

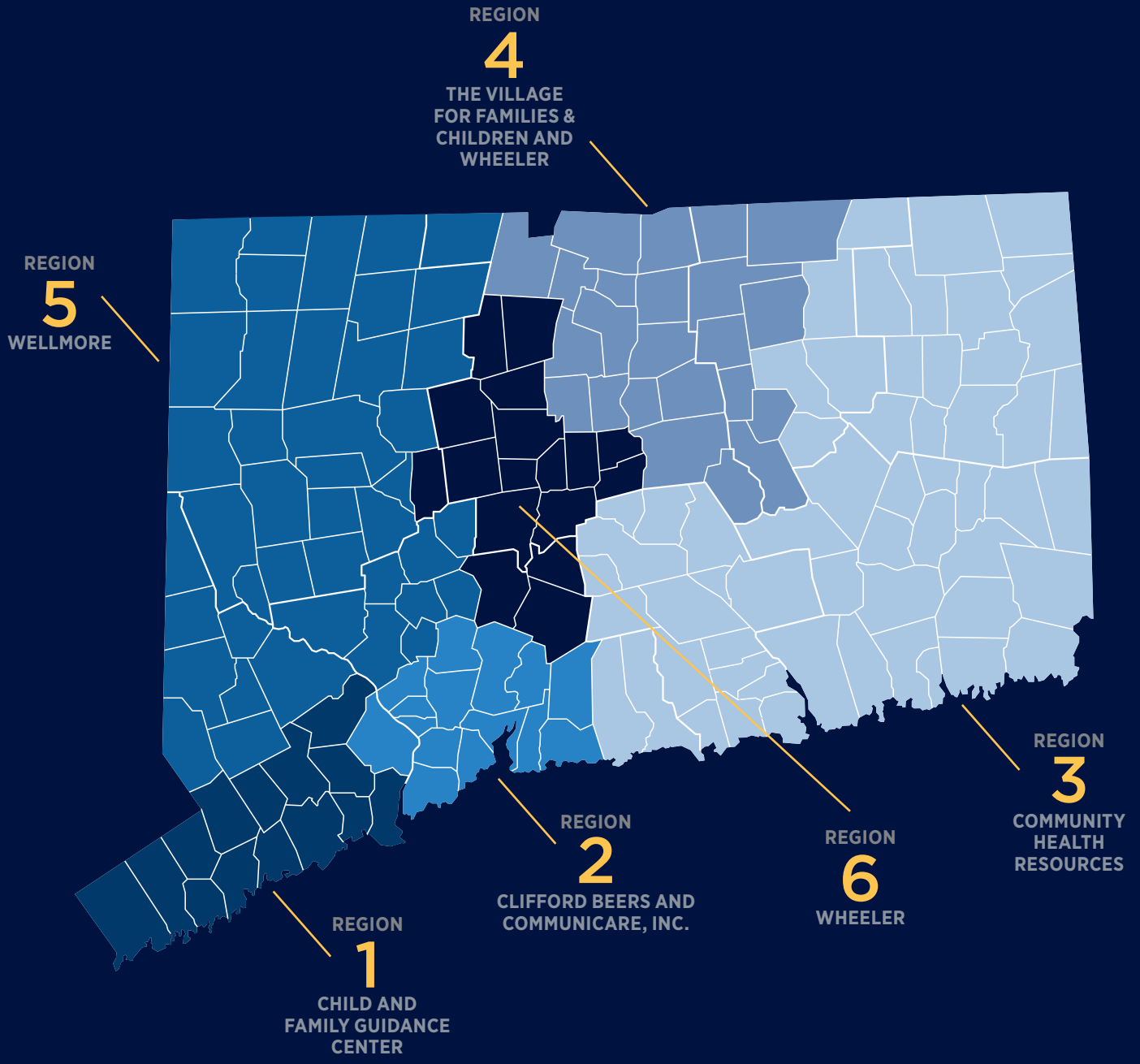


Community Support For Families

CELEBRATING 10 YEARS

UConn
SCHOOL OF SOCIAL WORK

Regions



Community Support for Families

Recognizing that a one-size-fits-all approach does not serve children and families well, the Connecticut Department of Children and Families (CT-DCF) established a two-track system to allow for more flexibility in addressing child maltreatment reports. In March 2012, the Department launched its Family Assessment Response (FAR) track, a strength-based, family-focused approach to working with CT-DCF-involved families with low- and moderate-risk cases. FAR works to identify families' strengths and needs and help connect them with services and supports in the community. The purpose of this approach is to keep children and families from becoming re-involved with CT-DCF by engaging and helping families identify solutions to their problems and working closely with community programs and organizations.

