



MECKLENBURG COUNTY
North Carolina

Community Support Services

Keeping Families Together Program Evaluation 2020-2023

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Keeping Families Together

Model Overview



The Keeping Families Together (KFT) model is a supportive housing intervention designed to stabilize families that are both involved in the child welfare system and experiencing housing instability or homelessness. Developed and piloted in New York City by the Corporation for Supportive Housing (CSH), with funding from the Robert Wood Johnson Foundation (RWJF), KFT uses a cross-systems, family-centered approach that serves families at the intersection of child welfare involvement and homelessness.^{1,3} The model combines supportive housing with wrap-around services to prevent out of home placements for children, improve family reunification outcomes, decrease child welfare involvement, and enhance housing stability and overall wellbeing for vulnerable child welfare involved families.⁷ Evaluations of the Keeping Families Together (KFT) pilot and larger multi-site supportive-housing demonstrations show consistent improvements in housing stability and measurable reductions in child-welfare out of home placements, as well as increased reunifications, when families receive supportive housing combined with wraparound services.^{5,7,9} These system-level changes can also translate to public-system cost savings over time, particularly when programs prioritize the highest-risk families and build strong cross-system partnerships.^{6,8} Evidence on improvements in parenting and longer-term parent/child wellbeing is mixed, underscoring that housing plus targeted clinical and parenting services together produce the strongest, most lasting effects for families.^{7,9}



The KFT model is designed to stabilize families that are both involved in the child welfare system and experiencing housing instability or homelessness.

Keeping Families Together

Mecklenburg County

Mecklenburg County Keeping Families Together (MeckKFT) is a permanent supportive housing initiative designed to stabilize families who have had multiple interactions with the child welfare and homeless systems and who are involved with the Mecklenburg County Division of Youth and Family Services (YFS) and experiencing homelessness at the time of program referral. Launched in 2019, the program provides rental subsidies and comprehensive supportive services to families facing challenges such as substance use, mental illness, domestic violence, and chronic medical conditions.⁴ The primary program goals are to prevent foster care placements, promote family reunification, and enhance overall housing stability and family well-being.

In July 2019, Mecklenburg County's Community Support Services released a Request for Proposals (RFP) seeking nonprofit organizations to partner in the implementation of the KFT program. The RFP solicited proposals from qualified agencies to provide case management, supportive services, and tenant-based rental subsidies for up to 50 eligible families. The MeckKFT contract was awarded to Supportive Housing Communities (SHC) who began providing housing and services to identified families using a family-centered and trauma-informed approach in early 2020.

This report presents the first evaluation of MeckKFT, examining the outcomes of all households enrolled in the program between 2020 and 2023. Using program enrollment data from the Homeless Management Information System (HMIS) and case data from Youth and Family Services, the evaluation describes household and sociodemographic characteristics at program entry, tracks child welfare involvement before and after housing move-in, and examines key housing outcomes, including time to housing, housing retention, and exit destinations. Findings from this evaluation provide a detailed picture of program implementation and participant trajectories, offering a foundation for understanding early outcomes and informing ongoing program improvements.



This evaluation uses a descriptive, longitudinal design to examine all households enrolled in the Mecklenburg County Keeping Families Together (MeckKFT) program between January 1, 2020, and December 31, 2022. The dataset was compiled using program enrollment records for the period of January 1, 2020, and December 31, 2022, from the Homeless Management Information System (HMIS) and child welfare data from Youth and Family Services (YFS), covering the period from January 1, 2019, to December 31, 2023. Household-level and child-level data were linked to provide a comprehensive picture of child welfare involvement and housing outcomes over time. One household was excluded from the analysis because they were rehoused as a single person when their parent was exited from the program. They are included as a member of the parent-child household but not as a head of their own household. Analyses focused on multiple time points: pre-program entry, program entry, post housing move-in, and one year post move-in. Descriptive statistics, including frequencies, percentages, and medians, were used to summarize household characteristics and outcomes across these time points. This approach allows the evaluation to document program implementation, describe participant trajectories, and provide an early assessment of trends in child welfare involvement and housing stability among MeckKFT participants.

