

# Entry Point Survey Pilot Research Report

June 2025

*Research led by University of Otago He Kāinga Oranga – Housing and Health Research*



*Pilot providers: Christchurch Methodist Mission, Downtown Community Ministry,  
LinkPeople and Whatever It Takes*



LinkPeople



*Supported by Housing First Auckland Backbone*



## Executive Summary

The Entry Point Survey pilot research emerged from urgent sector concerns about data gaps and policy impacts. It also serves as a response to the current government's call for evidence.

This pilot successfully demonstrated the sector's capacity to collect consistent, meaningful data on homelessness experiences across Aotearoa. The findings validate provider concerns about increasing hardship and difficulties accessing government support. The data reveals a system where many people experiencing homelessness face repeated rejections from emergency housing while cycling through multiple unstable housing situations.

While the providers did an excellent job overall in providing the data, they noted it is difficult to maintain the data collection as a priority with this becoming harder as the pilot progressed. The most obvious use for a repeated larger scale or national survey would be to look at trend in the numbers seeking support over time. Clear and consistent leadership buy in will be needed to achieve this.

The strong correlation between previous and current homelessness suggests the need for more effective long-term housing solutions rather than temporary interventions. The lower satisfaction ratings with MSD/WINZ services, particularly among those declined housing support, suggests there are opportunities to improve access and pathways into housing. This reinforces the importance of collaboration between MSD/government agencies and housing providers to better support people into stable homes.

The pilot's success in gathering data across multiple regions and providers demonstrates the viability of a national approach to entry point data collection, providing the sector with crucial evidence needed for advocacy and policy development while maintaining data sovereignty.

## Introduction

The Entry Point Survey pilot research is a critical first step in measuring and monitoring housing distress following the government's implementation of policy changes and tightening of emergency housing in July 2024. This research is one of the three main priorities of the National Homelessness Data Project (NHDP), which is supported by Housing First Auckland Backbone, under the guidance of a taskforce of leaders and researchers from across Aotearoa's housing and homelessness sector: Kāhui Tū Kaha, Christchurch Methodist Mission, the Salvation Army, Wellington City Mission, DCM (Downtown Community Ministry), Community Housing Aotearoa (CHA), and the University of Otago.

This research pilot is a response to the need for timely, consistent and coordinated data to:

- evidence need and track changes in homelessness levels,
- monitor the experience of people and whānau who reach out for support
- maintain public and political focus on homelessness trends, and
- respond effectively to increasing demands from government for comprehensive data and evidence-based insights.

The following report presents the methodology, findings and outcomes from the pilot and outlines recommendations and the proposed next steps.

# Acknowledgements

## **Research lead**

This pilot would not have been possible without the generosity of Professor Nevil Pierse and Dr. Chang Yu from University of Otago He Kāinga Oranga – Housing and Health Research programme. They led the research design, supported regular pilot provider check-ins, shared statistical findings based on the aggregated raw datasets and gave input for the report.

## **Pilot providers**

Team leaders, data and policy leads and frontline staff at the four providers - Christchurch Methodist Mission (Christchurch and Blenheim services), DCM Wellington, LinkPeople (Auckland) and Whatever it Takes, Hawke's Bay - who joined the pilot and willingly gave their time to either collect data, oversee survey implementation and contribute feedback at regular pilot check-ins.

## **Communications and data support**

The Housing First Auckland Backbone team led communications, technical set up support for providers, facilitated check ins, conducted data analysis and prepared the pilot report.

The National Homelessness Data Project taskforce extends heartfelt gratitude to all participating providers, researchers, organisations and their dedicated staff who contributed to the Entry Point Survey pilot. Despite the considerable pressures facing frontline services, the absence of funding for this critical work, and the challenges of integrating new data collection processes into already demanding workflows, participating organisations, researchers and providers demonstrated a commitment to advance coordinated evidence-based advocacy for the homelessness sector.

The participation of the above-mentioned organisations and staff reflects a shared understanding of the fundamental role of robust data in our collective efforts to address homelessness across Aotearoa.

