Family Supportive Housing Program Annual Report: State Fiscal Year 2022





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Program Overview

The Family Supportive Housing (FSH) Program provides intensive case management and service coordination to homeless families with children, following evidence-based practice for housing families with complex needs and multiple-systems involvement¹. The program's goal is to reduce the incidence and duration of homelessness through supports for families as they transition to and sustain permanent housing over time. Service coordination and case management focus on the root causes of a family's homelessness; promote resiliency for parents and their children; and help households build financial capability. FSH staff take a holistic, two-generation approach using nonjudgmental, positive, and trauma-informed communication and engagement in their support of families. The FSH program² is a key component of ending family homelessness in Vermont by strengthening and supporting families with complex needs, increasing housing stability and reinforcing accountability.

The Department for Children and Families (DCF) Office of Economic Opportunity (OEO) administered Family Supportive Housing funding at nine community-based providers in FY 2022:

- Winston Prouty Center in Brattleboro
- Committee on Temporary Shelter (COTS) & Howard Center in Burlington
- Homeless Prevention Center in Rutland
- Upper Valley Haven in Hartford
- Northeast Kingdom Community Action (NEKCA) in St. Johnsbury and Newport
- Family Center of Washington County in Barre
- Sunrise Family Resource Center in Bennington
- Springfield Area Parent Child Center (SAPCC) in Springfield
- Pathways Vermont in St. Albans

These community-based service providers employed 19 Service Coordinators, who provided customized home-based case management; financial empowerment coaching;

¹ A Practice Framework for Delivering Services to Families in Supportive Housing, https://www.csh.org/wp-content/uploads/2013/11/Practice-Framework.pdf.

² For more detail about program design and eligibility see the <u>Family Supportive Housing Provider Manual</u>.

life skills support and referrals; tenant education; parent and child resiliency support; and support recovery and treatment. FSH Service Coordinators align and coordinate services with existing Agency of Human Services programs and initiatives. FSH Service Coordinators support enrolled families for a duration of time that is appropriate for each family, usually at least two years, and have the flexibility to exit families and/or continue necessary support as appropriate. Each Service Coordinator maintains a caseload of 12 to 15 families.

State Fiscal Year 2022 Highlights

COVID-19 continued to impact Family Supportive Housing in a variety of ways during this past year, and many of the results in this report can be understood through the lens of the pandemic. As the State of Vermont struggles with housing across a continuum of needs, the families served by FSH are often disproportionately impacted due to a lack of resources, landlord references, lack of available housing, and limited support networks. In every area of the state, FSH providers are identifying significant concerns in finding available rental housing for the families they are supporting. This impacts the families, who live instead in emergency housing, staying in unsafe or doubled up situations, or experiencing literal homelessness outdoors, and is also a stress and challenge to the organizations and support staff trying to help them accomplish this goal.

SFY 2022 Results at a Glance³

Family Demographics

- ➤ Total Families enrolled during the SFY 2022 Year: 368
- ➤ Total Adults enrolled during the year: 492
- ➤ Total Children enrolled during the year: 693
- ➤ Total Families exiting the program during the year: 121
- ➤ Total Families active in the program at year end: 247

Housing Stability

- ➤ 68% of active families stably housed
 - o 87% of stably housed families are in good standing with their landlords

Child Safety

- > 90% of active families have children placed in-home
- > 30% of families had an open case with DCF Family Services at enrollment
- ➤ 19% of enrolled families had an open DCF case with Families Services at the end of the year
- ➤ 94% (458) of enrolled children are up to date with pediatric visits

Engagement

> 90% of active families participated regularly in case management

Financial Empowerment

- ➤ 43% of active families increased their Financial Capability Score
- 35% of active families had savings at year end

³ All percentages in this report based on 247 families active at year end, unless otherwise stated.

