

San Francisco's Families Moving Forward Program

Findings of a 5-year randomized study of housing as a platform for child welfare

Context: Homelessness is a national emergency that is particularly acute in San Francisco. In 2012, the Children's Bureau funded five sites nationally to design and evaluate supportive housing models for homeless, child welfare-involved families. The goal of the five-year demonstration was to test a "housing first" approach to safely reduce the need for foster care, increase housing stability and improve child and family well-being.

What we did: San Francisco's Families Moving Forward (FMF) project aimed to reduce the need for foster care among families identified as homeless when investigated for maltreatment. The project was implemented by the San Francisco Human Services Agency (SF-HSA), with project partners at the Housing Authority and Homeless Prenatal Program (supportive housing case management provider).

The project used three main strategies:

 Targeting families early in their child welfare experience so that they could stabilize quickly and address their co-occurring problems, reducing the need for ongoing child welfare involvement.
Offering a mix of housing resources, mostly Family Unification Program (FUP) Housing Choice Vouchers.
Providing housing search assistance and ongoing, intensive support services.

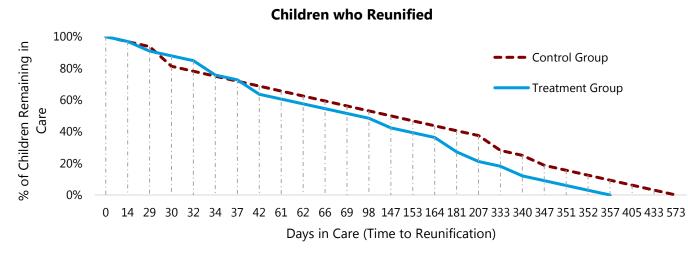
An evaluation team led by Chapin Hall at the University of Chicago studied the effectiveness of FMF using a randomized controlled trial design. Families with in-home (preservation) cases and families with out-of-home (foster care) cases were separately randomized to a treatment group that was offered FMF (n=79) or a control group that received usual service (n=75).

What we found:

Reunification and Preservation. We found limited evidence that FMF improved child welfare outcomes. Among families whose children were in foster care, families in FMF reunified faster than families in the control group (see Figure). Nearly all families in FMF who reunified did so in the first three months. Families in the FMF group with children in care longer than six months were no more likely to reunify than control families. Surprisingly, 85% of all reunifications preceded permanent housing. Among families with in-home (preservation) child welfare cases, families in the treatment group were marginally less likely to have their children removed within the first six months, but the difference diminished by one year. Regardless of case type (preservation or foster care), there was no significant difference between the treatment or control groups in the likelihood of later child welfare involvement.



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Housing. Obtaining permanent housing took an average of 10 months. Nearly one-third of families left the program before being housed. Ultimately, **families in FMF were more likely to become and stay permanently housed than families in the control group**. Families with preservation cases were more likely to secure housing than families whose children were in foster care.

Well-being. Parents in the FMF group showed meaningful improvements in family strength and family functioning, residential stability, social connectedness, and substance abuse. Child well-being trended in the desired direction, but improvements were small.

What it means: The promise of housing, which is central to the housing first approach, was a key element of the program even as it became clear that "housing first" in San Francisco did not mean "housing fast." While case management and the promise of housing may have contributed to reunification and helped some preservation families stay intact, the housing itself could not have. That said, the absence of immediate housing did not prevent a sizable portion of the treatment group from participating in and benefiting from the intervention. Those that persisted in the program were eventually stably housed and experienced improvements in parental well-being.

These **findings call for an approach that accounts for the variation in family needs** through more robust systems collaboration. Collaboration requires specific attention during the earliest stages of program development and well in advance of implementation. Partner roles and responsibilities and processes should be clearly articulated in alignment with the theory of change. Equally important is a robust procedure for sharing information related to case management and to support ongoing monitoring and continuous quality improvement (CQI) efforts.

The Children's Bureau's federal demonstrations heightened awareness about the unique issues homeless families face in the child welfare system. Two years ago, the California Department of Social Services made its first effort to address the needs of this population. Its funding has helped support similar programs in California counties to more successfully serve these families. The FMF project continues to inform a statewide conversation about the role of homelessness in child welfare.

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