Measures

Child Welfare Measures

Intake: Indicates that there was a reported case of child abuse or neglect.

Investigation: Indicates that a Child Protective Services (CPS) investigation was opened in response to an intake report.

Family in Home: Refers to cases in which ongoing in-home services were provided following an investigation.

Permanency Planning: Refers to cases in which a child or children were removed from the home and formal plans were established for long-term care or reunification.

Total Child Protective Services Reports: Sum of all reports across intake, investigation, family in home, and permanency planning categories at each time point.

Housing Measures

Length of Time to Housing: Number of days from program entry to housing move-in.

Housing Retention: Indicates whether families remained in housing after move-in for the duration of the evaluation period or for at least one year post move-in.

Exit Destinations: The type of housing or living situation families transitioned to upon exiting the program, including stable housing, temporary housing, or other outcomes.

Data Analysis

Descriptive analyses were conducted to summarize household and child-level characteristics, child welfare involvement, and housing outcomes across the defined time points. Frequencies and percentages were calculated for count and categorical variables (e.g., CPS investigations, family in-home services, permanency planning, housing retention, and exit destinations). Changes over time in child welfare involvement were examined by comparing pre-program, post move-in, and one-year post move-in measures. Housing retention was defined as remaining in program-supported housing for at least one year post move-in or until the end of the evaluation period. Cases with missing data on key outcomes were included in analyses where possible, and denominators were adjusted as needed. All results are presented descriptively to provide a comprehensive overview of program implementation and participant trajectories.

Results

These data describe program participant characteristics at program entry. From 1/1/20–12/31/22, the Keeping Families Together program served 65 households totaling 241 people (74 adults and 166 children).

Age: 53% of adults were between ages 25–34. Most children (147) were age 12 or younger, including 73 under age 5. Seven households included parenting youth ages 18–24.

Race/Ethnicity: The majority of participants identified as Black, African American, or African (83%; 200 individuals); 12% identified as multi-racial, and 5% identified as White. It is important to note that extensive research documents persistent racial disparities in the child welfare system, with Black and Indigenous families disproportionately investigated, substantiated, and separated compared to White families. These disparities are not driven by higher rates of maltreatment, they are driven by structural inequities, particularly housing instability, economic hardship, and differential surveillance which increase families' risk for child welfare involvement (Dettlaff & Boyd, 2021).

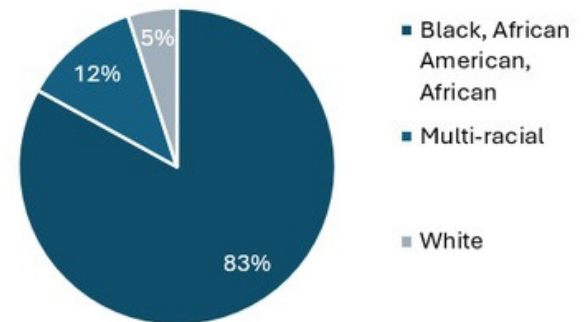
Household Composition: 95% of households were led by women.

Domestic Violence: 34 adults (45%) reported being survivors of domestic violence.

Income and Benefits: At project start, 47% of adults reported no income, while 35% reported a monthly income off \$1,000 or more. Eighty-four percent had health insurance, most through Medicaid (200 people), and 76% reported receiving at least one type of non-cash benefit such as SNAP, WIC, or TANF.

Health: The most frequently reported conditions were mental health disorders (44 people), chronic health conditions (18 people), and physical disabilities (111 people). Sixteen individuals reported two conditions, and four reported three or more.

Chronic Homelessness: 22 households met criteria for chronic homelessness at program start, defined as experiencing both a disability and being homeless continuously for one year or at least four times in three years totaling 12 months.



Housing Status Prior to Entry

To be eligible for MeckKFT, all families were homeless at the time of referral. During the period of time between program referral and program enrollment, some households transitioned to temporary housing situation, however, most were in in homeless living situations.

Homeless situations (60 households): 44 were living in a place not meant for habitation; 16 were in emergency shelters.

