



An Introduction to Supportive Housing for Vulnerable Families

Supportive housing is a combination of affordable housing and supportive services designed to help stabilize people who face complex challenges. Supportive housing has historically been offered to chronically homeless individuals through the homeless system and is recognized as a cost-effective and empirically based solution for long-term homelessness.¹ Supportive housing models can look as different as the communities in which they are located. However all supportive housing includes affordable housing, individualized, tenant-centered services, and property and housing management.

After decades of implementation and research, supportive housing has expanded to serve other populations sometimes identified outside of the homelessness system. In recent years supportive housing has been designed to serve high-need families with children. Specifically, families face multiple, complex challenges including homelessness, child welfare involvement, domestic violence, substance use and mental health issues, as well as histories of complex trauma.

In order to serve families with children effectively, the housing and services should be designed to reflect the needs of at least two generations are in need of support. Supportive housing can produce many positive results for families:

- ***Families Stay Housed:*** Supportive housing is designed to break a cycle of housing instability for families and ensure they remain in permanent housing. This is inclusive of families who exit supportive housing to other permanent housing.
- ***Family Members Improve Their Physical and Mental Health:*** Supportive housing and associated services help families access needed physical and mental health care and improve their health status. Children have access to preventative care, including well-child visits, oral health care and developmental screenings.
- ***Families Increase Their Income and Employment:*** Families increase their income in supportive housing by obtaining benefits and/or employment. In cases in which parents are already employed or receiving all benefits for which they are eligible, they maintain their income.

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- ***Families Are Satisfied with the Services and Housing:*** Each family member feeling *satisfied* with their housing choice and the availability and quality of services available is an important outcome that ultimately affects the quality of life.
- ***Families Have Social and Community Connections:*** Supportive housing helps families to develop connections to their community and build social support networks. Children and their parents may participate in school activities, library events, faith communities or community gardens.

The Role of Supportive Housing Case Management

At the center of any successful supportive housing program is an effective case manager. A case manager in a family supportive housing program can go by many titles, but their mandate is broadly the same – help children thrive by helping parents nurture and support their children and assisting the whole family to increase stability.² The case manager does not provide every service a family needs but helps broker relationships between the family and other service providers in the community. They engage and partner with family members to help them establish goals, coordinate services, and navigate the myriad of public systems that a family touches. Roles and responsibilities of a case manager in a supportive housing project might include:

- Working with a family to create an individualized service plan and assisting the family in meeting those goals, including but not limited to meeting obligations of tenancy in order to maintain housing
- Helping to coordinate mental health/substance use treatment appointments and/or physical health care appointments and supporting tenants' recovery from substance use disorders
- Assisting families in increasing economic security by facilitating access to educational services, employment or vocational services, and/or benefits
- Helping manage crisis
- Supporting parents to strengthen their resilience and knowledge of parenting and child/youth development
- Assisting families to strengthen social connections through the develop of community-building activities such as mothers' groups, family councils, or program participant's groups as well as through linkages to other community opportunities the help parents and

² <http://www.csh.org/wp-content/uploads/2013/11/Practice-Framework.pdf>



youth develop leadership skills (tenant or neighborhood associations, youth groups, parent councils within educational settings, etc.)

- Coaching both parents and their children to develop independent living, communication, and self-advocacy skills

The daily work of a case manager will change depending on not only a family's strengths, needs, and goals, but also on where a family is in the change process. Critical components of a case manager's practice should include engagement, assessment, family-involved teaming, planning/linking to services, advocacy, tracking a family's progress, and making course corrections as needed.

Develop Services Plan with Specific Activities for Children

A broad array of services must be available to help families attain stable housing and work toward recovery and economic self-sufficiency. This should also include age-appropriate services for children across stages of development, from infants and toddlers to pre-school and school-aged children, preadolescents, and teens. Children often constitute the majority of tenants in family supportive housing programs and need developmentally appropriate activities and services. Services specifically needed by children and youth may include academic support, after-school enrichment, recreation, youth development, and counseling.