As part of this effort, CT-DCF established the Community Support for Families (CSF) program for families that are discharged from FAR but are still in need of services. CSF is a voluntary, family-driven program that helps families strengthen natural and community support systems to maintain safe and healthy home environments with the goal of reducing the risk of child abuse and neglect. By engaging

families in their own service planning, CSF works to build upon individual strengths to connect families to appropriate prevention, intervention, and support services. CSF builds teams of support from within the community, arranges for services, coordinates care, provides follow up, and advocates on behalf of children and families.

CSF is administered throughout Connecticut by seven community partner agencies: Child and Family Guidance Center (CFGC); Clifford Beers; CommuniCare, Inc., Community Health Resources (CHR); The Village for Families & Children; Wellmore Behavioral Health; and Wheeler. These agencies serve the six Connecticut Department of Children and Families service regions.

The Performance Improvement Center at the UConn School of Social Work has partnered with CT-DCF since the launch of FAR and CSF to monitor program implementation and evaluate program outcomes. The data from this evaluation is used to enhance practice and inform policy and practice.

COMMUNITY SUPPORT FOR FAMILIES APPROACH:

- Develop individualized, family-focused care plans rooted in families' strengths, needs, culture, and experiences.
- Establish links to community supports and services for food, clothing, shelter, mental health and/or substance use treatment, and other services.
- Work with families to identify and mobilize natural supports (e.g., their church or a neighbor).
- Provide information and/or links to services on parenting and child development or other interventions to increase safety for children.
- Support parents' connections with their children's school community.

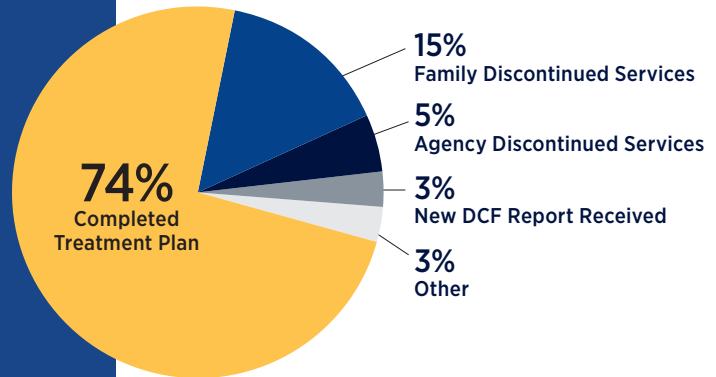
A Decade of Helping Families

Since 2012, CSF has served over 15,550 of Connecticut's most vulnerable families. Families served were 35% white, 21% Black, 40% Latino, and 4% other races/ethnicities. Most of the families (67%) were single-parent families. The average age of the children was 8. Most of the families served by CSF (91%) came to the attention of CT-DCF with neglect allegations, which research has found are often linked to poverty and financial instability. About a quarter of the families (27%) had a primary caretaker with a current or past substance misuse problem, and 17% had a child under two years of age. Thirty-seven percent (37%) had a child with a vulnerability such as a complex medical issue, a physical disability, a developmental disability, a history of delinquency, a mental health issue, or a behavioral problem. The average length of service in the program was four months.

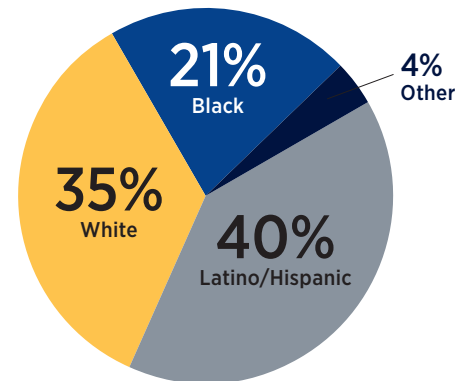
Poverty is a critical issue for the families CSF serves — 78% need assistance with acquiring basic needs such as food, shelter, and clothing. Over half of the families need assistance with accessing social support systems. Other top needs include parenting skills, coping skills, and improving household relationships.

Results of the 10-year evaluation indicate that the program is working as intended, families were satisfied with the services they received, and the lives of families served by CSF had improved on several factors. Overall, 97% of families served by CSF agreed that their problems improved and 99% agreed that they know how to access community resources. Caregiver unemployment decreased 19% from intake to discharge. The Protective Factors Survey, an instrument that measures family functioning/resiliency, social support, concrete support, nurturing and attachment, and knowledge of parenting/child development, indicated that there was statistically significant improvement from intake to discharge on all domains with the highest rate of improvement in concrete services. Statewide, 73% of families that received CSF services did not have a subsequent report and 93% did not have a substantiated subsequent report of child maltreatment.