Temporary situations (4 households): 1 was in a hotel/motel that they were paying for themselves; 3 were doubled up with friends or family.

Institutional situations (1 household): 1 had stayed the night before intake in a psychiatric facility.

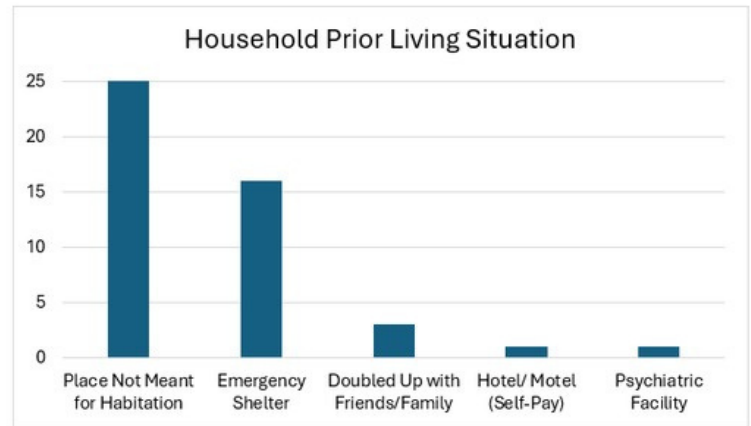


Figure 2. Households' Living Situation Prior to Program Entry



Housing Outcomes

As of 12/31/22, 46 households (171 people) had been housed through the program. The average time from program entry to housing move-in was 139 days.

- Of those, 35 households (127 people) remained housed at the cut-off, reflecting a 76% housing retention rate.
- 8 households (24 people) exited the program before being housed.
- In total, 19 full or partial households (66 people) exited the program. Of these:

- 15 people (representing 7 households) exited to living with friends/family (doubled up); 3 of these were minors who left their caregiver's household
- 5 households (19 people) exited to market-rate rentals
- 2 households (8 people) exited to a place not meant for habitation
- 2 households (11 people) exited to public housing
- 2 households (11 people) exited to hotel/motel (self-pay)
- 1 household (2 people) exited without sharing their destination

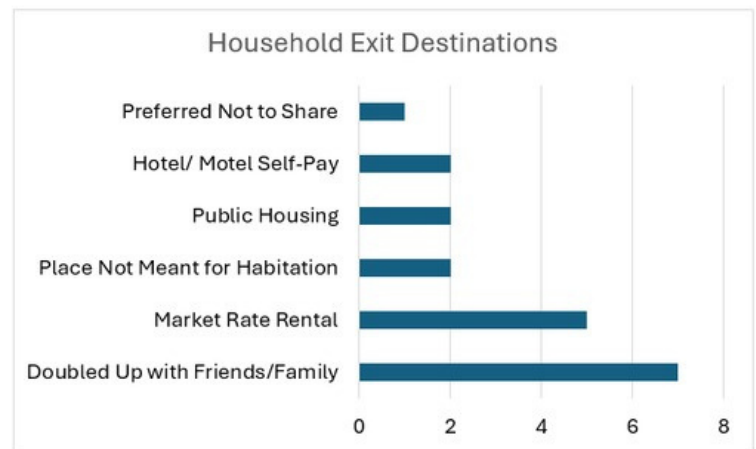


Figure 3. Exit Destinations for Exited Households

Pre-Program Entry Child Welfare Involvement

All 65 households analyzed had prior involvement with Mecklenburg County Youth and Family Services.

- Families averaged 6 total cases prior to entry (median = 5), totaling 403 cases across all households.
- **Intake:** 94% of households, averaging 3 cases (median = 2). Please note it is possible that the 4 households without an intake could have had an intake prior to the reporting January 1, 2019.
- **Investigations:** 61 households, averaging 2 cases (median = 2);
- **Family In-Home Services:** 48 households, averaging 1 case (median = 1).
- **Permanency Planning:** 15 households, averaging 1 case (median = 1), though 5 households experienced 2 cases.

Post Move-In Child Welfare Involvement

Of the 65 households in the pre-program analysis, 48 were housed prior to 12/31/22.