## Research purpose - why is this important?

This research addresses a pressing challenge facing the homelessness sector: the urgent need for robust evidence to substantiate the trends providers are witnessing at the frontline. Housing Ministers Bishop and Potaka have made it clear that advocacy efforts must be supported by comprehensive, consistent data rather than anecdotal reports of what is being seen on the ground. Without this evidence base, policy discussions and calls for appropriate and improved resource allocation lack the substance and proof needed.

Currently available data sources are insufficient for this purpose. Census data, while valuable, provides only historical snapshots that fail to capture the dynamic nature of homelessness or reflect recent policy impacts. Most critically, existing datasets do not document the experiences of people affected by the 2024 policy changes that tightened access to emergency housing and accelerated moving individuals and families out of emergency housing.

The policy environment has shifted, making data collection on the interactions people (who seek help from our sector) have with the Ministry of Social Development (MSD) highly relevant. While the sector reports increased barriers to accessing Emergency Housing Special Needs Grants (EHSNG) - including front desk refusals, misdirection to alternative services, process delays, and higher refusal rates - these observations require robust data and reporting to inform effective advocacy and service delivery responses.

Data on increasing rates of homelessness and housing distress is essential to advocate to the government for the right resourcing to alleviate the pressure on frontline staff, who are often stretched and operating beyond capacity as they work in an increasingly complex system to help people navigate recent system changes and access their full entitlements. As a sector, maintaining control of data collection and reporting processes is essential to preserve data sovereignty and ensure findings accurately reflect frontline realities. This need has become more urgent following government's withdrawal of its commitment to run a nationwide homelessness data project, leaving significant data gaps that must be addressed through a sector-led initiative. While individual providers currently collect various data using their own methodologies, the Entry Point Survey pilot represents a crucial step toward establishing a coordinated data collection framework. This is not only work worth doing but also work we **must** do if we are to be seen as trusted, credible and reputable partners to government.

***“As a Housing Provider, we have a responsibility to not only provide a service, but also it is vital to collect data on what people are experiencing. It’s only then that we have the evidence base to present to decision makers about the impact that their policy changes are having. Admittedly, collecting and analysing data is time-consuming but if we do want to change systems and processes that are hurting vulnerable people, this is one of the most critical things that we can do. Doing this collaboratively means that we can present a nation-wide picture of those who are homeless.”***

(Jill Hawkey, Executive Director, Christchurch Methodist Mission and Housing First provider)

## Pilot methodology

The Entry Point Survey research pilot was strategically designed as a brief, accessible questionnaire administered digitally or by paper form by frontline staff when people first seek help, whether by phone or walking through service doors. Consent to participate in the research was obtained before the survey was completed, either through a formal signed consent process or through participants' agreement to participate by proceeding with the survey. Importantly, participation in the survey did not in any way affect access to support or to services, capturing the experiences of all people seeking assistance regardless of their service pathway. The pilot ran for just under 10 weeks. The pilot did not use any personal identifying data.

For more detail on the pilot methodology, including the pilot research questions, please refer to the Appendix.

## Key findings from pilot survey data

Out of 246 ‘first contacts’ seeking housing support from across five regions, 204 people participated in the research. Of the total participants, 89.7% (183) indicated that they had interactions with WINZ. The data and their responses reveal significant insights about homelessness experiences and government service interactions.

### Demographics and regional distribution of participants with WINZ interactions

<b>Table 1-Descriptives</b>		
<b>Age</b>	Count	Percent
20-24 years	12	6.56%
25-34 years	48	26.23%
35-44 years	66	36.07%
45-54 years	29	15.85%
55-64 years	14	7.65%
65-74 years	11	6.01%
75+ years	3	1.64%
<b>Ethnicity<sup>1</sup></b>	Count	Percent
European	77	42.08%
Māori	100	54.64%
Pacific	17	9.29%
Asian	2	1.09%
<b>Gender</b>	Count	Percent
Male	110	60.11%
Female	71	38.80%
Other	2	1.09%
<b>Region</b>	Count	Percent
Canterbury	91	50.00%
Marlborough	22	12.09%
Napier & Hawke's Bay <sup>2</sup>	18	9.89%
South Auckland	21	11.54%
Wellington	30	16.48%

**Note:** 1. Each person can have multiple ethnicities. 2. Joined at week six of pilot.

#### Age distribution

The largest groups were people aged 35-44 years (36.1%) and 25-34 years (26.2%). Although only 6.6% were aged 20-24, suggesting a different service pathway for younger people, the data clearly indicates that homelessness predominantly affects working-age adults.