Reason for Discharge



Race

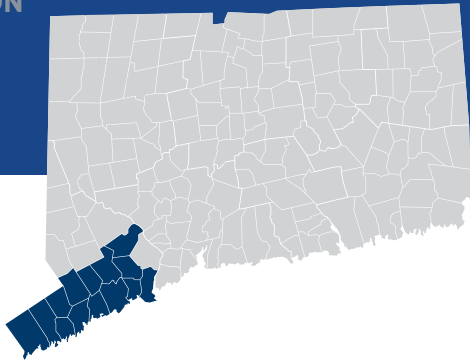


FAMILIES SERVED

Region 1	CFCG	2,403
Region 2	Clifford Beers	989
	CommuniCare, Inc.	1,210
Region 3	CHR	2,933
Region 4	The Village	1,931
	Wheeler	1,668
Region 5	Wellmore	2,449
Region 6	Wheeler	1,967
STATEWIDE TOTAL		15,550

TOP 5 NEEDS ASSESSED

Basic Needs & Resource Management	78%
Social Support Systems	47%
Parenting Skills	33%
Household Relationships	30%
Coping Skills	30%



CFGC uses creative and flexible thinking to provide unique solutions that help families flourish on their own.

Child and Family Guidance Center

The Child and Family Guidance Center (CFGC) located in Bridgeport, Connecticut, was founded in 1925 to provide “free mental health care in Bridgeport several days each week.” CFGC currently offers 16 programs including counseling services, family support services, and youth crisis support. They are the Community Partner Agency that serves CT-DCF Region 1 for the Community Support for Families Program (CSF).

Through CSF, CFGC has served over 2,000 families since March 2012. They have been able to connect families with community resources to promote stable environments and empower families to advocate for themselves and their needs. Access to basic needs has been the most prevalent need of the CSF families served by CFGC over the past decade. CFGC uses the wraparound approach to help families expand their networks to become self-sufficient. CFGC is also very proud of its work helping undocumented families navigate complicated systems to access resources.

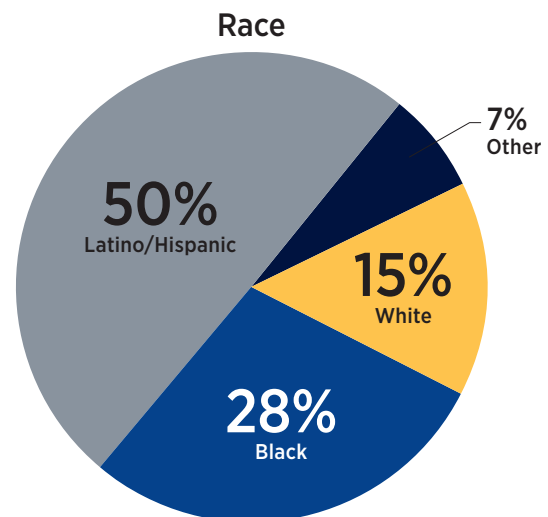
In CFGC’s service area, families encounter many issues such as unstable housing, limited access to basic needs, limited mental health support for parents and children, and limited financial assistance and unemployment services. Through CSF, CFGC has helped the families it serves access social support systems, develop parenting skills, and improve household relationships.

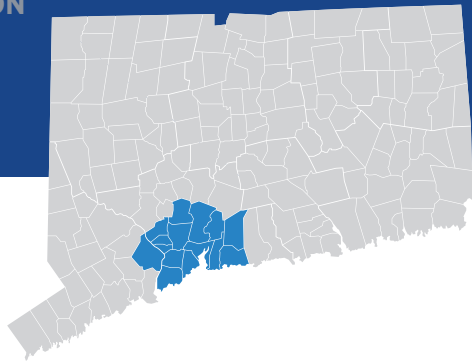
CFGC is proud of its talented team that provides many skills to help families in the region. CFGC staff speak multiple languages and come from multicultural backgrounds, which facilitates and enhances their ability to connect with the community they serve. They pride themselves on creative and flexible thinking to provide unique solutions that help families flourish on their own.

FAMILIES SERVED 2,403

TOP 5 NEEDS ASSESSED

Basic Needs & Resource Management	72%
Social Support Systems	43%
Parenting Skills	40%
Household Relationships	38%
Coping Skills	30%





Clifford Beers prides itself with successful intervention and distribution of resources, which ultimately avoid repeated involvement with the child welfare system.

