

Doctoral Dissertation Defense



Presented by Lindsay Westberg, M.A.

Long-Term Child Welfare Outcomes for Families Provided Supportive Housing: Lessons from a Model Program

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Advisory Committee

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The Supportive Housing for Families (SHF) program in Connecticut is the oldest established supportive housing program for families involved in the child welfare system. Since 1998, this program has served families who have been struggling with homelessness or unstable housing, providing them with housing as a foundation for engaging them in the other supportive services that they need. Although the program's short-term effectiveness in improving child welfare outcomes has been documented, this is the first study to examine longer-term outcomes. We were able to track family outcome data for an average of 11.2 year after admission. After starting SHF services, the majority of families (55.1%) did not have any subsequent substantiations of abuse or neglect or subsequent child removals (79.3%) for the observable time period. For families with a subsequent substantiation or removal, the average length of time to the first incident was 3.4 years and 3.8 years after SHF admission, respectively. Very few SHF families (1%) had a subsequent termination of parental rights. This study also compared child welfare outcomes based on the era that families were receiving SHF services, whether they engaged with and completed SHF services, and family characteristics at admission. Differences between these subgroups were assessed for time to first substantiation, time to first removal, total substantiations, total removals, and total days in out of home care. Significant differences were discussed in the context of when and for whom the SHF program may have been most beneficial, although causation could not be assessed in this exploratory study. Results serve as a starting point for understanding the effects of the intervention on child welfare status of families over time. This study also helps highlight areas where targeted work may be warranted to help prevent particular groups from experiencing future child welfare involvement. Implications for practice, study limitations, and suggestions for future research were discussed.