



How Supportive Housing Matters for Families Involved in the Child Welfare System

February 2016

Contents

Overview	1
Supportive Housing	2
“Ms. Johnson”—Supportive Housing (Preservation case, 20 months since enrollment)	2
“Ms. Jackson” -- Supportive Housing (Preservation case, 19 months since enrollment)	2
“Ms. Robinson” —Supportive Housing (Preservation case, 21 months since enrollment)	3
“Ms. Lewis”—Supportive Housing (Reunification case, 17 months since enrollment)	3
“Ms. Clark”—Supportive Housing (Reunification case, 16 months since enrollment)	4
“Ms. Evans”—Supportive Housing (Preservation case, 20 months since enrollment)	4
“Ms. Sanders”— Supportive Housing (Preservation case, 23 months since enrollment)	5
“Ms. Cooper”— Supportive Housing (Reunification case, 13 months since enrollment)	5
Usual Care	6
Ms. Morris – Usual Care (Reunification case, 17 months since eligibility)	6
“Ms. Campbell”— Usual Care (Preservation case, 20 months since eligibility)	6
“Ms. Williams” – Usual Care (Preservation case, 21 months since eligibility)	7
“Ms. Thomas” – Usual Care (Reunification case, 21 months since eligibility)	7
Ms. Mitchell—Usual Care (Preservation case, 23 months since eligibility)	8

Overview

A healthy environment for children starts with a strong family and a home. Without these moorings, children are vulnerable to abuse and neglect, leading to crisis intervention from child protective services. Many families involved in the child welfare system face deep and persistent poverty, depression and mental illness, domestic violence, and drug addiction. These intense needs are often exacerbated by homelessness or unstable housing, which increase financial, mental, and physical stressors on children and parents. Families sleeping in cars, garages, homeless shelters, or doubled up in untenable situations often wind up “in the system” and at risk of dissolution. These families bounce from one social service agency to another, imposing substantial costs to communities, all while their needs remain unmet. Children separated from their families and placed in foster care often grow up to lead troubled lives.

Despite overwhelming data that shows the challenges child welfare families face are complex and difficult to overcome, practitioners and policymakers are searching for solutions. One promising approach is supportive housing, an intervention that combines affordable housing with intensive wraparound services. Supportive housing uses a Housing First model that focuses on providing housing as quickly as possible; it doesn’t push requirements for housing such as sobriety or agreement to participate in services. The supportive services, which focus on long-term housing stability, recovery from addiction, education, and employment, are voluntary and are provided after housing is stabilized. Stabilizing a family’s housing allows them to focus on participating in services rather than worrying about where they will spend the night.

In May 2012, the Department of Health and Human Services (Administration for Children and Families, Children’s Bureau), in collaboration with four private foundations—the Robert Wood Johnson Foundation, the Annie E. Casey Foundation, the Casey Family Programs, and the Edna McConnell Clark Foundation—launched the demonstration. The demonstration provides \$5 million five-year grants to each of five sites across the country—Broward County, Florida; Cedar Rapids, Iowa; Memphis, Tennessee; San Francisco, California; and the state of Connecticut—to provide supportive housing to homeless and unstably housed families who are involved in the child welfare system.

As part of the evaluation of this supportive housing demonstration, the Urban Institute is conducting interviews with families, both those in supportive housing programs and those navigating the services and resources available through their communities’ usual care. These interviews help shed light on how families experience supportive housing, or the lack of housing and services, and how these experiences influence outcomes for both children and parents. These interviews were conducted in the fall and winter of 2015 in all five sites, and the details have been aggregated and modified to protect each family’s privacy while providing a compelling narrative about life at the intersection of child welfare and homelessness. Data from these interviews will be reported in the interim and final evaluation reports.

Supportive Housing

“Ms. Johnson” — Supportive Housing

Preservation family, 20 months since enrollment

After leaving shelter, Ms. Johnson’s family is stable in their apartment and receiving a variety of supportive services.