- 31 households had child welfare cases post-move-in, totaling 198 cases (average = 6, median = 6).
- **Intake:** 27 households, averaging 4 cases (median = 3).
- **Investigations:** 24 households, averaging 3 cases (median = 3).
- **Family In-Home Services:** 19 households, averaging 1 case (median = 1).
- **Permanency Planning:** 3 households, each with 1 case.

When comparing pre-entry to post move-in:

- 32 households (67%) had fewer cases
- 15 households (31%) had more cases
- 1 household (2%) had no change

One Year Post Move-In Child Welfare Involvement

By the study cut-off, 38 households had been housed for at least one year.

- 23 households had child welfare cases one year post-move-in, totaling 94 cases (average = 3, median = 1).
- **Intake:** 20 households, averaging 3 cases (median = 2).
- **Investigations:** 17 households, averaging 2 cases (median = 1).
- **Family In-Home Services:** 11 households, averaging 1 case (median = 1).
- **Permanency Planning:** 3 households, each with 1 case.



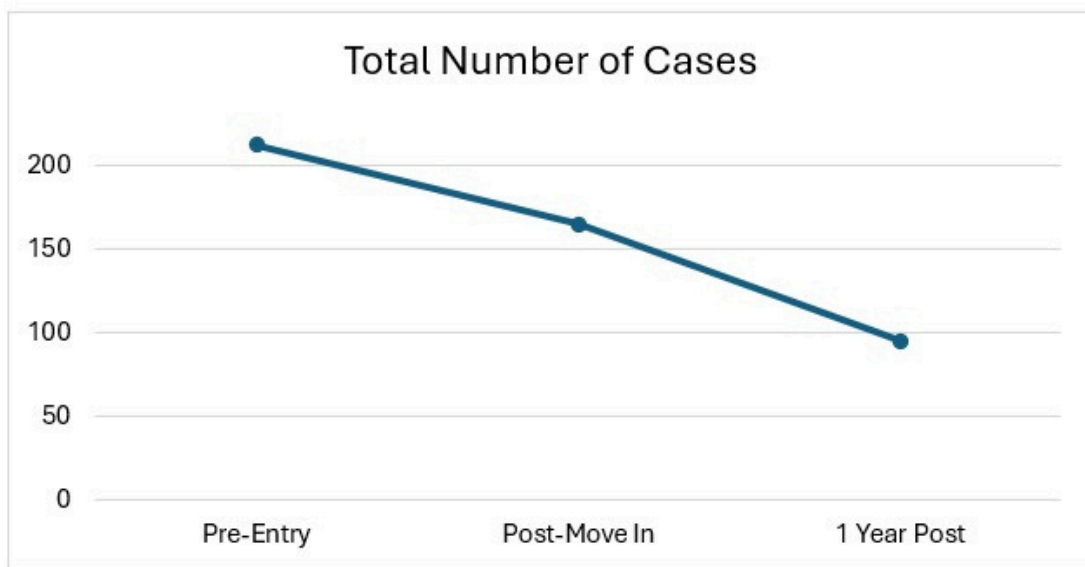


Figure 4. Total Child Welfare Cases Over Time for Households Housed 1 Year Post Move-in

Change Over Time

- 23 of 38 households (61%) had fewer cases post-move-in compared to pre-entry.
- 32 of 38 households (84%) reduced cases between move-in and one year post-move-in.
- 29 of 38 households (76%) reduced cases from pre-entry to one year post-move-in.

Although 14 households experienced an increase in cases between pre-entry and post-move-in, nearly all (13 of 14) showed declines in the following year. For this group, total cases rose to 113 immediately post-move-in but dropped to 61 one year later—a 46% reduction.

Overall, 76% of households housed for at least one year reduced their child welfare involvement, and 40% had no open cases at all at the study cut-off.

