

RESEARCH BRIEF

Housing (In)Stability in Child Welfare

PURPOSE OF THE STUDY

The purpose of this study was to better understand the intersection of housing (in)stability and child welfare involvement for families in six Minnesota counties. We also examined the housing status of families by type of child welfare interventions received and the characteristics of families receiving intensive housing and child welfare interventions.

BACKGROUND & PURPOSE

According to Casey Family Programs (2021), 84% of children enter foster care for reasons unrelated to child abuse, including inadequate housing. Lack of stable housing is often a precipitating factor for a family's involvement with the child welfare system as well as a significant barrier to ending a family's involvement in the system (Fowler et al., 2013). Crucially, Native American and Black families are far more likely to experience homelessness and child welfare system interactions compared to children of any other race (Corporation for Supportive Housing, 2020).

For families at the intersection of child welfare involvement and unstable housing, safe, affordable housing paired with services can support better child welfare outcomes by keeping families safely together and promoting timely reunification of children and families (Pergamit et al., 2019). Yet, the disconnect between homelessness interventions and child welfare systems often prevents families from accessing housing resources and support services in an effective and coordinated manner.

To better illuminate the intersection between housing (in)stability and child welfare involvement, and to inform policies and practices to better support families, this study addressed the following research questions:

- 1. What is the housing status of families before, during, and after child welfare involvement?**
- 2. What is the housing status of families by the type of child welfare interventions received?**
- 3. What are the characteristics of families receiving intensive housing stability and child welfare interventions? How do the characteristics relate to family housing stability?**



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FOR FAMILIES AT THE INTERSECTION OF CHILD WELFARE INVOLVEMENT AND UNSTABLE HOUSING, SAFE, AFFORDABLE HOUSING PAIRED WITH SERVICES CAN SUPPORT BETTER CHILD WELFARE OUTCOMES BY KEEPING FAMILIES SAFELY TOGETHER AND PROMOTING TIMELY REUNIFICATION OF CHILDREN AND FAMILIES.

METHODS

All parents and children who were involved in child protection or the Parent Support Outreach Program (PSOP) from 2019-2021 in Hennepin, Scott, Carver, Benton, Sherburne and Ramsey counties were included in the study sample. Through Minn-LInK, administrative data from the Minnesota Department of Human Services and Minnesota's Homeless Management Information System were integrated to provide information on housing stability, child welfare involvement, and receipt of public assistance.

FINDINGS

Just over half of all families were stably housed prior to, during, or after child welfare involvement. Families who received intensive child welfare services were more likely to have been homeless or unstably housed prior to, during, and after child welfare involvement than families who received only one type of child welfare intervention. Families in which one or more parents/guardians identified as Black or American Indian had greater housing instability, particularly homelessness, compared to other families.

All parents and children who were involved in child protection (CP; new or ongoing maltreatment case [family assessment or investigation] or out-of-home care [OHC]) or the Parent Support Outreach Program (PSOP) from 2019-2021 in Hennepin, Scott, Carver, Benton, Sherburne and Ramsey counties were included in the study sample.

Through Minn-LInK, administrative data from the Minnesota Department of Human Services (DHS) and Minnesota's Homeless Management Information System (HMIS) were integrated to provide information on housing stability, child welfare involvement, and receipt of public assistance. We assessed housing stability for families involved with child welfare between 2019-2021, two years before the start of their first CP or PSOP within the study observation period, and two years after the end of their last case within the study observation period. Family housing stability was identified using information from the CP, OHC, HMIS, and DHS public assistance datasets. DHS public assistance data were used to determine whether families received assistance from Minnesota Family Investment Program (MFIP), Supplemental Nutrition Assistance Program (SNAP), General Assistance, Emergency Assistance, Childcare Assistance, and Diversionary Work Program.

Family housing stability was classified into five categories: homeless; unstably housed; living in permanent housing with or without supports (PH/PSH); stably housed and receiving economic public assistance; and stably housed without economic public assistance (Figure 1).

Family Housing Stability Before, During, and After Child Welfare Involvement

Just over half of all 25,595 families identified in this study were stably housed, with or without economic support, prior to (54.7%), during (56.4%), and after child welfare involvement (60.5%). However, nearly half of families (43.5%) were homeless, and approximately a quarter of families (23.5%) were unstably housed *at some point* during our study observation window.

Approximately one-third of families (29.6%) experienced homelessness *prior to* the start of their child welfare involvement (Figure 2), and the prevalence was similar for families during and after child welfare engagement. The proportion of families who were unstably housed slightly increased from 10.2% to 13.4% when child welfare engagement began. However, the prevalence of housing instability decreased to 5.8% after child welfare involvement. A small but consistent minority of families (5.0-5.9%) were living in PH/PSH in each observation period.