Clifford Beers

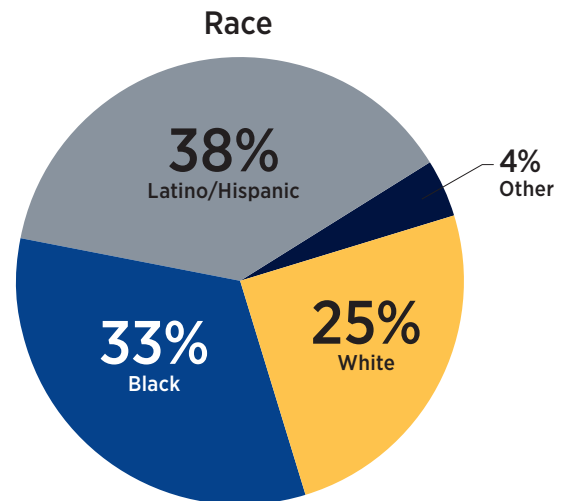
Clifford Beers Community Care Center located in New Haven, Connecticut, was established in 1913 as the first outpatient mental health clinic in the United States. Throughout its history, Clifford Beers has expanded its services to accommodate a large population with mental health and other types of resource needs. Clifford Beers is one of the community partner agencies that serve Community Support for Families (CSF) in CT-DCF Region 2.

Clifford Beers has served nearly 1,000 vulnerable families through CSF over the past 10 years. The Center’s inclusive approach and partnership places the family in the lead role of their own service delivery. With the goal of helping families become stable and connect with sustainable supports, Clifford Beers assists families in developing solutions, identifying community resources and supports, and developing permanent connections.

One of the biggest challenges Clifford Beers has encountered has been homelessness. Affordable housing is scarce for families with low or nonexistent income given that 47% of family heads of household are unemployed at intake. Further, families have additional barriers to obtaining housing such as negative credit ratings. Though the issues the agency

handles have remained consistent over the past decade, the intensity of the problems has increased. The pandemic triggered an unaffordable rental market and security deposit increase leaving vulnerable families homeless.

The case workers at Clifford Beers celebrate the wins in this challenging work, such as meeting the needs of very diverse families, especially those who are reluctant to engage. Clifford Beers prides itself on successful intervention and distribution of resources, which ultimately helps families avoid repeated involvement with DCF.



FAMILIES SERVED 989

TOP 5 NEEDS ASSESSED

Basic Needs & Resource Management	81%
Social Support Systems	50%
Household Relationships	38%
Coping Skills	38%
Parenting Skills	36%

CommuniCare, Inc., recognizes the importance of adjusting the Community Support for Families program for the new generation of parents it serves.

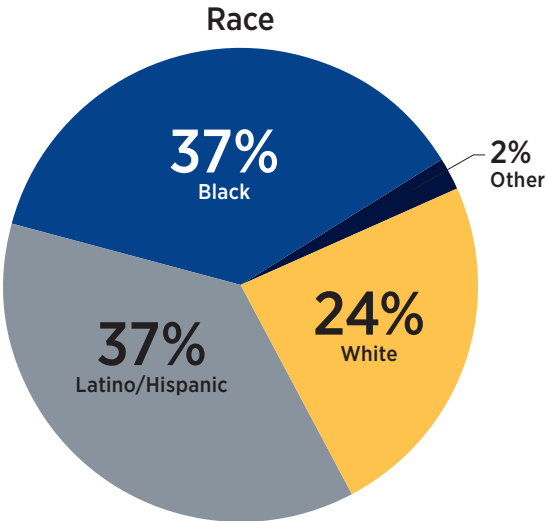
CommuniCare, Inc.

CommuniCare, Inc., located in New Haven, Connecticut, was founded in 1996 to provide behavioral health care. The organization’s mission is to build comprehensive coordinated and efficient integrated health care services across our sponsoring agencies and communities. CommuniCare, Inc. is a community partner agency in CT-DCF Region 2 for the Community Support for Families Program (CSF).

Through CSF, CommuniCare, Inc., has served 1,200 families in their homes and communities, helping them to identify resources and supports with the goal of reducing parental stress and increasing parental resiliency. The Community Support for Families program endorses a parent-driven, family-focused practice that incorporates natural supports and resources to meet a family’s needs and goals. CommuniCare, Inc., has helped families in Region 2 when they faced struggles including housing crises, intimate partner violence, and difficulties in navigating education systems. The agency also helps undocumented families find the resources they need. CommuniCare, Inc., has empowered families to become more resilient and confident in maintaining their families.

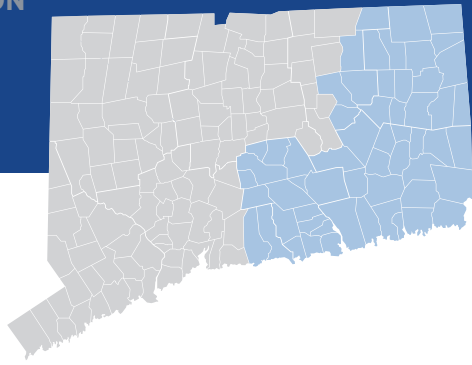
CommuniCare, Inc. recognizes the importance of adjusting the Community Support for Families Program for the new generation of parents they serve. They are increasingly helping families with younger parents that rely on social media by providing resources and information the way younger parents will likely search for them.

