Project?
3. What did you find challenging about the Pilot Project?
4. What would you change about the Pilot Project?
5. What surprised you about the Pilot Project?
6. What advice would you give to another co-facilitator facilitating the Pilot Project (or similar)?
7. Overall, how do you feel about the Pilot Project looking back?
8. What are your hopes for the future of the community cooperative?
9. Is there anything else you would like to share?

Rating scales

1. Please rate your overall satisfaction with the Pilot Project

1	2	3	4
Very dissatisfied	Dissatisfied	Satisfied	Very satisfied

2. Please rate how useful you think the Pilot Project was to participants

1	2	3	4
Not useful	Slightly useful	Moderately useful	Very useful