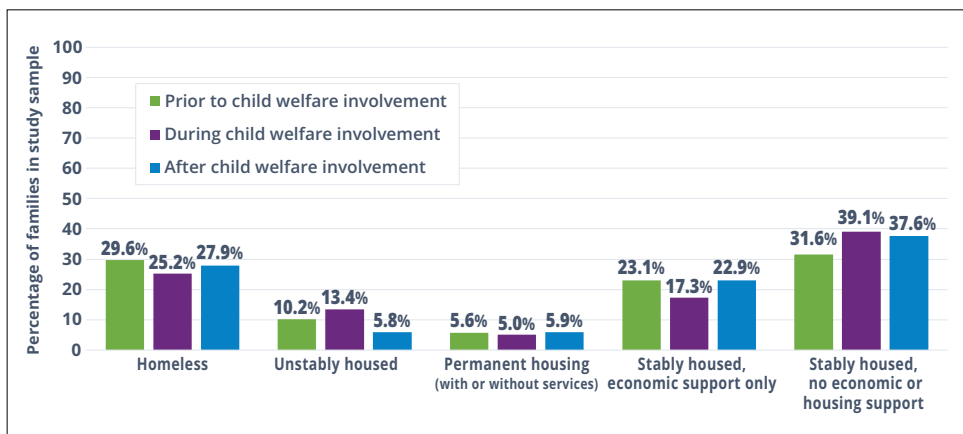
Family Housing Stability and Types of Child Welfare Interventions Received

The majority of families (55.9%) were only involved in CP assessment or investigation; one-fifth of families (19.0%) participated only in PSOP; and a similar proportion (19.9%) received CP case management. A small number of families (1.9%) received intensive child welfare services, defined as participation in PSOP, CP assessment/investigation, *and* CP case

Figure 1. Housing Stability Classifications

Homeless	Living in an emergency shelter, day shelter, hotel/motel, with family/friends, or in another place not meant for habitation
Unstably Housed	Living in a hospital, treatment or detox facility, or nursing home, jail, prison, or juvenile detention center or in conditions which jeopardize housing stability, such as paying more than 50% of income on rent.
Permanent Housing (with or without supports)	Living in permanent housing in which assistance and/or supportive services may be provided to help families live independently (including rapid rehousing)
Stably Housed with Economic Support	No indication of homelessness, housing instability, or permanent housing AND receiving public economic supports
Stably Housed without Economic Support	No indication of homelessness, housing instability, or permanent housing and NOT receiving public economic supports

Figure 2. Family Housing Stability Prior to, During, and After Child Welfare Involvement



management. Families who received only one type of child welfare intervention were more likely to be stably housed than families who received intensive child welfare services. For families receiving CP case management, the prevalence of stable housing decreased during child welfare engagement but increased after child welfare engagement ended. Rates of homelessness were high among families who received CP case management or intensive child welfare services.

Overall, families who received intensive child welfare services, including CP case management, were more likely to have been homeless or unstably housed prior to, during, and after child welfare involvement than families who received only one type of child welfare intervention. Roughly two-thirds of families with one type of child welfare service were stably housed with or without economic support before, during, and after receipt of child welfare services, and just under one-third were experiencing homelessness or were unstably housed. These proportions were reversed among families who received ongoing CP case management; approximately two-thirds of these families were homeless or unstably housed before, during, and after their child welfare involvement. See Supplemental Figure A for additional details about the trajectory of housing stability by child welfare interventions.

Characteristics of Families Receiving Intensive Housing Stability and Child Welfare Interventions

Approximately one in five families received intensive housing interventions (IH interventions; 21.3%) or intensive child welfare interventions (ICW interventions; 22.0%). IHS interventions included permanent housing (with or without supports), and emergency shelter. Intensive child welfare interventions included on-going CP case management and out-of-home care services (OHC). Just over 8% of all families received both IH and ICW interventions.

Families with a teenaged parent or guardian, young children (aged 5 or younger), a parent/guardian who identified as Black or American Indian, or a family member with a disability were more likely to have received IH and/or ICW interventions (Supplemental Table A). Nearly half of all families had a household member with a documented high-level disability. An even larger proportion of families who received intensive interventions had a household member with a disability; approximately three-quarters of

families receiving IH or ICW interventions had a family member with a disability, as did 87.3% of families who received both IH and ICW intervention. Chemical dependency and adult mental illness were the most common forms of disability among families with intensive intervention services.