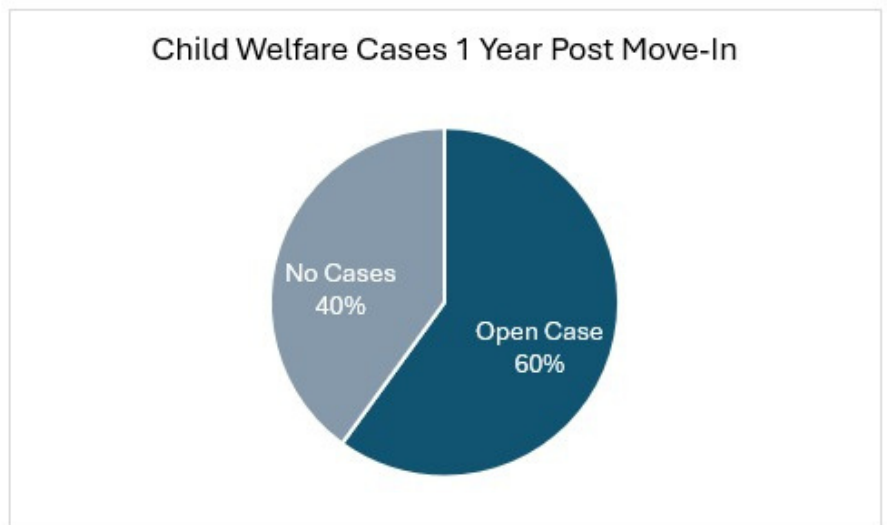


Figure 5. Child Welfare Cases (1 Year Post Move-In)



Discussion

Summary of Key Findings

The Mecklenburg County Keeping Families Together (MeckKFT) program demonstrated meaningful impacts on housing stability and child welfare involvement for participating families between 2020 and 2023.

Housing Outcomes: Of the 65 households enrolled, 46 were successfully housed with an average move-in time of 139 days. Housing retention was strong—76% of housed households remained in stable housing at the study cut-off.

Participant Characteristics: The program primarily served Black, women-led households facing significant barriers, including high rates of domestic violence, mental health disorders, chronic health conditions, and extremely low income. Seventeen households met the definition of chronic homelessness at program start.

Child Welfare Involvement Pre-Entry: All 65 households analyzed had prior child welfare cases, averaging 6 per household (median = 5). Most had intake cases, and many also experienced investigations, family in-home services, or permanency planning.

One Year Post Move-In: By the one-year mark, 76% of households had reduced child welfare involvement compared to pre-entry, and 40% had no active cases. Even among households with increased cases immediately after move-in, nearly all showed reductions by one year, with total cases dropping 56% (from 211 pre-entry to 93 1-year post move-in).

Post Move-In Trends: Among the 48 households housed before the study cut-off, total child welfare cases fell from 287 pre-entry to 197 post move-in. Two-thirds of households (67%) experienced fewer cases, while 31% had increases and 2% had no change.

Together, these findings indicate that supportive housing paired with wraparound services can stabilize high-need families, reduce child welfare system involvement over time, and help families remain safely and stably housed.

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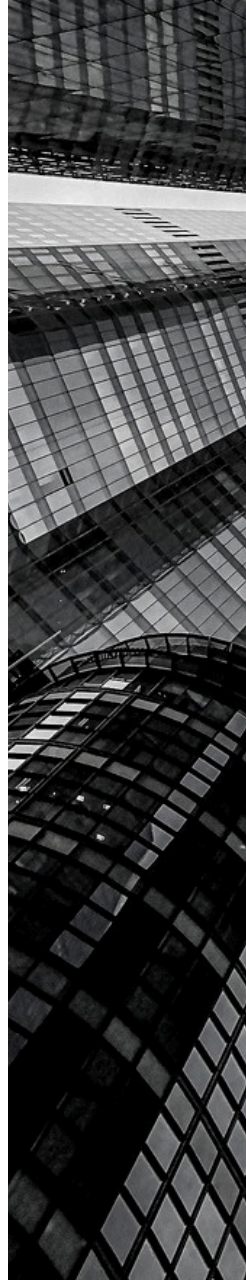
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Strengths and Opportunities

Several program strengths are evident in these findings. First, the program successfully engaged and retained families with some of the highest levels of need, including those meeting chronic homelessness definitions. Second, housing retention was high despite participants facing multiple barriers, suggesting that supportive housing with wraparound services can create a stabilizing foundation for vulnerable families. Third, reductions in child welfare involvement align with the national evidence base for the KFT model, highlighting the value of housing coupled with services in preventing out of home placements, supporting family reunification, and addressing system-level disparities in child welfare outcomes.