With the attentive service CommuniCare, Inc., provides through CSF, families can become independent and thrive on their own. Many of the vulnerable families CommuniCare, Inc., has served through CSF have been able to transition from a challenging phase of their life to a time of success and resiliency.



FAMILIES SERVED 1,210

TOP 5 NEEDS ASSESSED	
Basic Needs & Resource Management	77%
Social Support Systems	39%
Household Relationships	29%
Parenting Skills	25%
Coping Skills	14%



The partnership between Community Support for Families (CSF) and Community Health Resources has strengthened Connecticut families by introducing them to strong support networks and teaching them about community resources, which results in stabilization of the families.

Community Health Resources

Community Health Resources (CHR) offers a wide range of services for children, families, and adults whose lives have been touched by mental illness, addiction, or trauma. CHR's largest outpatient offices are in Manchester and Enfield, with smaller offices located throughout central and eastern Connecticut. CHR, located in the communities of Norwich, Willimantic, and Middletown, is the service provider for Community Support for Families (CSF) in CT-DCF Region 3.

CHR has served nearly 3,000 families through CSF since 2012. The partnership between CSF and Community Health Resources has strengthened Connecticut families by introducing them to strong support networks and teaching them about community resources resulting in the stabilization of families. Through CSF, CHR engages families in their service planning to build upon their individual strengths and to connect families to appropriate prevention, intervention, and support services. CHR works with families to build teams of support from within the community, arrange for services, coordinate care, provide follow up, and advocate on behalf of children and families.

FAMILIES SERVED 2,933

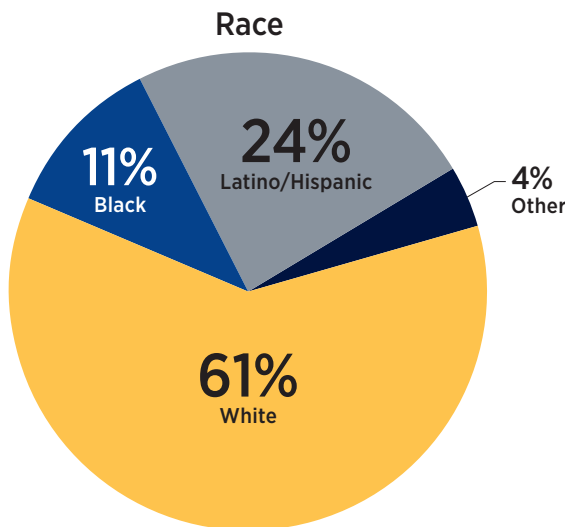
TOP 5 NEEDS ASSESSED

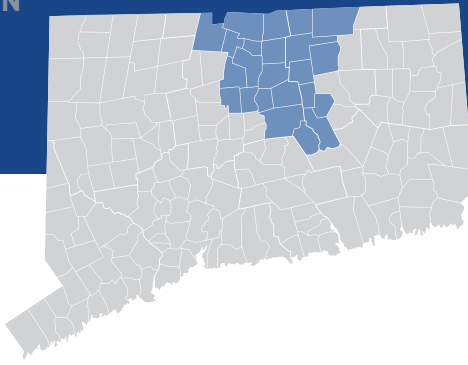
Basic Needs & Resource Management	85%
Social Support Systems	42%
Household Relationships	36%
Parenting Skills	33%
Coping Skills	30%

One of the main challenges that the families of CHR face is the lack of affordable housing. In addition, families struggle to travel around their communities to reach the resources they need due to lack of transportation. At intake, 47% of the family heads of household were identified as unemployed. CHR has assisted 86% of its CSF families in accessing basic needs.

One of the pressing issues CHR identified is the shortage of in-person therapists, especially with the increased severity of mental health crises, substance use, and intimate partner violence (IPV), all of which were exacerbated by the pandemic.

CHR affirms that families are resilient, but they need compassion, guidance, and resources. Through CSF, CHR is proud to have been able to reduce the number of family interactions with CT-DCF and to have creative solutions for the most unique situations for which families require help. With more options of resources, such as access to more programs for referrals, CHR will continue its high-quality service to families in Connecticut.





Through CSF, the Village works with creating an individualized care plan focused on the families strengths and needs and rooted in each family’s culture and experiences. This flexible and individualized approach facilitates long-term success for families.

The Village for Families & Children

The Village was established in 1809 in Hartford, Connecticut, with a mission to build a community of strong, healthy families who protect and nurture children. Throughout its history, the Village has offered an evolving array of programs and services always focused on assisting children and families.

