

## Partnerships to Demonstrate the Effectiveness of Supportive Housing for Families in the Child Welfare System: *Lessons from Broward County, FL*

In September 2012, the U.S. Department of Health and Human Services awarded five-year demonstration grants to Broward County, FL, Cedar Rapids, IA, Memphis, TN, San Francisco, CA, and the state of Connecticut to test the effectiveness of supportive housing for particularly vulnerable families involved in the child welfare system.

In addition to providing more than 500 families with supportive housing and wraparound services, the demonstration was intended to strengthen partnerships between child welfare, housing, health care, employment, and other local systems, in order to reduce bureaucratic barriers and improve outcomes for the highest-need families. Targeted outcomes included reducing rates of child maltreatment, out-of-home placements, and overall involvement with the child welfare system.

We spoke with Andria Dewson, Program Director at <u>Kids in Distress</u>, in Broward County, about what they have learned so far, and their next steps. That conversation is summarized here.

What made your community decide to apply for the Supportive Housing for Families Demonstration Program? What were your goals?	<ul> <li>In Broward County, there is a high incidence of families involved in the child welfare system, and unstable housing often lengthens the investigation and reunification process. In applying for the program, our goals were to: <ul> <li>Increase family stability</li> <li>Decrease system involvement</li> <li>Decrease contact with the child welfare system, interventions, and removals</li> </ul> </li> <li>The initial plan was to focus on preventing child removals, but we later decided to also focus on higher-need families that had been in the system for longer periods of time. The final group was split 50/50 between preventing removal and expediting reunification. Along with addressing housing needs, the program was designed to enhance self-advocacy and financial stability.</li> </ul>
As you began your planning process, who were the most important stakeholders to have at the table? What strategies were the most effective in engaging them?	Kids in Distress has a great relationship with the Broward County Housing Authority. They were integral to the process, took a lead role, and served as the biggest champion for the program. They served as a role model by encouraging smaller housing authorities to participate and test different strategies to develop flexible guidelines for addressing the housing needs of the target population. They also provided the majority of vouchers for the enrolled families and participated in ongoing triage meetings. In addition to the relationship with the housing authority, the relationship between housing advocates and the child welfare system has continued to evolve and

	strengthen. The Continuum of Care helped develop criteria and guidance at the beginning of the grant.
How did you design your targeting criteria? Did your criteria evolve over time? If so, how?	<ul> <li>There were minimum requirements from the U.S. Department of Health and Human Services, child welfare agencies, and the community that Kids in Distress wanted to address. To be eligible, families had to meet the following criteria:</li> <li>Extremely low income (30% of Area Median Income)</li> <li>Current experience of homelessness</li> <li>Current or prior child welfare involvement</li> <li>Multiple high needs (e.g. mental illness, alcohol and/or substance abuse, child with a mental health or behavioral problem or disability)</li> <li>As mentioned earlier, the available vouchers were allocated equally to families identified as at risk of having a child placed in out-of-home care, and to those working toward reunification. There were four primary groups within the program:</li> <li>Prevention 1: Child welfare case had begun, but had not necessarily been verified</li> <li>Prevention 2: Child at imminent risk of removal if the family does not enter into this or another local in-home program for families at risk of removal</li> <li>Reunification 1: Child removed from the home within the past 60 days</li> <li>Reunification 2: Child in foster care with a permanency goal of reunification for whom the lack of housing is the remaining obstacle to reunification</li> </ul>
As the 5-year demonstration period comes to a close, what have been some of your most significant outcomes?	The vast majority of the families participating were reunited with their children. The few families who were not able to successfully reunify found other permanent housing solutions, and only two of the families had a secondary removal occur. Children spent an average of 13.9 months in care among families that participated in the program, as compared to the state average of 19-21 months. Over the course of the demonstration period, there was a 100% lease attainment rate and a 93% voucher retainment rate. In addition, the partnership between housing agencies and child welfare has greatly improved, allowing for expanded triage of families and system coordination. Every month that families were enrolling, referrals were reviewed as a team, which allowed buy-in from multiple organizations and allowed the pre-emptive discussion of potential issues. Today, there is still a strong community focus on assisting this target population.
What is the hardest thing you overcame doing this work?	The hardest part of the demonstration project was getting all the different organizations on board with a Housing First approach. Overcoming the concept of 'deservedness' was challenging. This required a mental shift, and while the agencies may have understood the concept behind the approach, that did not always trickle down to the front-line employees who were generating referrals. Initially developing buy-in across both the housing authority and child welfare agency was vital. Before accomplishing that buy-in, it was difficult to identify and enroll sufficient numbers of participants in each of the target groups.

	To find suitable housing for the families, a housing coordinator proactively reached out to landlords to educate them about vouchers and provide a personal contact if issues arose. Families were also consulted on what would be the most convenient locations for them.
What surprised you the most?	Many people involved with the demonstration program were not familiar with the concept of Housing First. They were surprised by how well this approach worked for families and how important it was to meet basic needs before implementing an individualized, family-centered approach.
	The judicial system is critical to the work of child welfare and, for this program, was very willing to get onboard with the process and help families resolve their child welfare cases. Other agencies within the community also went out of their way to provide flexibility and support. It was gratifying to see so many community members invested in the families' successes.
What is your advice to other communities interested in testing supportive housing for child welfare-involved families who are experiencing or at risk of homelessness?	<ul> <li>Our advice:</li> <li>Start the planning process early.</li> <li>Find a champion within each system and let them be your voice.</li> <li>Remember that patience is key.</li> <li>Be flexible and willing to try new things.</li> </ul> It's important to try things that don't always initially feel right to you. "Different" isn't necessarily wrong, and it may be what your community needs.
How are you planning for sustainability after the demonstration ends?	Kids in Distress is pursuing several large-scale federal grants. There is also internal buy-in within the community to continue the program, and some seed money has been set aside for this purpose. There are ongoing negotiations between the child welfare and housing agencies, and we are exploring grants that would allow direct partnerships within the Continuum of Care. There is also the potential for funding from a private community non-profit.
	Going forward, Kids in Distress might focus more on those groups that demonstrated the greatest level of impact (Prevention 1 and Reunification 1), and work to reduce the amount of time families are in the program overall. A shorter timeframe combined with a tailored service plan informed by the families' own decisions about what they need would contribute to high levels of engagement and program participation, because families feel more empowered when they can dictate how involved they want to be. That can be frustrating for the service delivery systems that are used to measuring program utilization and outcomes in specific ways, but families have shown they prefer flexibility and independence. And ultimately, this contributes to the desired outcomes for a family's long-term success.