Two-thirds of families who received IH interventions or both IH and ICW interventions had at least one parent or guardian who identified as Black, compared to 44.8% of all families in the study sample (Supplemental Table A). Families with a caregiver who identified as American Indian were also more likely to receive intensive child welfare interventions rather than preventive child welfare interventions. For instance, families in which one or more caregiver identified as American Indian were less likely than other child welfare-involved families to receive PSOP services; 26.1% of all families and 18.4% of American Indian families had PSOP involvement (Supplemental Table B).

Families in which one or more parents/guardians identified as Black or American Indian had greater housing instability, particularly homelessness, compared to other families (Supplemental Table C). Across the three child welfare involvement periods (prior to, during, and after child welfare involvement), approximately half of American Indian families were homeless, whereas roughly a quarter of all families were homeless during the same periods. The prevalence of homelessness was also high among families in which one or more caregivers identified as Black. However, homelessness among Black families decreased slightly during and after child welfare involvement. Prior to the start of the family's involvement with child welfare, 41.4% of families with one or more Black caregivers were homeless, compared to 33.4% during child welfare involvement and 37.5% after child welfare involvement ended.

Conclusion

This study examined the intersection of families involved with child welfare and homeless systems in six Minnesota counties. Study findings show an opportunity to more deeply connect housing resources and supports to families receiving child welfare services (particularly through CP case management) so that housing stability can either be maintained or families supported to access stable housing. With *just over half* of all families having and maintaining stable housing before, during, and after child welfare involvement, we can look to increasing housing and service interventions to meet the needs of the families that are cycling through unstable housing situations and homelessness.

We also see that families receiving homelessness and child welfare services that include young parents, family members with a disability, and young children face increased risks to housing stability. This is a group of families for which tailored housing and service programs can make a significant difference.

Families are more likely to experience negative child welfare outcomes, such as separation or delayed reunification, when the family is experiencing homelessness or is unstably housed (Fowler et al., 2013). Our findings indicate that families who are homeless or unstable before receiving child welfare interventions, are likely to remain homeless or unstably housed during and after child welfare interventions. This highlights the need for systemic approaches to connecting families to housing resources in a timely way, as prior research shows that stable housing can make a meaningful difference for families.

The findings from this study further highlight the fact that Black, Indigenous, and other families of color are more likely to experience homelessness, less likely to receive preventative (PSOP) child welfare services, and are instead more likely to receive intensive child welfare interventions. Our housing and service interventions must be designed to meet the specific cultural and family needs of Black and Indigenous families in Minnesota while decreasing bias in our approaches to supporting children and their families.

The findings reinforce the urgent need to embed and scale tools and practices that identify family housing instability as soon as possible within systems developed to support families and encourage housing stability discussions at regular intervals when working with families. These tools and practices should create seamless connections and referrals to appropriate housing supports and resources, with a focus on families most impacted by these systems. Ensuring both capacity to and accountability for multi-agency collaboration and alignment will be critical to ensure that families are connected to adequate and timely housing resources when housing stability needs are identified.

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Suggested citation: Johnson, S., Piescher, K., Lindstrom Rhea, L., & Stetzel, A. (2024). *Housing (In)Stability in Child Welfare* (Minn-LInK Brief No. 66). Center for Advanced Studies in Child Welfare, University of Minnesota. https://cascw.umn.edu/portfolio_tags/minn-link/.

Manuscript citation: Johnson, S., Piescher, K., Lindstrom Rhea, L., & Stetzel, A. (2024). *Housing (In)Stability in Child Welfare* [Manuscript in preparation].

Funding & Other Acknowledgements: The authors thank the Sauer Family Foundation for the financial support required to conduct this research. The authors also thank CSH staff, Amy Dorman, participating counties, and those professionals who contributed their insights and ideas regarding implications and recommendations.

LIMITATIONS

While definitions of unstable housing and homelessness were derived from multiple sources of information, they relied solely on documentation in formal service system data. Situations in which families were doubled up or living in places unfit for habitation were not available, resulting in an undercount of experiences of homelessness and unstable housing. We were not able to include housing voucher information which we know is a resource utilized by many families. In addition, it remains unknown what services were provided to families through the child welfare system and whether those were effective in supporting more stable housing for children and families as a result of their child welfare intervention.

The Center for Advanced Studies in Child Welfare (CASCW) is a resource for child welfare professionals, students, faculty, policy-makers, and other key stakeholders concerned about child welfare in Minnesota. **Minn-LInK** is a unique collaborative, university-based research environment with the express purpose of studying child and family well being in Minnesota using state administrative data from multiple agencies.

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