The Village serves as one of the Community Partner Agencies in CT-DCF Region 4 for the Community Support for Families (CSF) program. Since the launch of CSF, the Village has helped over 1,900 families strengthen natural and community support systems to maintain safe and healthy home environments, reducing the risk of child abuse and neglect.

At the 10-year mark, The Village has addressed basic needs for 83% of its families. In addition, the Village has provided resources for families who are experiencing mental health crises and the critical encouragement and help needed to navigate complicated school systems and requirements.

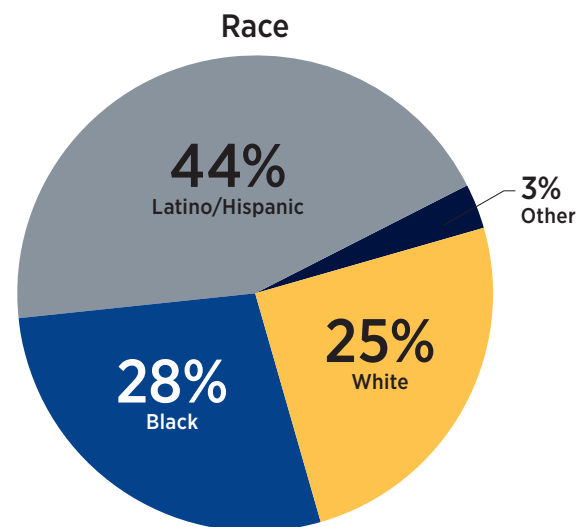
The CSF families served by the Village face many challenges — but affordable housing, health access for immigrant families, and an increase of domestic violence are the most common issues. Additionally, the needs of the families have gone from basic needs to much more complicated clinical needs.

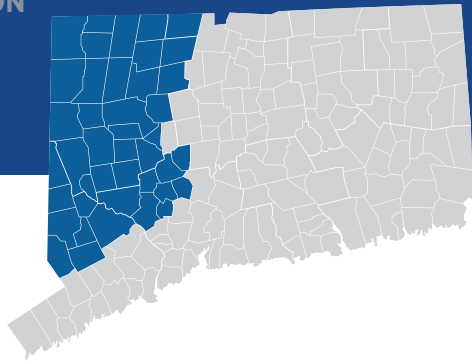
The case workers, supervisors and others involved at The Village celebrate wins and take pride in successes, such as meeting the unique and specific needs for families and being a resource hub regardless of the needs and identities of the families. Through CSF, the Village works with creating an individualized care plan focused on the families’ strengths and needs and rooted in each family’s culture and experiences. This flexible and individualized approach facilitates long-term success for families.

FAMILIES SERVED 1,931

TOP 5 NEEDS ASSESSED

Basic Needs & Resource Management	78%
Social Support Systems	48%
Parenting Skills	31%
Household Relationships	22%
Coping skills	22%





Wellmore Behavioral Health

Wellmore Behavioral Health was founded in 1951 to provide child mental health services, intervention, and behavioral treatment. Currently, Wellmore provides an integrated continuum of services including outpatient behavioral health treatment services and child abuse prevention and early intervention services.

Through the Community Support for Families program (CSF), Wellmore strives to connect families to resources in their community and has served nearly 2,500 families in CT-DCF Region 5. Wellmore works with CSF families on several issues; however, the most prevalent issues are homelessness, substance use disorders, and maintaining sobriety. These challenges require mental health resources and the staff to provide those services.

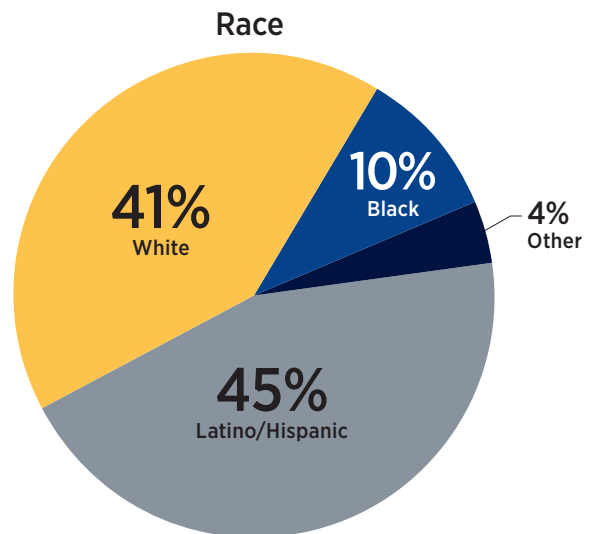
Wellmore serves families with unique needs that may not be a direct behavioral need but will lead to improvement of their quality of life, such as providing resources to complete driver’s education and acquire a driver’s license. The needs of the families have generally stayed the same over the years, but they have become more complex and required extra steps to achieve the families’ goals.