Analysis of 2022 Results

The FSH program measures performance in several key areas including:

- Housing stability
- Family engagement
- Financial wellness
- •Child safety
- Adult health and wellness

Housing Stability



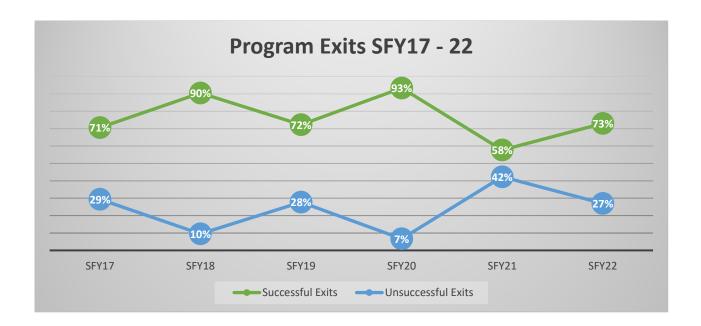
At the end of FY 2022, 68% (167) of active families were stably housed. 28% (68) of families were homeless and searching for housing, and 4% (12) of families were housed but considered at risk of homelessness. 87% (145) of housed families were reported as being in good standing with landlord, consistent with the prior year. FSH providers use a wide range of financial supports to help families find and retain stable housing including rapid re-housing subsidies, Housing Choice vouchers, Family Unification vouchers, and more. Once housed, the majority of FSH households are living in affordable housing or receiving some type of rental assistance.

FSH saw a decrease in the percentage of active quarter four families who were stably housed from FY 2020 to 2022 and a corresponding increase in the share of families experiencing homelessness. Contributing factors include the impact of the COVID-19 pandemic on the housing market as well as the continuation of the DCF Emergency Housing/General Assistance program and the DCF Transitional Housing Program. The historically low apartment vacancy rates throughout the state make it more challenging than ever to move from homelessness to housed. The average length of time between enrollment in services and rehousing or stability has increased, for example, most households in the Housing Opportunity Grant Program spent over 5 months in Coordinated Entry during SFY2022 before stabilizing their housing.

A recent struggle our team has faced is supporting families in finding and maintaining housing. This is not a new struggle in this line of work, but we have seen a housing shortage like no other due to COVID, and it does not seem to be abating. Finding housing for families who are unhoused is difficult, and sadly we see a lot of discrimination based on having a voucher. Even without flagrantly being told by potential landlords that they do not accept vouchers (which we have been), we often see pricing rising well above what vouchers can utilize. For families without vouchers, this has been an issue as well, as income and housing costs are so deeply misaligned. Even for clients who are already housed, landlords have so many renters to choose from, and we're often seeing non-renewals of leases for our families, which is heartbreaking. It's genuinely been a struggle.

From Pathways Vermont Narrative Report, Fourth Quarter, Fiscal year 2022

Exits



In the fourth quarter of SFY 2022 22 families exited FSH. Of these families 73% (16) exited successfully while 27% (6) exited unsuccessfully, a significant improvement over last year.

Family Engagement

In Q4 FY 2022 90% (223) of active families participated regularly in case management, compared with 91% (232) in FY 2021. 95% (243) of active families actively engaged with service providers at least once during the fiscal year.



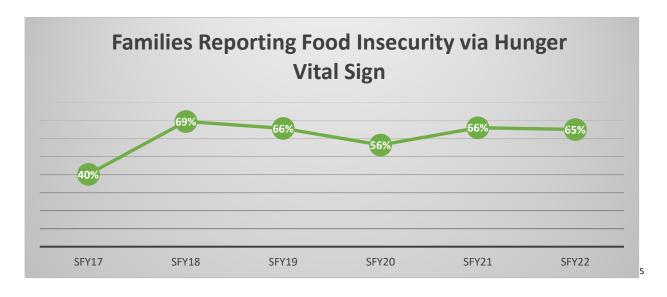
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Providers throughout the state reported challenges in engaging clients over the past few years due to continued challenges in the transmission of COVID-19 and subsequent quarantines, childcare challenges, and agency turnover/openings. A return to in-person service delivery as the priority is hoped to address this for the coming year to reach prepandemic levels of engagement.