## Ethnicity

Māori are significantly overrepresented, comprising 54.6% of participants compared to their 17% share of the general population. European participants made up 42.1%, while Pacific peoples represented 9.3% and Asian peoples 1.1%.

## Gender

Males comprised 60.1% of participants, females 38.8%, with 1.1% identifying as other genders. Although higher than international data, the proportion of female participants is smaller in the pilot research compared to provider observations generally. This suggests that women may face additional barriers in Aotearoa and/or are accessing services through different pathways (e.g., domestic violence support providers, family services). Women are also more likely to engage in less visible forms of homelessness (staying with friends/family) and may not reach formal housing services as quickly, as highlighted in 2024 research by the Coalition to End Women's Homelessness<sup>1</sup>.

## Current and previous situation of participants with WINZ interactions

General health	Count	Percent
Good	70	38.25%
Fair	43	23.50%
Poor	42	22.95%
Do not know	28	15.30%
Current living situation	Count	Percent
Emergency Housing (EH)	9	4.92%
Transitional Housing (TH)	5	2.73%
Public Housing (PH)	6	3.28%
Unsheltered (rough, car, tent)	69	37.70%
Family & Friends	45	24.59%
Private market rental	15	8.20%
Boarding & Motels	15	8.20%
Other	19	10.38%

## General health

Several factors could explain why subjective health reports were better than expected in the pilot. People might under-report health problems or adjust their health expectations and rate “fair” differently to people who are housed. Despite this, the response pattern is suggesting significant health challenges among people seeking housing support as only 38.2% reported good health.

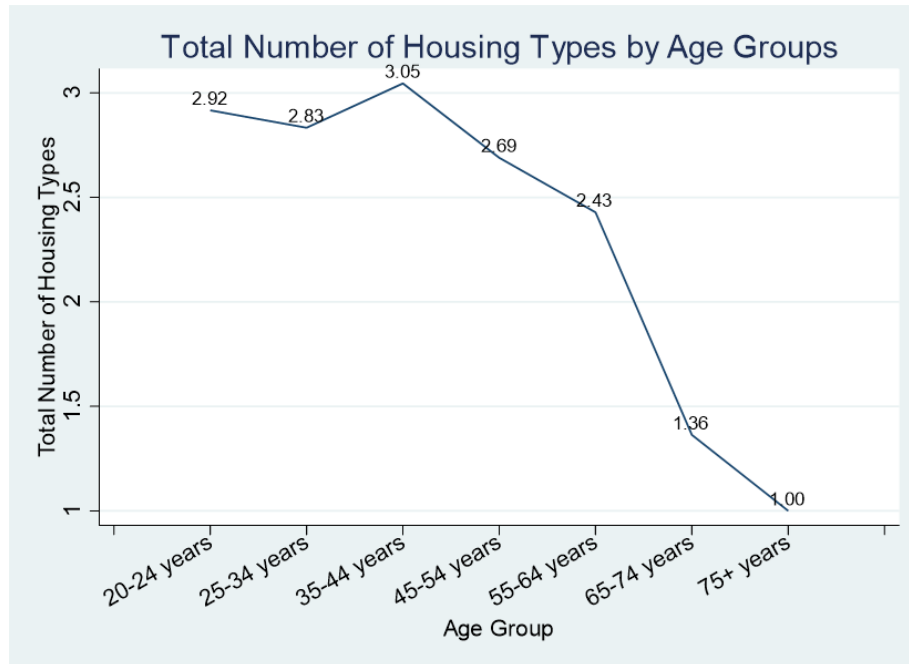
## Previous and current living situations

---

<sup>1</sup> 2024 [Ngā Ara ki te Kāinga: Understanding Barriers and Solutions to Women's Homelessness in New Zealand](#)

Participants currently unsheltered (sleeping rough, in cars/tents) represent the largest single category (37.7%) with another 24.6% temporarily staying with friends and family. Small percentages were in formal emergency (4.9%) or transitional housing (2.7%).

Overall, participants experienced an average of 2.74 different housing situations in the past 12 months. However, as indicated in the graph below, younger people are experiencing more housing instability than older participants.



