

Research Brief: CT Implements a Universal Housing Screen in Child Welfare Services

Housing and Child Welfare. Most families in child welfare live in poverty and many experience housing concerns. The lack of safe, stable, and affordable housing can complicate a family's involvement in the child welfare system. Compared to families in unstable conditions, children in stable housing evidence better educational, developmental, and health outcomes, and their parents demonstrate less parenting stress, better health, and greater parenting satisfaction. Housing is but one component of a systemic approach to shoring up vulnerable families, and it may be an important tool for promoting family service engagement. Housing can be a factor in the decision to remove children from a family's care; housing problems can also delay reunifications from foster care. Interventions for families with these "dual vulnerabilities" have not typically been coordinated. Recognizing the need for better integration of these services, Connecticut's Department of Children and Families (DCF) and The Connection, Inc. (TCI) have long partnered to run the Supportive Housing for Families Program known as SHF. Since the 1990s, DCF and TCI have worked with researchers from the University of Connecticut to study SHF, which integrates housing supports and case management for families.

In 2012, the federal Administration for Children and Families (ACF) funded "Partnerships to Demonstrate the Effectiveness of Supportive Housing (SH) for Families in the Child Welfare System." Connecticut is one of five national demonstration sites in this five-year program, and there is a strong evaluation component in the form of a randomized study.

Within CT's Housing and Child Welfare project, families who meet specific eligibility criteria are randomized into one of three experimental conditions: (1) TCI's SHF, (2) TCI's Intensive Supportive Housing for Families (ISHF; an enhanced version of the model, with additional case management intensity, vocational supports, and access to evidence-based interventions), or (3) a Business as Usual control group that receives typical DCF case management without a specific focus on housing. The project was first implemented in the DCF Region 3 of the state (Middletown, Norwich, and Willimantic) with plans to expand.

The Need for a Screening Tool. One important goal of the CT Housing and Child Welfare project is to ensure that every family undergoes housing review early in their child welfare involvement. This enables prompt referral of families with apparent housing problems. To aid DCF workers in assessing housing concerns, the *Quick Risk Assessment for Family Triage* (QRAFT) was created. The QRAFT asks workers to rate families on three housing domains: Current Housing, Housing Condition, and Housing History. Items are scored on a 5-point scale, from 0 (not a barrier) to 4 (severe barrier). Clients with a score of 3 or 4 on any item (significant or severe barriers) are referred for further evaluation of housing needs. Assessment of housing issues, even for diverted or unsubstantiated cases, helps DCF understand and document the needs of a wider array of families (outside of the project).

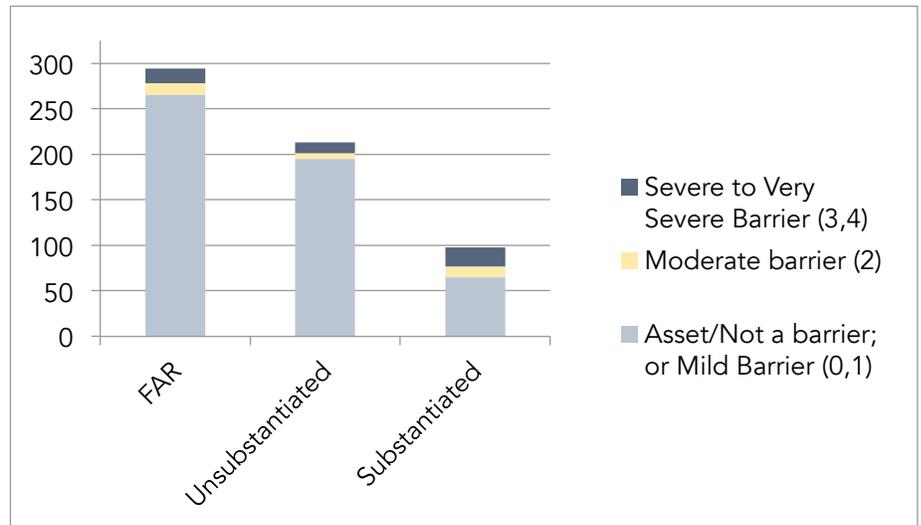
Piloting the QRAFT. Over a three-month period from November 2014 to January 2015, the Investigations Unit of DCF Region 3 completed a QRAFT on 616 families with whom they had contact. As families move through DCF's investigation unit, their cases are determined to be substantiated, unsubstantiated, or referred to Family Assessment Response (FAR; a diversion program for families at low risk). Of the families screened, 98 (16%) were substantiated, 220 (36%) were unsubstantiated, and 294 (48%) were FAR cases.¹ DCF intake workers reported the QRAFT was quick, easy to use, and was a helpful prompt to consider the basic needs of all families.

¹ 4 cases were missing a determination status

Figure 1 below shows the various degrees of housing difficulties across these three groups. Among all the families referred to the investigations unit (substantiated, unsubstantiated, and diverted to FAR), the proportion of significant to severe housing problems was less than 10%. Considering only the children whose child welfare cases were substantiated, the proportion of significant to severe housing concerns is approximately 21%; when unsustainable housing conditions (“moderate barrier”) are considered as well as significant to severe concerns, the proportion of families identified rises to about one-third (33.7%).

Extrapolating Housing Need.

During this pilot in Region 3, the number of referrals in a 3-month period was 616. Annualizing that rate suggests that the year-long number of substantiations would be 2,464. At comparable substantiation and housing risk rates, Region 3 might observe 84 families with open cases and significant/severe housing issues and 132 families with moderate to severe housing concerns.



Although the level of housing challenge might appear modest in the figure, this is but one of six CT DCF Regions, and one of the less densely populated ones. In 2013-2014, DCF² observed 30,577 accepted child abuse reports and allegations and 4,930 substantiations statewide, for a rate of 16% (equivalent to what was observed during the pilot). Applying these housing/homeless risk rates would suggest 1,035 families statewide with substantiated child protective services cases and significant to severe housing problems. An additional 641 families might present with “moderate” (unsustainable) housing concerns. This exercise in extrapolation is useful as it might assist the assessment and allocation of resources with respect to housing and child welfare.

Implications and Recommendations We draw the following from the pilot study:

- 1 - Housing screening can be effective, quick, and easy.** A brief screening for housing assets and problems early in child welfare involvement is possible and useful.
- 2 - There is more to learn.** Collecting information about families as they progress will enable us to understand more about the impact of housing condition and stability on child and family well-being.
- 3 - We recommend** prompt, universal screening of families in child welfare so that efforts to “shore up” their overall functioning will occur in safe, stable homes.
- 4 - Child and family policy needs to address safe, affordable housing as a critical platform for healthy families.** More experience with the QRAFT will help us understand the overlap among housing and child welfare concerns, enable allocation of housing resources, and inform policy to address shortages of safe, affordable housing for families.

For more information: Please visit the UConn CARHD website at www.appliedresearch.uconn.edu or e-mail UConnCARHD@gmail.com. This work is made possible by support from The Connection, Inc., The CT Department of Children and Families, and the Administration for Children and Families, HHS-2012-ACF-ACYF-CA-0538.