Finding Home:
Connecting Multiple Systems to Create a Safe Space for Family Recovery

On Monday, January 29, CT DMHAS, Early Head Start, the CT Office of Early Childhood, and the CT Women’s Consortium collaboratively presented a daylong event on the integration of the unique challenges of parenting infants and young children into the recovery process, with specific attention to the assessment of housing needs into recovery planning for parents.

Meeting the Housing Needs of Vulnerable Families

The day began with a presentation by Dr. Ann Farrell, Director of Research at Chapin Hall, Chicago, a renowned expert the development of policies and actionable strategies to improve the well-being of our most vulnerable children, youth, and families. She addressed the significance of the impact of mobility on children and families and how understanding housing mobility (and adequacy) can enhance what we do. She also described the use of the Quick Risks and Assets for Family Triage (Q-RAFT) screening tool, which is designed to identify housing needs, enabling prompt referral of families who appear to have significant to severe housing problems.

Dr. Grace Whitney, Director of Early Childhood Initiatives at SchoolHouse Connection, a national organization working to overcome homelessness through education, then presented on Diverse Policies Affecting Child and Family Homelessness, with a focus on comparing the ways we understand housing needs, the different definitions of homeless and how understanding housing circumstances can limit or maximize child and family access to supports and hopes for stability and success. She also discussed the TEN S’s for SAFETY tool, which is designed to ensure that no matter where children and their families are living, the conditions under which they are living are safe and promote the health and wellbeing.

Recovery & Infant Mental Health Perspective

In the afternoon, an expert panel addressed variation in how housing needs are assessed, how service eligibility is defined, and how a family's housing adequacy, safety and stability are related to achieving successful recovery. Their comments increased audience understanding of the role that partners play in providing effective services.

The day concluded with semi-structured activities to help participants examine their current practices and identify enhancements that can be made to better direct services and connect resources based on the unique needs of families, and, particularly, their needs for stable housing and a safe space for living the recovery process. Using an infant mental health perspective, four content areas were addressed, including recovery for the adult, recovery for the parent-infant/parent-child dyad, recovery for the parent using a stable housing framework connected to parenting efficacy, and housing safety/stability to support healthy child development.