Best practices when designing services for children include: developing services that counter the unpredictability of crisis and resulting trauma. Services should engage children and parents concurrently, connecting children and youth to activities and services in the broader community, and involving youth in making decisions about the services that are offered. It's important to have someone on the staff that is specific to the children, allowing children to have their own case manager, when needed, separate from the parents.³

Service Design & Delivery

Serving families in supportive housing is guided by certain principles that inform service delivery and design. The agencies and individuals serving families must approach their work as an equal partner in a family's life. Supportive housing case managers should view themselves as an ally, respecting each family member and not only including them in decision-making, but empowering them to set and meet the goals that will keep their children safe and meet the needs of the entire family.

³ Best Practices in Serving Families: http://www.csh.org/wp-content/uploads/2014/02/Families_T_v2.pdf



Many families have been exposed to a range of traumatic experiences over long periods of time. Providers should anticipate symptoms of trauma and be trained in responding with trauma informed strategies that recognize the negative effects of these adverse experiences. To be successful, providers need to be skilled in building trusting relationships through consistent, patient, honest, and unconditional support that allows for mistakes without passing judgment. The experiences of high-need families ó frequent and negative interactions with peers and public systems that have failed them ó make it difficult to relate to and trust others. They typically are approached as problems and are not accustomed to being engaged in a way that focuses on their strengths and assets. Once they believe staff are a source of support and assistance, families are exponentially more likely to engage in services and move forward with plans that move them towards the overall goal of well-being and stability.

Additionally, services for parents and children living in supportive housing are optional. Participation in services is not a condition of tenancy. While services are voluntary for the family, they are mandated on the part of the case manager, who is still responsible for contacting families on a program-prescribed minimum using motivational interviewing and assertive engagement techniques. Supportive housing agencies must ensure that the intensity of case management services is an appropriate response to a family's present needs and circumstances. This means increasing or decreasing the frequency and depth of family contact on an ongoing basis, where the family and providers mutually agree on decisions about service intensity.⁴

Together, housing and effective case management practices help families achieve a level of stability that would not be possible if the two were received separately. ***Supportive housing can keep families together. Children receive the stability needed to reach their potential in school settings.*** Parents receive the support needed to improve their own health and the health of their family. ***Supportive housing is a platform for families to grow together.***

Child Well-Being

In order to effectively serve families that are both in supportive housing and involved with or at risk of becoming involved with the child welfare system, housing and service providers must form positive relationships and alliances with their local child welfare system. These partnerships are critical to effectively meet the needs of families, increase child safety and improve well-being. The people working in these systems share the same goals and need one another's expertise and resources to help families meet their goals.

⁴ <http://www.csh.org/wp-content/uploads/2013/11/Practice-Framework.pdf>



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When child welfare is involved in a family's life, the supportive housing partner faces additional challenges they might not otherwise face. Child welfare systems have mandates and timelines that, when not followed, can have devastating effects on a family. Moreover, the language is different and the principles can at times seem in conflict with a supportive housing approach. For example, a supportive housing provider and a child welfare worker both want parents to reduce the harmful behaviors that result from misusing substances like alcohol or illicit drugs. However, in a supportive housing context, the case manager may focus on helping the parent reduce the harmful behavior through a variety of techniques, whereas the child welfare worker will likely approach substance use from an abstinence-only lens. While these differences are noteworthy, there are opportunities to align practice between child welfare and supportive housing that can result in partnerships that expedite the closure of a CPS case, like the [Family Team Meeting](#). With care coordination and frequent communication, the child welfare worker can leverage the supportive housing case manager's skills and expertise to engage families in services in which they might not participate otherwise.

Conclusion

Supportive Housing is an innovative and proven solution to some of communities' toughest problems, successfully helping homeless single adults and families achieve housing stability. When planning and operating supportive housing for families, the mix and intensity of services must be tailored to the unique needs of each member of the family unit and address the trauma that many of these families have experienced. When the right partners are at the table, *supportive housing can help keep families together. Children receive the stability needed to reach their potential in school settings, parents receive the support needed to improve their own health and the health of their family, and ultimately, families are able to grow stronger together.*

Additional Resources

[Child Welfare and Supportive Housing Resource Center](#)

[CSH Supportive Housing Quality Toolkit](#)

[A Practice Framework for Delivering Services to Families in Supportive Housing](#)