This evaluation also highlights several opportunities to strengthen MeckKFT moving forward. While retention was strong, the average time to housing was 139 days, suggesting a need to streamline housing navigation and reduce housing delays that prolong instability for families. Although child welfare involvement decreased for most participants, a subset of families initially saw increases in cases post move-in, which may indicate the need for more intensive early engagement and coordination with child welfare workers. In addition, participant data revealed high rates of domestic violence, mental health conditions, and poverty, underscoring opportunities to deepen partnerships with clinical providers, domestic violence services, and workforce development programs to more fully address root causes of child welfare involvement. Finally, expanding program capacity beyond the initial 50 households would allow MeckKFT to reach more families at the highest risk and generate broader system-level impact.



Evaluation Limitations

While the findings from this evaluation are promising, limitations may be noted. First, the analysis is descriptive in nature and cannot establish causality; reductions in child welfare involvement cannot be attributed solely to program participation. Second, the evaluation covers a relatively small, local sample of families, limiting generalizability. Third, the study period coincided with the COVID-19 pandemic, which may have influenced both housing stability and child welfare system involvement in ways not captured in the data. Fourth, some households exited early or had missing data on key outcomes, which may lead to under- or overestimations of program effects. Finally, the evaluation reflects only short- to medium-term outcomes (2020–2023); longer-term impacts on child and family wellbeing, housing stability, and system-level costs should be assessed in the future.



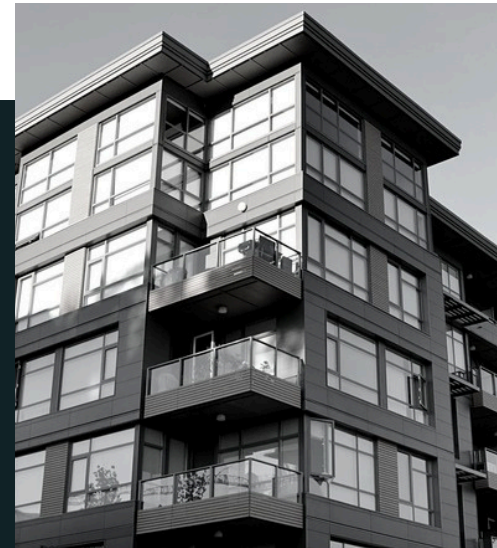


Implications for Policy and Practice

Despite these limitations, evaluation results suggest important implications for both practice and policy. For practitioners, the findings highlight the need for robust wraparound supports—including services addressing mental health, domestic violence, and economic stability—to complement housing. For policymakers, the evaluation reinforces that supportive housing can be an effective intervention for child welfare-involved families, potentially reducing costly foster care placements and improving long-term family stability. Sustained investment, cross-system collaboration, and attention to the highest-need families are critical for maximizing the program’s impact.

Conclusion

The Mecklenburg County Keeping Families Together (MeckKFT) program demonstrates that supportive housing paired with wraparound services is a powerful intervention for families at the intersection of homelessness and child welfare involvement. Between 2020 and 2023, the program achieved strong housing outcomes, with the majority of families successfully housed and 76% retaining housing at the study cut-off. At the same time, child welfare involvement declined meaningfully, with three-quarters of families reducing their cases and 40% having no open cases one year after move-in. These findings are consistent with national evidence on the Keeping Families Together model, underscoring that housing stability is closely linked to improved child and family outcomes. The evaluation also highlights opportunities to strengthen the program further—particularly through faster housing placements, expanded clinical and domestic violence supports, and scaling the program to reach more families. Overall, MeckKFT provides a promising framework for addressing the dual crises of family homelessness and child welfare involvement in Mecklenburg County. Continued investment and cross-system collaboration will be essential to sustain and build on these early successes, with the potential to reduce system costs, strengthen families, and create lasting stability for children and parents alike.



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