And when taking into account both current and previous living situations, the data reveals a concerning cycle where people who had previously experienced homelessness were 3.6 times more likely to be currently homeless.

### Access to housing supports and service experiences

	Count	Percent
<b>EH/TH declined</b>	92	50.27%
<b>EH/TH stayed</b>	56	30.60%
<b>Public Housing Register</b>	70	38.25%
<b>Housing support discussed<sup>3</sup></b>	139	75.96%

**Note:** 3. Housing support includes emergency housing, transitional housing, social housing, and accommodation supplement.

Over three quarters (76%) of participants have engaged with WINZ to seek housing support. While 30.6% of participants have stayed in government funded emergency or transitional housing and 38.2% are on the social housing waitlist, half of all participants (50.3%) had been declined emergency or transitional housing. This shows widespread engagement with formal support systems; however, participants rated their satisfaction with WINZ interactions at an average of 4.07 out of 10.

Using regression analysis to help us understand relationships between different factors, two significant factors were identified to have a significant negative impact on WINZ satisfaction ratings. Even accounting for age, ethnicity and other factors, being declined housing and having poor health specifically worsen people's experience with government services.

## Limitations

Beyond the relatively small sample size (183 participants), several other data limitations should be considered:

- **Sampling and representativeness:** The large response from Christchurch (50% of all responses) cannot be interpreted as an indication that homelessness is worse in Christchurch compared to other parts of New Zealand.  
While most pilot providers embedded the survey questions into their usual entry point interview process (with frontline workers talking through the questions with people as part of the interview at first entry point), at some pilot sites participants may have completed the survey themselves. This self-selection and participation process may introduce bias by excluding participants who were in crisis, had severe mental health issues, or faced language barriers, as only those willing and able to complete surveys were included. And those most frustrated with government services might be more or less likely to participate.
- **Timing and seasonal factors:** February - April data may not capture seasonal variations in homelessness or service access.
- **Retrospective reporting and survey fatigue:** 12-month recall periods may be affected by memory issues or ongoing trauma and people frequently asked for information may provide quick rather than thoughtful responses.
- **Pilot data from one time period only:** The current data cannot speak to trends and if the numbers requesting help are increasing or decreasing over time. In order to understand trends, the survey would need to be consistently repeated at different time points.

## Learnings from pilot

### What worked well

- ✓ Online fortnightly check ins and an end-of-pilot debrief were valuable forums for sharing what was working, what needed changed and how data was tracking
- ✓ One-to-one technical support provided by Housing First Auckland Backbone ensured providers were set up for data collection and any technical issues were resolved efficiently
- ✓ The short survey length was essential as pilot provider leads shared that there are challenges embedding additional data collection at entry point
- ✓ Providing both digital and print/hard copy survey options enabled providers to use what worked best for their frontline staff
- ✓ Christchurch Methodist Mission shared news of participation in this pilot across the Te Waipounamu Community Housing Providers Network, a South Island housing network they belong to. This has generated high levels of interest for wider rollout across the South Island, with a desire to embed the research in an increased number of South Island providers data collection systems from 1 July 2025 onwards.

*Note: Given the desire for a South Island rollout as soon as possible, with the aim to collect data during winter months, they have requested urgent support to onboard new providers in their network and begin a second two-month research implementation on 1 July 2025.*

## Challenges during the pilot

There was considerable variability in completion rates across providers, with one pilot provider reporting low numbers due to proactive outreach efforts and many of the people seeking support were already familiar to their service, and another provider joining in the last three weeks of the pilot. Many pilot organisations also reported that the commitment of frontline staff to encourage people seeking help to complete a survey waned over time.

Ensuring frontline staff consistently collected and reported the total number of entry point enquiries so the research could track total demand was found to be difficult for pilot providers with many support access points – keeping track of who was ‘new’ proved to be challenging.

Responses to the health question indicated either a lack of understanding of what is considered “fair” health or inflated self-assessment of health. Many participants did not rate their health as poor, despite the reality and what was observed by staff. Additionally,

people presenting for housing support do not tend to highlight their health challenges. Therefore, the findings from the health question were not considered to be reliable.