Ms. Johnson has three children. Prior to supportive housing, she lived in a shelter for two years with her oldest children, who are both under five. About two years ago, the family moved in to a two-bedroom supportive housing apartment and her youngest child was born in that apartment. A few months ago, the family had to move apartments because of a domestic violence incidence involving Ms. Johnson’s previous partner. Ms. Johnson shared that her new neighborhood has allowed her to get away from this past partner and also her family members whom she had financially supported in the past, for example, by purchasing a car and renting an apartment for her cousin, which had severely damaged her credit score. Since enrolling in the supportive housing program, Ms. Johnson has been able to buy a car, enroll her children in subsidized child care, get legal help for her history of domestic violence, obtain budgeting and financial assistance that has raised her credit score, and receive help from a life coach. She has also had steady employment with Verizon and has less than two years left in a program to become a nurse assistant.

"Ms. Jackson" -- Supportive Housing

Preservation family, 19 months since enrollment

After living out of her car, Ms. Jackson’s family is stable in their house, allowing Ms. Jackson to work more regularly to provide for her children.

Ms. Jackson is the mother of four children, whose ages range from two to seven years. Before finding housing, her family struggled with homelessness because Ms. Jackson’s mother would throw her out of the house each time Ms. Jackson was pregnant. During that time, Ms. Jackson and her older three children lived out of her car, the children missed school, and it became more difficult for Ms. Jackson to get to her job at the local coffee shop. The family was referred to supportive housing when Ms. Jackson reported herself to child protective services because she remembered they had once offered her child care. Ms. Jackson and her family like their current house very much--it has three bedrooms, two bathrooms, and a backyard with fruit trees. The neighborhood also has many amenities, including grocery stores, and Ms. Jackson has not seen any drugs or violence. Since moving into the new house a year and a half ago, Ms. Jackson has been able to work more regularly, but as a parent, she is daunted by the number of things she should be able to provide for her children.

“Ms. Robinson” –Supportive Housing

Preservation case, 21 months since enrollment

After a period of frequent moves, Ms. Robinson’s family is stable in supportive housing but struggling with the drug activity and violent crime in the neighborhood.

Ms. Robinson and her family of four moved into their apartment a little over a year ago. Prior to this apartment, they had moved around frequently, staying with her father, uncle, and friends. Now, her supportive housing is close to the things she needs, such as the grocery store and her children’s school and daycare, and she is happy to be in her own apartment. However, there is also drug activity and violent crime in the neighborhood so she doesn’t like the area for those reasons. She worked as a maid at Days Inn before her pregnancy, but now she’s out of work and relies on cash assistance. Her older children, who are both under five, were born prematurely and struggle with behavioral problems in addition to asthma. The children’s father had been helping to support the family financially but is currently in jail. Ms. Robinson’s greatest hope for her children is that they will stay in school.

“Ms. Lewis” —Supportive Housing

Reunification case, 17 months since enrollment

Ms. Lewis was reunified with her children after stabilizing in supportive housing, and her family is currently receiving services such as substance abuse recovery support and other therapy.

Ms. Lewis was incarcerated and lost custody of her children, but after moving to a new town and enrolling in the supportive housing program, she has been reunified with her two younger children who are seven- and five-years-old. Their new home is a townhouse apartment with two stories, two bedrooms and a basement. Ms. Lewis reports that the unit is in good condition and that, on the whole, the neighborhood is good—her work is nearby, there is a bus stop outside her complex and the schools are good. However, in addition to reports of drug use and gun violence in the neighborhood, she says some of the neighborhood kids are too rowdy. Ms. Lewis says that she doesn’t have much trouble with making ends meet—the subsidized rent is affordable, she has food stamps and transportation vouchers, and her son gets social security income. Currently, Ms. Lewis is in recovery for alcoholism and her kids are in play therapy; one son also receives in-school help for his behavioral problems.

“Ms. Clark” —Supportive Housing

Reunification case, 16 months since enrollment

Ms. Clark is living in supportive housing and working to address a number of health challenges to support her reunification with her children in foster care.

Prior to the supportive housing program, Ms. Clark was homeless, struggling with substance abuse, and evicted from substance abuse housing because of continued use. Currently, she lives alone in her second apartment after leaving the first unit because she felt the neighborhood was unsafe. In addition to her drug addiction, Ms. Clark also struggles with a number of health conditions. She has Crohn’s disease for which she delayed treatment for some time, but is currently getting treatment. She has had two heart attacks and needs heart surgery, and struggles with depression and anxiety. She thinks that her health is finally improving some now that she has removed negative influences from her life. Ms. Clark is working on enrolling in a substance abuse recovery program and obtaining a driver’s license so that she can go back to work. Ms. Clark’s children live in foster care, and she shared that her middle child has several behavioral issues.