Family engagement has been essential to the success of Wellmore. Wellmore CSF workers partner with families to identify resources and support services, intensify the bond between caregivers and children, help families develop a sense of connection in their own community, and empower them to explore their families’ strengths, needs, abilities, and preferences.

FAMILIES SERVED 2,449

TOP 5 NEEDS ASSESSED

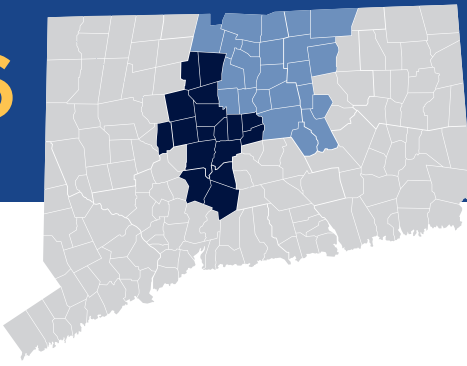
Basic Needs & Resource Management	78%
Social Support Systems	48%
Parenting Skills	31%
Household Relationships	22%
Coping Skills	22%



Wellmore CSF workers partner with families to identify resources and support services; intensify the bond between caregivers and children; help families develop a sense of connection in their

own community; and empower them to explore their families' strengths, needs, abilities, and preferences.





Wheeler Clinic

Wheeler Clinic, founded in 1968, serves Regions 4 and 6 for the Community Support for Families (CSF) program. With numerous locations, Wheeler provides various medical, mental, and behavioral care throughout Connecticut.

Since the inception of the CSF program, Wheeler has identified and helped to address the multiple layers of families' needs keeping the families intact and stronger. Wheeler connects families to community resources to establish and maintain relationships so that the families can become stable and independent. Providing services and resources means more than providing a phone number to the caseworkers and Wheeler staff. Program staff meet with the family at the times, locations, and frequencies that work best for each family, even providing on-call support 24 hours a day, 7 days a week.

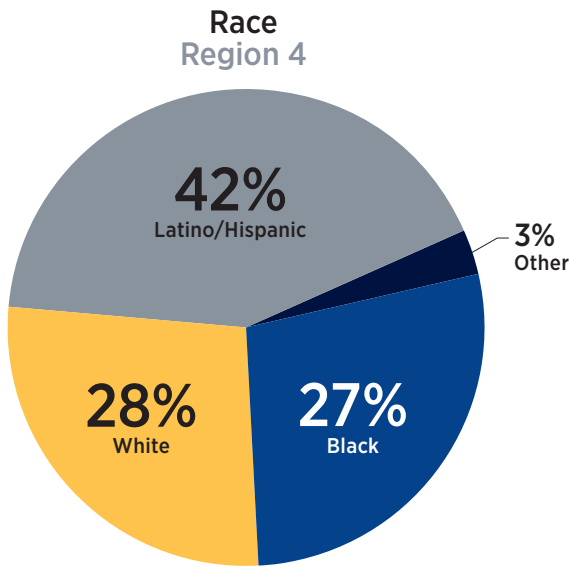
The families that Wheeler serves through CSF struggle to find safe and affordable housing, quality education for their children, and access to health care to treat and prevent illnesses. Wheeler is committed to finding long-term resources for families after their short-term treatment with CSF ends. This means strengthening natural and community support systems to maintain

safe and healthy home environments. CSF utilizes care coordination as a tool for empowering and encouraging families to identify their needs and take the lead role in the development of a plan of care.

Wheeler celebrates its team's talents and commitment to both the program and the families, which shows in the numbers. Families have been served at a timely manner regardless of the uniqueness of their needs and circumstances. Wheeler Region 4 has served over 1,600 families and Wheeler Region 6 has served over 1,900 families. Most of these families served were single-parent households.

As time has passed, the needs of families have changed and became more complex, which needs to be met with appropriate funding. In addition, Wheeler's team affirms that giving families access to CSF without initial interactions with CT-DCF will encourage them to seek help and create an overall positive outcome and experience for their families.