Pilot providers also noted that for many people “consent” has a negative connotation and can create a barrier to participation. “Consent” was rephrased as an agreement to participate in the survey.

## Improvements made

Over the course of the pilot an extra question was added to reflect that first contact can be made on behalf of the people needing help (a referral from another organisation or family and friends). It was important to collect data to differentiate between referrals and people seeking assistance directly.

## Recommendations

The overall success of the Entry Point Survey pilot, combined with the concerning trends it has revealed regarding the level of need and issues accessing emergency housing support, reinforces the urgent need for consistent and coordinated data collection across Aotearoa.

Based on these findings, it is recommended that the Entry Point Survey and data collection methodology, developed through this pilot and modified based on challenges and learnings outlined above, be integrated into the standard data gathering processes of providers who engage with people who are homeless nationwide. Strong systems and operational leadership at provider level will be essential to ensure total 'entry' numbers are recorded and frontline staff understand the importance of this research.

It will be imperative for the NHDP taskforce to facilitate discussions with sector leaders to seek agreement for a nationwide rollout. This discussion will need to identify onboarding priorities (noting the request from Christchurch Methodist Mission and other South Island providers to fast-track their rollout for phase two implementation) and agree on responsibilities and resourcing for research leadership and communications, technical assistance, training, and coordination to ensure consistent application of the methodology across all participating providers.

This national rollout will establish the robust, sector-controlled evidence base essential for effective advocacy and policy development in the current challenging environment.

## Next steps

1. Support for rollout across interested Te Waipounamu Community Housing Providers Network providers to begin 16 June onwards to support phase two implementation for winter, beginning 1 July 2025
2. Professor Nevil Pierse, together with pilot providers, will share the pilot findings and experience at the national Housing First CoP presentation on 26 June 2025
3. Housing First Auckland and Community Housing Aotearoa are jointly hosting an online hui and Q&A opportunity for the homelessness and housing sector to outline the work and progress of the National Homelessness Data Project on 15 July 2025. This will include a presentation of the Entry Point Survey pilot research by Professor Nevil Pierse and opportunity for discussion to determine the appetite and commitment to move to a nationwide rollout.

# Appendix

## Pilot Methodology

### **Pilot providers**

Initially, three providers were involved in the pilot: Christchurch Methodist Mission, DCM Wellington and LinkPeople (Auckland). Following a presentation at the Housing First national Community of Practice hui in April 2025, Whatever it Takes (Napier/Hawke's Bay) offered to join partway through the pilot.

### **Design and approach**

The survey was intentionally short. Following a process of consultation with sector leaders and pilot providers, 10 questions (including age, ethnicity, gender, current housing situation, current health status, and crucially, experiences with Work and Income New Zealand) were agreed to be included. An additional question was added after the first check-in with pilot providers. (Refer to Appendix for survey questions). Participation was consent-based, and no personally identifying information was collected.

### **Target population**

The survey captured anyone at first contact point, providing a broad snapshot of people seeking housing support.

### **Data collection methods**

Pilot providers had the option to collect data using an online survey form or a paper survey form. Responses from paper survey forms were then collated in a spreadsheet or transferred to the online survey form.

### **Timeframe and implementation**

The pilot ran for just under ten weeks, with data collection beginning on Monday 10 February and concluding (for pilot purposes) on 17 April 2025. Professor Nevil Pierse and Housing First Auckland Backbone supported pilot providers with the technical set up, communications, rollout, and implementation of the survey over the pilot period. Fortnightly check-ins were hosted online to gather feedback and troubleshoot.



## Entry Point Survey pilot research questions

### Consent statement

**Provider Name** is working with researchers and other providers to understand more about homelessness in NZ and how to end it. To help with this research we would like to invite you to answer a few short survey questions. This includes questions about your experience with Work and Income. Your responses will not be shared with Work and Income and will not in any way affect the support you receive from **Provider Name**. We will share your survey answers with our research partners, but we will not share your name or any information that would identify you.