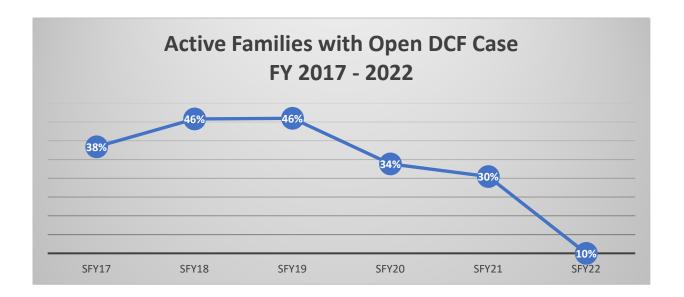
⁴ Graph based on measure "Families regularly participating in case management and program meetings active Q4"

Child Health and Safety

In FY 2022, 92% (340) of families did not have children placed out of the home. 10% (25) of active families had an open DCF case at year end, continuing the downward trend that has been seen since FY 2017. 94% (458) of children active at the year end were up to date with pediatric well visits, compared with 91% (445) in SFY 2021. 65% (162) of families active at year end reported experiencing food insecurity compared with 66% (169) in SFY 2021.



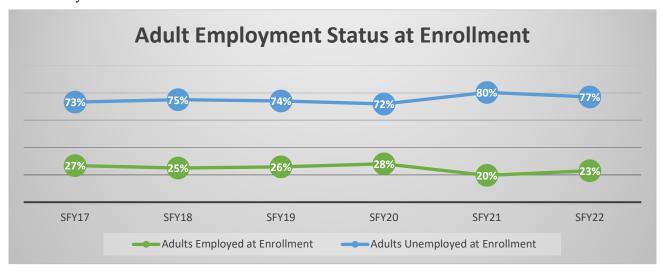
⁵ As measured by the Hunger Vital Sign. <u>The Hunger Vital Sign™ - Children's HealthWatch</u> (childrenshealthwatch.org)



The continuing downward trend of active families with open DCF Family Services cases will need to be explored. It may be attributed to FSH services supporting family and child wellbeing or that fewer families involved with DCF Family Services are being enrolled in FSH. It will also be important to continue to evaluate if the most acute families who are also involved with DCF are accessing crucial services such as FSH to support continued in-home placement, or reunification, especially as the impact of the opioid epidemic continues to disproportionately impact these families.

Financial Wellness

In FY 2022, a total of 492 adults were enrolled in FSH. 77% (377) were unemployed at enrollment, and 23% (115) were employed at enrollment. Of the 377 adults who were unemployed at enrollment, 13% (50) secured employment by the year end, 5% (21) entered a job training or education program, and 30% (114) secured other income. 60% (70) of active employed adults maintained employment for 6 or more months during the fiscal year.

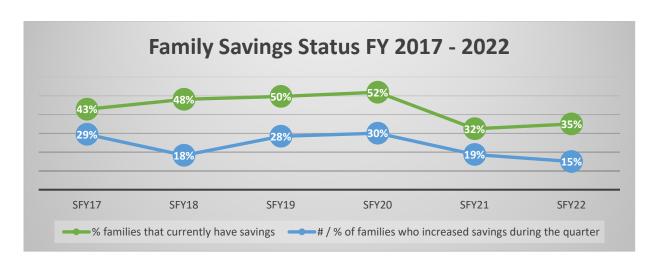


In FY 2022 30% (75) of active families reported having savings at year end and 15% (38) of families reported increasing savings during Q4 compared with 19% (48) of families who increased savings last year. 48% (121) of active families had access to mainstream banking⁶ services at year end. 42% (106) of active families reported an increased financial capability score⁷. Given the challenges that FSH families face, these improvements in financial capability are laudable and will support long-term economic security.

⁶ Defined as access to a FDIC or NCUA insured account.

⁷ The financial capability score measures financial knowledge and wellbeing from the perspective of the family. <u>Financial Capability Scale (FCS) – Financial Coaching Strategies (wisc.edu)</u>





Acknowledgements

The Vermont Office of Economic Opportunity thanks the FSH program staff who, for a third year in a row, not only rose to the challenge of serving our most vulnerable during an often-endless feeling public health emergency, but also began to adapt services and support as many of the COVID era resources began to come to an end. Your perseverance in the face of continued uncertainty and your adaptability in finding ways to deliver these critical services is so appreciated.