“Ms. Evans” —Supportive Housing

Preservation case, 20 months since enrollment

Ms. Evans’ family left shelter for supportive housing, where the family’s health is improving and Ms. Evans is searching for work to support her family.

Ms. Evans and her five daughters, whose ages range from eight-years-old to four-months-old, have been living in supportive housing for two years and had previously been in a shelter for just under a year. Since moving into supportive housing, Ms. Evans thinks the family’s physical and mental health has improved, and her daughters’ behavioral and relational problems have disappeared. The father of her oldest children is currently in prison, and Ms. Evans says that the family needs to move before he is released because he is a threat. Her current boyfriend helps pay for the family’s car and some of the children’s doctor bills. Ms. Evans doesn’t pay anything for housing since she’s not currently employed. Her case worker has been very involved with the family and has been helpful to Ms. Evans in her job search and signing up for food stamps.

“Ms. Sanders” — Supportive Housing

Preservation case, 23 months since enrollment

Ms. Sanders was homeless following her experience with domestic violence, but is now stable in supportive housing and working to care for her son and make ends meet.

After leaving her abusive husband, Ms. Sanders was homeless; she rotated between different women’s shelters but didn’t like how the staff treated her, the dirty facilities, or living with so many other women and children. She stayed with a few friends before moving into supportive housing, a one-bedroom apartment that she hopes to stay in for the next three to five years until she can afford a bigger unit. Her apartment is close to grocery stores, schools, her work, and her friends. Her son’s behavioral problems and her custody battle led to the involvement of child services. Her son continues to struggle with severe behavioral problems, for which he takes medication and participates in group therapy. With food stamps, financial support from her son’s father, food pantries, and other services through her caseworkers, Ms. Sanders is able to make ends meet despite having only part-time work as a maid. Despite her challenges, Ms. Sanders has a positive outlook on life and is working with her caseworker to find a better job.

“Ms. Cooper” — Supportive Housing

Reunification case, 13 months since enrollment

After struggling with homelessness and drug abuse, Ms. Cooper was reunified with her children in supportive housing, though she continues to struggle with the unsafe neighborhood.

After being homeless for almost seven years, child welfare became involved with Ms. Cooper’s family when she abused drugs while pregnant with her third daughter. Her children were removed while she went through treatment. Then, with the help of supportive housing, she transitioned from the residential treatment program to a motel, and then to her current apartment, along with her children. Ms. Cooper found the apartment through a friend, after three months of searching. The children’s father still uses drugs and has limited interaction with the children. Although the neighborhood is unsafe because of drug use, has unreliable transportation and has no place for her children to play because of the homeless camps in the park, Ms. Cooper is reluctant to leave because she doesn’t want to lose the housing her family so recently found. She says that it is important to her to show her sons that she is stable and can be there for them, especially her older son who lived with her while she did drugs.

Usual Care

Ms. Morris – Usual Care

Reunification case, 17 months since eligibility

Ms. Morris is living in a crowded apartment in a dangerous neighborhood after struggling with domestic violence and her son's foster care placement.

Two years ago, Ms. Morris moved into her boyfriend's cousin's two-bedroom apartment with her boyfriend, her toddler son from a previous relationship, and her boyfriend's son. The neighborhood is unfriendly and dangerous, and Ms. Morris says there is gun violence and theft. Previously, she lived with her mother and aunt before her mother went to jail and her aunt kicked her out. She and her boyfriend have had several domestic violence incidents, one of which led to her going to jail for two months and her son going into foster care. As a child, Ms. Morris was also in foster care and moved around very frequently. Ms. Morris says that her main expense is rent; she is currently employed and covers other expenses with food stamps and disability income. She says that her housing situation is stressful because living in a crowded space with other people is difficult. She has applied to be on the Section 8 waiting list. Ms. Morris shared that she and her son are close and that her son's health is good, despite his asthma and being overweight. She wishes that she and her son had more space and privacy.