I consent to participating in this survey:

- ☐ Yes ☐ This data is from a third party (referral) source
- ☐ No
1. Which of these age groups do you belong to?
- ☐ 0-14 Years ☐ 55-64 years
- ☐ 15-19 years ☐ 65-74 years
- ☐ 20-24 years ☐ 75+ years
- ☐ 25-34 years ☐ Don't know
- ☐ 35-44 years ☐ Refused
- ☐ 45-54 years
2. Which ethnic group or groups do you belong to?  
(Select all that apply)
- ☐ NZ European ☐ Chinese
- ☐ Māori ☐ Indian
- ☐ Samoan ☐ Don't know
- ☐ Tongan ☐ Refused
- ☐ Niuean ☐ Other (specify) \_\_\_\_\_
- ☐ Cook Island Māori \_\_\_\_\_
3. What is your gender?
- ☐ Male ☐ Don't know
- ☐ Female ☐ Refused
- ☐ Non-binary ☐ Other (specify) \_\_\_\_\_
4. In general, would you say your health is:
- ☐ Excellent ☐ Poor
- ☐ Very good ☐ Don't know
- ☐ Good ☐ Refused
- ☐ Fair
5. In the past year have you stayed in... (Select all that apply, continues to next page)
- ☐ Unsheltered (rough sleeping / sleeping in car / tent) ☐ Boarding house / back packers / lodges (non-emergency, non-transitional)
- ☐ Squatting ☐ Prison / remand
- ☐ Temporarily staying with friends / family ☐ Hospital / respite care / rehab
- ☐ Caravan Park ☐ Refugee centre
- ☐ Emergency Housing (with government funding) ☐ Other NGO housing (e.g., Women's Refuge, marae)
- ☐ Transitional Housing (with government funding) ☐ Motel (paid yourself or by friends / family / church / NGO)
- ☐ Private rental with a lease agreement ☐ Other
- ☐ Private rental without a lease agreement ☐ Don't know
- ☐ Own home ☐ Refused
- ☐ Public Housing (KO or a Community Housing Provider)

6. Your current housing situation is:

- |   |  |
|---|--|
| <input type="radio"/> Unsheltered (rough sleeping / sleeping in car / tent) | <input type="radio"/> Boarding house / back packers / lodges (non-emergency, non-transitional) |
| <input type="radio"/> Squatting   | <input type="radio"/> Prison / remand  |
| <input type="radio"/> Temporarily staying with friends / family             | <input type="radio"/> Hospital / respite care / rehab  |
| <input type="radio"/> Caravan Park  | <input type="radio"/> Refugee centre   |
| <input type="radio"/> Emergency Housing (with government funding)           | <input type="radio"/> Other NGO housing (e.g., Women's Refuge, marae)                          |
| <input type="radio"/> Transitional Housing (with government funding)        | <input type="radio"/> Motel (paid yourself or by friends / family / church / NGO)              |
| <input type="radio"/> Private rental with a lease agreement                 | <input type="radio"/> Other  |
| <input type="radio"/> Private rental without a lease agreement              | <input type="radio"/> Don't know   |
| <input type="radio"/> Own home  | <input type="radio"/> Refused  |
| <input type="radio"/> Public Housing (KO or a Community Housing Provider)   |  |

7. Have you had any dealings with WINZ in the past 12 months?

(If no, finish survey here. If yes, please continue.)

- ☐ Yes
- ☐ No

8. What help was discussed? (Select all that apply)

- ☐ Housing support (Accommodation Supplement, Emergency Housing, Transitional Housing, Social Housing)
- ☐ Referral to Housing support NGOs
- ☐ Income support (Emergency / Temporary additional support, Jobseeker, Health and Disability Allowance, Superannuation, Student support)
- ☐ Budgeting advice including referral to NGOs (including food banks or financial services)
- ☐ Employment services (discussions of employment opportunities or supports to apply for a job)
- ☐ Non-housing Special Needs Grants (for clothing, phone, food, transport)
- ☐ Other support

9. Have you in your dealings with WINZ been declined for Emergency Housing or Transitional Housing support?

- ☐ Yes
- ☐ No

Rate how satisfied you feel about your interactions with WINZ, on a scale from 0 to 10, with 0 meaning you felt "not at all satisfied" and 10 meaning you feel "completely satisfied". \_\_\_\_\_

10. Overall, how satisfied are you with your interactions with WINZ? (0 - 10)

11. Are you currently on the Social Housing Register (Kāinga Ora waitlist)?

- ☐ Yes
- ☐ No
- ☐ Don't know / not sure