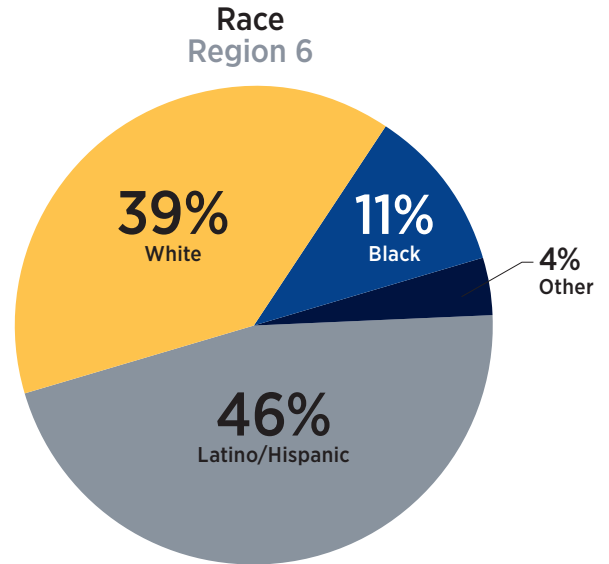
Wheeler is committed to finding long-term resources for families after their short-term treatment with CSF ends. This means strengthening natural and community support systems to maintain safe and healthy home environments.



FAMILIES SERVED 1,668

TOP 5 NEEDS ASSESSED REGION 4

Basic Needs & Resource Management	71%
Coping Skills	52%
Social Support Systems	49%
Parenting Skills	44%
Household Relationships	36%



FAMILIES SERVED 1,967

TOP 5 NEEDS ASSESSED REGION 6

Basic Needs & Resource Management	82%
Social Support Systems	50%
Parenting Skills	32%
Coping Skills	30%
Household Relationships	24%

Family Updates

A.J. CAME TO THE ATTENTION OF THE DEPARTMENT OF CHILDREN AND FAMILIES EXPERIENCING HOMELESSNESS due to being evicted from their previous home. The client is a single mother, working two jobs, with six children ranging from 4 to 15 years of age. For months, the family lived in various motels while searching for a place to live. Fortunately, the client was able to find a landlord that would forgive her eviction and provide her with an opportunity to obtain housing. CSF was able to support the family's transition by assisting A.J. with the security deposit, first month's rent, and resources to obtain gently used furniture. Once the family settled into their new home, the family struggled with getting appropriate transportation for all six children to attend school. The bus stop for the children was more than a 40-minute walk causing the client to lose hours of work. The client was not able to make her shifts on time and would need to leave early to pick her children up. The client was at risk of losing her job and all she had worked toward. CSF stepped in and worked directly with the school systems to arrange the bus stop to be closer to home. Currently, the family is settled into their new home and schools. The children are all involved in extracurricular activities and the eldest is thinking of her plans for after graduation. Finally, the client is employed and is thinking about going back to school for her associate degree!

The client was at risk of losing her job and all she had worked toward. CSF stepped in and worked directly with the school systems to arrange the bus stop to be closer to home.

“My case workers for CSF were so easy to talk to. They wanted to hear me. All the things I was trying to do, all the things I couldn’t do, and all the things I failed to do.”

Just about a year and a half ago the Department of Children and Families contacted me to meet me at my residence for an interview. The fear and sadness that I felt was overwhelming. My children and I were in a bad place at that time, meaning bad situations everywhere you turned in my home. DCF came to my home and spoke to all of us individually and found I was doing the best I could with resources I had. That’s when DCF mentioned CSF. DCF said it’s a program that helps with families in need and can give me guidance on where to go for help, however, they need to come to the home. Oh no, another person coming here to my home, judging me, wondering why I would let it get this bad, thinking if I even cared about my kids. I thought to myself, “Well I already let DCF in. Why not another?” Knock, knock! There was CSF, at my door. They came in with smiles and a blind eye to the conditions of the home to not judge me, to not make me feel lower than I already felt. My case workers for CSF were so easy to talk to. They wanted to hear me. All the things I was trying to do, all the things I couldn’t do, and all the things I failed to do. There was a weight lifted off my shoulders after meeting with them for the first time. CSF couldn’t give me immediate answers, but my case workers did say they can help, and that they were there for me and my children.

With all these resources that my case workers and CSF provided my family with, we are now great. My home is full of furniture, not extension cords. My kids and I have family night every Wednesday and laugh together. My home is warm in the winter, my water is hot, and when I flip a switch a light turns on! A year and a half ago none of this was possible. My kids went to bed unhappy missing out on normal activities. Winter was freezing no matter how mild it was. Eating dinner with a winter coat was normal. My dishes can be done in the sink, I do not have to boil water just to rinse them. My children and I do not have to go next door for a warm shower anymore. We have hot water here at home. I still have struggles, but I know where to get the help thanks to CSF. I am working now, I have a car, my power is on, and I have heat and hot water! Most importantly I have my family back!

THANK YOU, CSF, FOR ALL YOUR HELP, AND TO MY CASE WORKERS I LOVE YOU BOTH.

You have made me feel normal again and you gave me confidence back. Today I can proudly say I am a great mom! I am forever grateful I had the chance, the opportunity, and the success with your program. Thank you.

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SCHOOL OF SOCIAL WORK

PERFORMANCE
IMPROVEMENT CENTER

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