"Ms. Campbell"— Usual Care

Preservation case, 20 months since eligibility

After a period of homelessness, Ms. Campbell found housing with a Section 8 voucher, and is using services like a food pantry and WIC to cover her family's other costs.

Ms. Campbell and her two children moved between a shelter and Ms. Campbell's abusive ex-boyfriend's house before receiving a Section 8 voucher and moving into their own apartment. Ms. Campbell pays a portion of her rent from her child support income, and says her biggest expense is electricity. With the help of the local housing program that referred her to these services, Ms. Campbell uses a food pantry and WIC to cover food costs, has subsidized child care and is applying for a cash assistance program to cover her other expenses. As soon as her daughter is old enough, Ms. Campbell plans on returning to work. Ms. Campbell reports that she likes her neighborhood and neighbors, and the stability of having her own home. Since moving away from her ex-boyfriend and into their own apartment, Ms. Campbell's son's discipline and behavioral problems improved; he is doing well in school and is not afraid to be left alone. For Ms. Campbell, separating from her ex-boyfriend has been difficult, but she is starting to feel better.

“Ms. Williams” – Usual Care

Preservation case, 21 months since eligibility

Ms. Williams and her son are living with another family in a one-bedroom apartment as she struggles to find work with her criminal history record.

Almost two years ago, Ms. Williams was using drugs and her son was placed in foster care for five months. After working through her case plan and reunifying with her son, they found housing through a local housing program. At the end of that program, however, they had to move again and for the last six months have been living in a one-bedroom apartment that Ms. Williams found online. Currently, her friend and her friend’s young children also live in the apartment. Her friend sleeps on the couch and a crib and mattress are squeezed into the living room for the friend’s children. There are a lot of things Ms. Williams doesn’t like about living in her neighborhood and also says the apartment has problems with pests and maintenance. She especially worries about how the housing is negatively affecting her autistic son who already struggles with behavioral issues. With a long criminal history record, Ms. Williams finds it hard to get work despite having some cosmetology training. She supplements the income she gets from food stamps and Social Security by washing clothes and cleaning houses, but she is looking to find employment as a waitress. In addition to the health issues her son faces, Ms. Williams also struggles with asthma, severe back pain, and depression.

“Ms. Thomas” – Usual Care

Reunification case, 21 months since eligibility

Ms. Thomas continues to struggle to pay rent after her children were placed in foster care following a period of homelessness and an incident of abuse.

Ms. Thomas and her husband live in a one story duplex. Because of an incident during which Ms. Thomas threw a wooden hanger at her son, their children do not currently live with them. The only positive thing about the current neighborhood is that it is easier for Ms. Thomas to get to her job. When the hanger incident took place, the family was living in a motel because of a water leak at their apartment. Previously, the children had also been removed for eleven months due to a report of domestic violence in the house. Ms. Thomas has four children. The family’s biggest challenges are financial—Ms. Thomas says they can’t afford rent and that she often skipped meals to make sure the children had enough to eat. Ms. Thomas hasn’t held a job since 2012, but started working part-time at McDonalds two months ago. This job doesn’t pay enough to cover the rent so she is looking for a second job or a different job with better pay. Ms. Thomas receives rent support and food stamps. Her goals are to get her GED and to open a business with her husband.

Ms. Mitchell—Usual Care

Preservation case, 23 months since eligibility

Ms. Mitchell's family is currently stable with the help of her boyfriend, but she worries another health setback could leave them in the crowded housing situation they were in before.

Before finding her current apartment, Ms. Mitchell and her two sons, ten- and nineteen-years-old, had been staying in a friend's house where all three of them shared a small room. During this time her sons were very stressed and had behavioral issues she didn't know how to handle because she couldn't enforce her rules in someone else's house. Ms. Mitchell struggles with health issues and had been hospitalized for a month leaving her sons with no place to stay. That's when child services stepped in. Currently, Ms. Mitchell lives in her own apartment, and money from her son's disability check and her boyfriend pays the rent. She keeps her sons on a strict curfew and thinks they are happy. Her older son has a learning disability but is getting assistance and attending classes. Ms. Mitchell needs to have major surgery soon and is currently trying to prepare to provide for her sons while she is in the hospital. She is worried about the future.