



ISSUE BRIEF

# STRONG FAMILIES

## How can supportive housing help improve outcomes for families in the child welfare system?

Families with children currently represent about one-third of the U.S. homeless population: 180,413 people in families, including more than 100,000 children, were identified as [homeless on a single night in January 2018](#). Even when they are experiencing homelessness for the first time, many families have complex needs: poverty and extreme deprivation, mental illness, domestic violence, health challenges, substance use, and histories of trauma. [Housing supports](#) — such as emergency shelters, transitional housing programs, and one-time rental assistance from child protection agencies — are vital resources for homeless families, and may help prevent a housing crisis, de-escalate an existing crisis, and shorten the amount of time a family is homeless.

For some child welfare system-involved families, however, access to these resources may not lead to long-term housing stability and the underlying issues that contributed to the family's precarious housing situation in the first place remain unaddressed. **A [recent study](#) estimates that 18 percent of families with children placed in foster care are in need of supportive strategies and interventions to address their housing needs.** Some child protection agencies have turned to supportive housing models that offer voluntary wraparound services to more holistically meet the needs of homeless or precariously housed families involved with the child welfare system, including families that come to the attention



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of the system because of their housing status, as well as those for which a lack of adequate housing may prevent them from reunifying with their children in a timely fashion.

## Evidence base

While a range of national and local housing resources seek to shelter families and mitigate the adverse experiences associated with being homeless (see [What do we know about the impact of homelessness and housing instability on child welfare-involved families?](#)), some studies have shown that supportive housing programs are effective and cost-efficient for high-needs, homeless families involved with the child welfare system.<sup>1</sup> For example:

- [A recent national evaluation](#) of five supportive housing programs found improved outcomes for families involved with child welfare. One year after enrollment, approximately 86 percent of families in the treatment group reported living in a house or an apartment with their own lease, compared to 49 percent of families in the control group. Across all five programs, families in the treatment group also experienced more housing stability compared to families in the control group, including being less likely to experience rent burden,<sup>2</sup> frequent moves, overcrowding, eviction, and homelessness. Child welfare outcomes also benefited: Families that received supportive housing were more likely to be reunified and were reunified twice as fast as families without supportive housing.
- A randomized controlled trial of the Family Unification Program, which provides housing subsidies for families receiving services from the child welfare system, found that families that receive housing vouchers and support services were less likely to have a child in out-of-home placement 36 months after the program, compared to those that only received support services. The program also generates approximately \$500 in annual savings per family for the child welfare system.<sup>3</sup>

## NEW OPPORTUNITIES UNDER FAMILY FIRST

Under the Family First Prevention Services Act, states can opt to use Title IV-E foster care funds more flexibly to help children remain safely in their homes and prevent foster care placements. [One Roof](#), a strategic initiative of the Corporation for Supportive Housing that aims to break the intergenerational cycle of homelessness, housing instability, and child welfare involvement, is examining ways to use flexibility under Family First to integrate supportive housing as part of a state's prevention strategy.

- Another study examined the effectiveness of supportive housing for family preservation and reunification among families with multiple housing barriers. It found that more than half of the families with a child in out-of-home placement were reunified with their children within one year of being enrolled in a supportive housing program, compared to 23 percent of families that lived in a homeless shelter during the same period.<sup>4</sup>

## Key components

Supportive housing (also known as permanent supportive housing) generally has the following characteristics:

- **Minimal barriers to participation.** Supportive housing programs aim to assist individuals and families that often are considered “hard to serve,” including those with [substance use disorder](#), mental health challenges, criminal histories, and substandard credit that gets in the way of securing a lease. Programs follow a housing first approach, which prioritizes providing permanent housing to homeless individuals and families before supportive services are in place. The approach recognizes the importance of basic necessities like stable housing and access to food before beginning

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to address other complicated challenges, such as unemployment, substance use, and parental stress. Since participants are not required to undergo treatment or achieve certain benchmarks before moving into housing, the programs are able to reach the most hard-to-house populations, including individuals and families that are chronically homeless.<sup>5</sup> Clients actively participate in selecting the housing and determining which supportive services they need to increase the likelihood of long-term success.

- **Access to permanent and affordable housing.**

Tenants typically pay no more than 30 percent of their income for rent and their lease is not time-limited. Affordability is usually achieved through some type of rent subsidy, and individuals and families live independently in apartments or single-family homes. Housing can be offered at a single location with multiple units, or it can be scattered throughout residential neighborhoods.

- **Personal voice and choice.** Tenants have the same rights and responsibilities as other renters. They have control over their own lives and schedules, and can generally come and go as they please. They can also direct the array and intensity of services they receive by working with their case manager or service provider to set individual goals, but cannot be evicted for non-participation as they will remain housed as long as they are responsible tenants.

- **Wraparound services that are voluntary, flexible, comprehensive, and easy to access.** Participants can access supportive services for as long or short of a time period as they want or need. Supports include an array of services to help tenants remain housed, including case management, employment assistance, mental health counseling, substance abuse treatment, connections to public assistance programs like SNAP (Supplemental Nutrition Assistance Program) and Medicaid, as well as other services to prevent evictions and ensure tenants understand their rights and responsibilities as renters. Ultimately, services have to be flexible and robust enough to meet each tenant's unique needs, and are provided on site or at an easily accessible location.

## Jurisdictional approaches

In 2012, **Connecticut**<sup>6</sup> was one of five jurisdictions awarded a five-year demonstration grant from the U.S. Department of Health and Human Services to test the effectiveness of supportive housing for families involved in the child welfare system. Using a randomized controlled trial, the state found that screening for housing instability and homelessness early (before the case is assigned to an ongoing services worker), and providing either supportive or intensive supportive housing, leads to better outcomes for children.<sup>7</sup> For example, among family preservation cases, 9 percent



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of children in the treatment group were placed in an out-of-home placement or had a substantiated case of maltreatment, compared to 40 percent in the control group. Similarly, for cases where reunification was the goal, 30 percent of children who received supportive or intensive housing supports were reunified with their families, compared to 9 percent of families that received standard services. In addition, Connecticut found the per-child costs to be similar between families who participated in PSHF (Program Supportive Housing for Families), which offered access to housing vouchers and case management, and families who received child welfare services in their business-as-usual model, indicating that the state could improve services and outcomes for children and families with its current resources.

The Strengthening, Preserving, and Reunifying Families (SPRF) program, led by the **Oregon Department of Human Services**,<sup>9</sup> is another example of how high-impact social services coupled with permanent housing can be successful in reducing out-of-home placements. Primarily focused on treating parental substance abuse, the SPRF program in Jackson County includes a continuum of transitional to permanent housing, with varying levels of supervision. As a family demonstrates the ability to live safely together, typically over 18 to 24 months, the treatment

team moves the family to more permanent and independent housing, while also focusing on recovery, parenting skills, healthy relationships, life skills, and system independence. An evaluation of Jackson County's program found that children served by SPRF experienced fewer child welfare reports and removals, and higher rates of reunification. For example, over the course of 18 months, 10 percent of children in the treatment group had a substantiated report of maltreatment, compared to 22 percent of children in the control group. Similarly, 5 percent of the children experienced a subsequent removal, compared to 17 percent of children in the control group. Additionally, more than 90 percent of children in the treatment group were reunified with their parents, compared to 52 percent of children in the control group.

The **New York City Administration for Children's Services**' (ACS) [Keeping Families Together \(KFT\)](#) program was the first to formally test the utility of supportive housing for families in the child welfare system. The pilot program focused on permanently housing 29 high-needs families, including those who had been homeless for an extended period of time, had a history of substance use, and/or had a mental health diagnosis. The program proved effective for this traditionally hard-to-serve population. All of the children who were in foster care and had a goal of reunification



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when their parents began participating in the KFT program were in fact reunified with their parents. Additionally, almost 60 percent of the preventive child welfare cases that were open before families enrolled in the program were closed after the parents began receiving services. On average, preventive cases were closed within 10 months for KFT families, which was two months faster than ACS's goal of 12 months and significantly faster than the average ACS preventive case. Also, more than 60 percent of KFT families did not experience a subsequent maltreatment report while in supportive housing, and no children were placed in foster care during the pilot.

**California's Bringing Families Home (BFH)** was established in 2016 by state statute and is being implemented in 12 counties. The legislation provided for a one-time state allocation of \$10 million, with a dollar-for-dollar county match. Some counties are

using BFH funding to enhance existing supportive housing programs for families in the child welfare system. For example, in Sonoma County, officials have redesigned their system so that their local Housing Assistance and Permanency Program (HAPP) serves family maintenance cases (cases in which child welfare workers try to maintain children in their homes by providing time-limited supportive services to prevent or remedy abuse or neglect). That leaves the BFH program to focus on reunification cases. This has helped to relieve some of the strain on HAPP and results in providing reunification services to more families. Of the families that have obtained permanent housing through both programs, 69 percent no longer need case management services and have been able to maintain housing stability. Additionally, 61 percent of families have reunified with their children, compared to the county's average reunification rate of 37 percent.

- 1 Hong, S., & Piescher, K. (2012). The role of supportive housing in homeless children's well-being: An investigation of child welfare and educational outcomes. *Children and Youth Services Review, 34*, 1140-1447.
- 2 Rent burden is defined as paying more than 30 percent of household income on rent. In the control group, 34 percent of families experienced rent burden, compared to 11.7 percent of families in the treatment group.
- 3 Fowler, Brown, Schoeny, & Chung. (2018). Homelessness in the child welfare system: A randomized controlled trial to assess the impact of housing subsidies on foster care placements and costs. *Child Abuse & Neglect, 83*, 52-61.
- 4 Rog, D., Henderson, K., & Greer, A. (2015). Family Stability and Child Welfare Involvement among Families Served in Permanent Supportive Housing. *Child Welfare, 94*(1), 189-208.
- 5 Chronically homeless is defined as being homeless for a year or more while dealing with disabling conditions such as poverty, a disability, mental illness, or substance abuse. It also refers to people who experience repeated episodes of homelessness over time.
- 6 Farrell, A. F., Britner, P. A., Kull, M. A., Struzinski, D. L., Somaroo-Rodriguez, S. K., Parr, K., Westberg, L., Cronin, B., & Humphrey, C. (2018). *Final report: Connecticut's intensive supportive housing for families program*. Chicago, IL: Chapin Hall at the University of Chicago.
- 7 During the demonstration, Connecticut tested the effects of a standard supportive housing program and an intensive supportive housing program. Both programs lead to better results than the business-as-usual program; however, the standard supportive housing and the intensive supportive housing program were found to have approximately the same effect, despite the fact that the intensive model was more expensive to administer.
- 8 Rivera, M., & Sullivan, R. (2015). Rethinking child welfare to keep families safe and together: Effective housing-based supports to reduce child trauma, maltreatment recidivism, and re-entry to foster care. *Child Welfare, 94*(4), 185-204.

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